

WEST GLOUCESTERSHIRE PRIMARY CARE TRUST

RECORDS MANAGEMENT STRATEGY

1.0 INTRODUCTION

- 1.1 In March 1999 a HSC Circular 1999/053 was produced with the primary function of improving the Management of NHS Records in Health Authorities and NHS Trusts.

The Circular:

- Sets out the legal obligations for all NHS Bodies to keep proper records
- Explains the actions needed from Chief Executives and other Managers to fulfil these obligations
- Provides good Guidelines and Good Practice
- Explains the requirements to select Records for permanent preservation
- Lists suggested minimum periods for Retention of NHS Records
- Indicates where further information may be found

- 1.2 NHS Records are Public Records and therefore the Strategy applies to ***all types of Records***, including;

- Patient Health Records (including Private Patients seen on NHS premises)/Electronic and Manual Records
- Accident and Emergency, Birth, and all other Registers
- Theatre Registers and Minor Operations (and other related) Registers
- Administrative Records (including Personnel, Estates, Financial and Accounting Records; notes associated with Complaints, Health and Safety, Infection Control etc).
- X-ray and Imaging Reports (**NB** Specific advice on record keeping for procedures and treatments, such as X-rays, which use Ionising Radiation's can be found in HSG(95)3, "Health Service Use of Ionising Radiations")
- Photographs, slides and other images
- Micro-film/Micro-fiche
- Audio and video tapes, cassettes, CD-ROM etc.
- Computer data-bases, disks and all other electronic records
- Material intended for short-term or transitory use, including notes and "spare copies" of documents

NB this list is not exhaustive but Records Management applies to any material that holds information gathered as part of the work undertaken in the NHS.

The HSC Guidance draws attention to the fact that the ownership and copyright in such Records produced is, as a rule, with the NHS Trust, not with any individual employee or contractor.

- 1.3 One of the recommended actions included in the HSC 1999/053 is that NHS Trust and Health Authorities should draw up a Records Management Strategy. In addition The Controls Assurance Standard on Records Management sets as criterion 2 that **"There is an organisation-wide Records Management Strategy which is endorsed by the Board"**.

2.0 BACKGROUND

- 2.1 All NHS records are public records under the terms of the Public Records Act 1958 which sets out responsibilities for everyone who works with such records. The Secretary of State for Health and all NHS organisations have a statutory duty to make arrangements for the safekeeping and eventual disposal of records. The Chief Executive, Directors and Senior Managers are personally accountable for the quality of records management within the Trust and all line managers are required to ensure that their staff, whether clinical or administrative are adequately trained and apply the appropriate guidelines. A number of other statutory and local issues influence records management including the following:

The Caldicott “Review of Patient Identifiable Information”(1997) raised concerns about the general lack of awareness of confidentiality and information security requirements throughout the NHS at all levels. The Caldicott Committee was also concerned at the NHS’s ability to limit access to patient information to those who need to know. The Caldicott Principles are being implemented under the guidance of the Trust Caldicott Guardian in co-ordination with other NHS Bodies in the County.

The Data Protection Act 1998 established a set of principles with which the Trust must comply. The Act places statutory restrictions on the use of personal information which should not be kept longer than is necessary for the purpose.

The Freedom of Information Act 2000 gives the right of access to all types of information held by the NHS and its partners. The Act embodies much of what is already good practice in the NHS as set out in the Code of Openness and it supplements and complements the Data Protection Act. The Act has a significant effect on record keeping arrangements in public authorities.

- 2.5 Everyone working in the Trust who records, handles, stores or in any capacity comes across patient information has a personal Common Law Duty of Confidence to patients and to the Trust. The Duty of Confidence continues even after the death of the patient, or after an employee or contractor has left the Trust. The Trust has a Code of Conduct and all employees subscribe to this Code. There are other statutory restrictions on the disclosure of information as identified in HSC 1999/053.
- 2.6 The effective management of records applies equally to manual as well as electronic records.
- 2.7 The West Gloucestershire Primary Care Trust Records Management Strategy sets out the local requirements based on National Guidance. It aims to incorporate Good Practice whilst setting out recommendations for actions that may continue regardless of future reconfiguration of services.

3.0 POLICY STATEMENT

- 3.1 ***West Gloucestershire Primary Care Trust is committed to a systematic and planned approach to the Management of Records within the organisation, from their creation to their ultimate disposal. This will ensure that the Trust can control both the quality and quantity of the information that it generates; it can maintain that information in an effective manner; and it can dispose of the information appropriately when it is no longer required.***

4.0 AIMS AND OBJECTIVES

- 4.1 The Records Management Strategy aims to set out clearly the Trust’s approach to Records

Management and it provides a framework for developing good Records Management in the Trust.

N.B. In this context a record is anything, which contains information (in any media) which has been created, or gathered as a result of any aspect of the work of West Gloucestershire Primary Care Trust

5.0 STRATEGIC AIMS

Strategic aims, outline action plans and outcomes are set out below:

5.1 Record Keeping

Strategic Aim (i):

Development and Training in Record Keeping (electronic and manual) will be given a priority in Records Management.

Records are valuable because of the information they contain. However, the information can only be of use if it is legible, up-to-date and easily accessible. The variance of record keeping can raise issues related to risk to the employees and also users of the Trust facilities.

Good record keeping is commonly perceived as being related to the recording in a Patients Health Record. However, *all services at all levels in the Trust* should be adhering to good record keeping.

Record keeping applies *to electronic as well as manual records* and the value of the information is only as good as that recorded.

Senior Managers need to take responsibility for ensuring that records produced by their staff are standardised to comply with the needs and requirements of the service. In addition to guidance issued by professional bodies the Public Records Office has produced a series of standards and guidance for records management and the full text of these documents can be found on the Public Record website: <http://www.pro.gov.uk/>

Actions:

- Develop an outline of Record Keeping Standards
- Detail the Standards in each Service area
- Include Record Keeping Training in Induction Programmes for new staff (at corporate and local level including Legal requirements)
- Develop a programme of training and updating for all staff. with the details being included in personnel files and personal development portfolios
- Set up a plan of regular Audits

Outcomes:

- A high level Trust Record Keeping Policy for all Records (manual and electronic) would be produced and implemented
- A comprehensive Training programme would be available for all staff
- A process for regular Audit would be established

5.2 Sharing Records

Strategic Aim (ii):

All staff will work towards rationalising record collections through sharing records and the information they contain, (subject to the requirements of the Data Protection Act 1998 and the Principles of Caldicott), by merging or ensuring effective cross-reference. It must be recognised that data belongs to the Trust and not to individuals or departments.

It is important to recognise that NHS Records are public records and the Chief Executive is ultimately responsible for all records generated in the Trust. Each individual in the Trust has a responsibility for records they create but they do not own them.

It must be noted that the Trust recognises restrictions on the disclosure of information. These are to be respected at all times.

Actions:

- Identify records that could be shared
- Set up process for prospectively merging or cross-referencing manual and/or electronic records
- Ensure effective communication to all staff

Outcomes:

- A comprehensive list of all types of records held and by whom would be established
- A plan for setting up processes for merging or cross-referencing records would be agreed

5.3 Tracing and Security

Strategic Aim (iii):

Security and Tracing of records will be incorporated within the management of all records within the Trust.

Records are valuable for the information they contain but the information is only of value if it is accessible when needed.

It is essential for records to be located quickly and efficiently. Health and Administrative records get misplaced or lost when they are removed from their source, for whatever reason, because their next destination is not clearly recorded. To avoid this there needs to be a comprehensive Tracing System for all records.

The success of any Tracing System depends on the people using it and therefore all staff, whatever their status, must be made aware of its importance and given adequate Training and updating.

When a non NHS agency or individual is contracted to carrying out NHS functions, their contract must include clauses on confidentiality and the use of personal information, in line with the Data Protection Act 1998 and the Caldicott Principles. It must specify that patient information is subject to the security requirements of West Gloucestershire Primary Care Trust and is used only for purposes consistent with the terms of the contract. Contracts must also include what action will be taken in the event of confidence being breached.

Guidance for the security of Health Records should be available for all staff.

Records in constant or regular use may need to be kept near the user of the records or transported. They must still be traced and kept securely with a balance maintained between the needs for security and accessibility.

Actions:

- Ensure all staff are aware of Caldicott, Data Protection, Freedom of Information and any other legal requirements
- Within each service/professional group review arrangements for security and tracing of records
- Through consultation with staff set standards for security and tracing of manual and electronic records
- Identify ways to promote and support successful implementation of the Standards through raising awareness, training and updating

Outcomes:

- A comprehensive picture of where records are stored will be available throughout the Trust.
- The work to comply with the requirements of Caldicott/Data Protection/Freedom of Information and Trust IM&T Policies will be supported.

5.4 Storage and Retention of Manual Records

Strategic Aim (iv):

All manual and electronic records, in the Trust will be appropriately stored and retained in accordance with the Trusts recommended retention period and according to the Department of Health's recommendations (HSC 1999/053)

All "current/active" records should be stored so that they are accessible and comply with security and health and safety requirements.

Comprehensive records should be retained when long-term storage is used and this should include specification of destruction dates. A mechanism for reviewing records for disposal should be developed and implemented

Consideration should be given to records for permanent preservation. These will need to be initially placed in long term storage with a view to them then being moved to the County Archive as agreed with the Archivist. Boxes of such records must be clearly marked accordingly. Any existing records over 60 years old must not be destroyed but passed to the Archivist.

This Records Management Strategy incorporates recommended retention periods for records (Appendix B). This schedule is based on those minimum requirements identified in HSC 1999/053 but has additional entries and it has been organised, as far as possible into service areas.

Actions:

- All managers will check that storage arrangements for records comply with Security and Health & Safety requirements
- A plan should be developed to ensure regular archiving takes place for manual and electronic records. This plan should include review dates for determining those records to be selected for permanent preservation, destroyed or retained for research or

- litigation purposes
- Guidance should be made available for good practice on packing, labelling and identifying records in readiness for long-term storage
- All boxes placed in long term storage should be clearly marked in accordance with the guidance
- The Trust should be working towards a process of archiving some of its records electronically, with new records for these services being inputted directly onto systems

Outcomes:

- The risk to staff in handling records would be reduced
- In the future there will be an automatic prompt for records to be reviewed prior to destruction
- Records will only be kept for as long as required and the need for storage will be managed effectively
- The Trust will move towards more electronic data being held on systems

5.5 Non Paper Records

Strategic Aim (v):

The principles of good record management will also apply to electronic data.

The Trust is moving forward with networking, co-ordinating, controlling and the supporting of new clinical and administrative electronic systems. Some of these have been developed in conjunction with neighbouring organisations.

The management, 'ownership' and co-ordination of the processes in relation to systems must be standardised throughout the Trust and must include archiving, storage, security and training related to such data.

All users of electronic systems need to be conversant with the Data Protection Act (1998), the principles of Caldicott and the Trust Security Policy.

The principles of good record keeping apply equally to records created electronically.

Staff in the Trust need to be reminded that records may also take the form of scanned documents, audio or video tapes and these will all need to be subject to 'good practice'.

The Trust's Intranet facility for the displaying of Documents for general viewing is a resource that needs to be made more widely known.

There is an identifiable need for more resources to be put in to raising awareness, training, updating and auditing all aspects of non paper records.

Actions:

- Awareness raising of all users of electronic data/systems to the requirements of the Data Protection Act (1998), the principles of Caldicott, Freedom of Information and Trust IM&T Policies and Procedures
- Standards for electronic record keeping need to be compiled and agreed to ensure that slang and abbreviations are not used
- The setting up of a comprehensive training and updating of users of electronic systems ensuring compliance with the proposed guidance of good electronic record keeping
- The West Gloucestershire Primary Care Trust recommended retention periods (Appendix

- B) will apply equally to electronic data and such data will be reviewed accordingly
- Guidance on the use and retention of audio and video records must be produced

Outcomes:

- Increased awareness and understanding by users of data systems of the importance of confidentiality, security and the sharing of information
- Improved standards in electronic record keeping

5.6 Disposing of Records

Strategic Aim (vi)

Records will be reviewed under the criteria of the Trusts retention periods (Appendix B) and those no longer required by the services of the Trust will be considered for permanent preservation, research, disposal or any other use as agreed by the Trust Board

Once approved by the Trust Board the retention of records will be in accordance with the Trust's minimum retention periods (Appendix B), which take into account the needs of the users of the records and legal requirements.

There are occasions, particularly with Health Records, when records need to be passed onto other NHS organisations thus disposing of the record. However, details must be retained of such movement of records.

The principles of Caldicott must be adhered to in the transfer of patient information. It is 'essential to ensure that those asked to transfer patient information can be confident that all those involved are fully aware of the basis on which the information is being transferred, and adhere to consistent protocols' (p20 'Report on the Review of Patient-Identifiable Information' December 1997)

In theory records should be destroyed as soon as possible after the expiry date of the minimum retention period but with electronic advancements consideration should be given to retaining manual records in another medium.

There must be a consistent and regular approach across the Trust to the reviewing and disposing of records. Processes/check lists need to be documented for easy reference by other members of staff.

A record, or brief description, must be kept about any record that has been destroyed if it is deemed to be a document that was relevant to the business of the Trust.

Confidentiality must be maintained at all times.

Actions:

- The minimum recommended retention period for Trust Records (Appendix B) will be put to the Members of the Trust Board for agreement and acceptance
- Trust staff will be made aware of the agreed minimum retention periods
- All records will be reviewed (manual and electronic) to determine whether they are to be permanently retained, destroyed or retained for the purpose of research or litigation
- Methods of disposal of records will meet the Trust requirements for confidentiality and security

Outcomes:

- All Trust records (manual and electronic) will be appropriately retained or disposed in accordance with the Trust retention guidance.

5.7 Documentation

Strategic Aim (vii):

Standards will be introduced and applied to the production of Trust documentation (manual and electronic).

A consistent standard and style of documentation should be encouraged across the Trust, particularly for Board papers and other documents produced in the public domain.

The use of 'jargon' must be discouraged to enable understanding by a wide range of readers.

Master copies of formal Minutes produced at meetings throughout the Trust should be routinely signed once the accuracy of the same has been agreed and duplicate copies to be retained only as considered necessary.

Actions:

- Standards will be set and guidance given for the style of documentation to be used for the writing of Policies/Standards/Minutes/Agenda's etc.
- The Trust's logo will be made more readily available
- Templates for letters/memos/fax etc. will be available on the network and staff who do not have ready access to the Intranet should be provided with templates

Outcomes:

- The staff of West Gloucestershire Primary Care Trust will produce documentation (manual and electronic) in a co-ordinated and professional format
- The use of jargon will be minimised
- The title, author and date of documents will be clearly identified for future reference enabling regular review and update

5.8 The outcome of all the actions collectively identified in 5.0 – 5.7 above will provide the framework for developing and implementing a comprehensive records management policy in the Trust

6.0 RISK

6.1 One of the definition of risk which underpins Controls Assurance is :

'The chance of something happening that will have an impact upon objectives. It is measured in terms of consequences and likelihood'. (Source: Standards Australia (1999) Risk Management. AS /NZS 4360:1999. Standards Association of Australia. Strathfield. P3)

6.2 Effective records management within the Trust will ensure that risks associated with managing information will be minimised. Information in any medium will be easily available and accessible to support all areas of the Trust's work.

7.0 CONCLUSION

- 7.1 The Board are asked to adopt this Strategy with its Policy statement (p5) and to agree to its implementation.

Through this commitment it will ensure that responsibility is accepted by the West Gloucestershire Primary Care Trust and appropriate arrangements are in place for establishing good records management, for *all* records within the Trust.

Appendix A

Summary of Strategic Aims

PAGE	STRATEGIC AIM
5	<p>i Record Keeping</p> <p><i>Development and Training in Record Keeping (electronic and manual) will be given a priority in Records Management.</i></p>
6	<p>ii Sharing Records</p> <p><i>All staff will work towards rationalising record collections through sharing records and the information they contain, (subject to the requirements of the Data Protection Act 1998 and the Principles of Caldicott), by merging or ensuring effective cross-reference. It must be recognised that data belongs to the Trust and <u>not</u> to individuals or departments.</i></p>
7	<p>iii Tracing and Security</p> <p><i>Security and Tracing of records will be incorporated within the management of all records within the Trust.</i></p>
8	<p>iv Storage and Retention of Manual Records</p> <p><i>All manual and electronic records, in the Trust will be appropriately stored and retained in accordance with the West Gloucestershire Primary Care Trust recommended retention periods and in line with the Department of Health's recommendations (HSC 1999/053)</i></p>
9	<p>v Non Paper Records</p> <p><i>The principles of good record management will also apply to electronic data.</i></p>
10	<p>vi Disposing of Records</p> <p><i>Records will be reviewed under the criteria of the West Gloucestershire Primary Care Trust retention periods [Appendix B] and those no longer required by the services of the Trust will be considered for permanent preservation, research, disposal or any other use as agreed by the Trust Board</i></p>
11	<p>vii Documentation</p> <p><i>Standards will be introduced and applied to the production of Trust documentation (manual and electronic).</i></p>

