Mid Essex Hospital Services NHS

NHS Trust

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Consulted With	Post/Committee/Group	Date
Helen Clarke	Head of Governance	17th March 2015
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Author/Contact for Information	Liz Stewart, Information Governance Manager
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Related Trust Policies (to be read in conjunction with)	Health Records Policies Information Lifecycle Policy Document Provenance Policy Information Asset Policy Archiving Retention & Destruction Policy Retention & Destruction Schedule Sharing Patient Information Policy

Document Review History

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Index

1.0   Purpose

1.1   To provide an overview of the Trust's responsibilities and commitments in relation to all Trust records.

1.2   This document sets out a framework within which the staff responsible for managing the Trust's records can develop specific policies and procedures to ensure that records are managed and controlled effectively, and at best value, commensurate with legal, operational and information needs.

2.0   Introduction

2.1   Records Management is the process by which an organisation manages all the aspects of records whether internally or externally generated and in any format or media type, from their creation, all the way through their lifecycle to their eventual disposal.

2.2   The Records Management: NHS Code of Practice has been published by the Department of Health as a guide to the required standards of practice in the management of records for those who work within or under contract to NHS organisations in England. It is based on current legal requirements and professional best practice.

2.3   The Trust's records are its corporate memory, providing evidence of actions and decisions and representing a vital asset to support daily functions and operations.

2.4   Records support policy formation and managerial decision making, protect the interests of the Trust and the rights of patients, staff and members of the public. They support consistency, continuity, efficiency and productivity and help deliver services in consistent and equitable ways.

2.5   Appropriate records management is critical to the management of an effective service to those who present the Trust with Freedom of Information requests under the Freedom of Information Act, which the Trust has a legal obligation to fulfil.

2.6   The Trust has adopted this records management policy and is committed to ongoing improvement of its records management functions as it believes that it will gain a number of organisational benefits from so doing. These include:
- Better use of physical and server space;
- Better use of staff time;
- Improved control of valuable information resources;
- Compliance with legislation and standards; and
- Reduced costs

2.7   The Trust also believes that its internal management processes will be improved by the greater availability of information that will accrue by the recognition of records management as a designated corporate function.

3.0   Scope and Definitions

3.1   This policy relates to all clinical and non-clinical operational records held in any format by the Trust. These include:

- All administrative records (eg HR, Estates, Finance)
- Accounting records
- Complaints administration
- All patient health records (for all specialties and including private patients, including x-ray and imaging reports,

3.2   Records Management is a discipline which utilises an administrative system to direct and control the creation, version control, distribution, filing, retention, storage and disposal of records, in a way that is administratively and legally sound, whilst at the same time serving the operational needs of the Trust and preserving an appropriate historical record. The key components of records management are:

- Record creation
- Record keeping
- Record maintenance (including tracking of record movements)
- Access and disclosure
- Closure and transfer
- Appraisal
- Archiving
- Disposal

3.3   The term Records Life Cycle describes the life of a record from its creation/receipt through the period of its 'active' use, then into a period of 'inactive' retention (such as closed files which may still be referred to occasionally) and finally either confidential disposal or archival preservation.

3.4   In this policy, Records are defined as 'recorded information, in any form, created or received and maintained by the Trust in the transaction of its business or conduct of affairs and kept as evidence of such activity'.

3.5   Information is a corporate asset. The Trust's records are important sources of administrative, evidential and historical information. They are vital to the Trust to support its current and future operations (including meeting the requirements of Freedom of Information legislation), for the purpose of accountability, and for an awareness and understanding of its history and procedures.

4.0   Aims of the Trust Records Management System

4.1   The aims of the Trust Records Management System are to ensure that:

- Records are available when needed - from which the Trust is able to form a reconstruction of activities or events that have taken place

- Records can be accessed - records and the information within them can be located and displayed in a way consistent with its initial use, and

- that the current version is identified where multiple versions exist

- Records can be interpreted - the context of the record can be interpreted: who created or added to the record and when, during which business process, and how the record is related to other records

- Records can be trusted – the record reliably represents the information that was actually used in, or created by, the business process, and its integrity and authenticity can be demonstrated

- Records can be maintained through time – the qualities of availability, accessibility, interpretation and trustworthiness can be maintained for as long as the record is needed, perhaps permanently, despite changes of format;

- Records are secure - from unauthorised or inadvertent alteration or erasure, that access and disclosure are properly controlled and audit trails will track all use and changes.

- Records are held in a robust format which remains readable for as long as records are required;

- Records are retained and disposed of appropriately – using consistent and documented retention and disposal procedures, which include provision for appraisal and the permanent preservation of records with archival value; See also the Trust's Retention & Destruction Schedule on the intranet

- Staff are trained - so that all staff are made aware of their responsibilities for record-keeping and record management.

5.0   Roles and Responsibilities

5.1   The Chief Executive has overall responsibility for records management in the Trust. As accountable officer the Chief Executive is responsible for the management of the organisation and for ensuring appropriate mechanisms are in place to support service delivery and continuity. Records management is key to this as it will ensure appropriate, accurate information is available as required. However day to day management is delegated to the Trust SIRO (Senior Information Risk Owner).

5.2   The SIRO has a particular responsibility for ensuring that it corporately meets its legal responsibilities, and for the adoption of internal and external governance requirements.

5.3   The Trust's Caldicott Guardian has a particular responsibility for reflecting patients' interests regarding the use of patient identifiable information. The Caldicott Guardian is responsible for ensuring patient identifiable information is shared in an appropriate and secure manner. See also Sharing Patient Information Policy .

5.4   The Trust's Information Governance Group is responsible for ensuring that this policy is implemented, and that the records management system and processes are developed, coordinated and monitored.

5.5 The Health Records Manager is responsible for the overall development and maintenance of health records management practices throughout the Trust, in particular for drawing up guidance for good records management practice and promoting compliance with this policy in such a way as to ensure the easy, appropriate and timely retrieval of patient information.

5.6 The responsibility for local records management is devolved to the relevant heads of services who have overall responsibility for the management of records generated by their activities, ie for ensuring that records controlled within their service are managed in a way which meets the aims of the Trust's records management policies.

5.7 All Trust staff, whether clinical or administrative, who create, receive and use records have records management responsibilities. In particular all staff, including those subject to service level agreements, must ensure that they keep appropriate records of their work in the Trust and manage those records in keeping with this policy and with any guidance subsequently produced.

6.0 Legal and Professional Obligations

6.1 All NHS records are Public Records under the Public Records Act. The Trust will take actions as necessary to comply with the legal and professional obligations set out in the Records Management: NHS Code of Practice, in particular:
- The Public Records Act 1958;
- The Data Protection Act 1998;
- The Freedom of Information Act 2000;
- The Common Law Duty of Confidentiality;
- The NHS Confidentiality Code of Practice; and
- any new legislation affecting records management as it arises.

6.2 The Trust will maintain a workplan that sets out the steps required to fully meet the standards set out in the Information Governance Toolkit in relation to both health and corporate record keeping

7.0 Trust Inventory of Records

7.1 The Trust will work towards achieving a full inventory of its information assets.

7.2 The Trust will establish and maintain mechanisms through which departments and services can register the records they are maintaining.

8.0 Retention and Disposal of Information

8.1 It is a fundamental requirement that all of the Trust's records are retained for a minimum period of time for legal, operational, research and safety reasons. The length of time for retaining records will depend on the type of record and its importance to the Trusts's business functions.

8.2 The Trust has adopted the retention periods set out in the Records Management: NHS Code of Practice and the schedule for Retention and Disposal is published on the intranet and appendixed.

9.0   Records Management Systems Audit

9.1 The Trust will regularly audit its records management practices for compliance with this framework in line with the audit arrangements set out in the Information Governance Toolkit, the Care Quality Commission Outcome 20 and the NHS Litigation Authority Criteria 21.

9.2 The audit will:

- Identify areas of operation that are covered by the Trust's policies and identify which procedures and/or guidance should comply to the policy;
- Follow a mechanism for adapting the policy to cover missing areas if these are critical to the creation and use of records, and use a subsidiary development plan if there are major changes to be made;
- Set and maintain standards by implementing new procedures, including obtaining feedback where the procedures do not match the desired levels of performance; and
- Highlight where non-conformance to the procedures is occurring and suggest a tightening of controls and adjustment to related procedures.

9.3 The results of audits will be reported to the Information Governance Group for review and action.

10.0   Training

10.1 All Trust staff will be made aware of their responsibilities for record-keeping and record management through generic and specific training programmes and guidance.

11.0   Communication & Implementation of this Strategy

11.1 The strategy will be uploaded to the intranet and website.

12.0   References
Records Management: NHS Code of Practice
(http://www.dh.gov.uk/PolicyAndGuidance/OrganisationalPolicy/RecordsManagement);
Information Governance Toolkit

Appendix 1

Retention and Destruction Schedule

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