Records Management Policy

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INTRODUCTION

1.1 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 to their lifecycle to their eventual disposal.

1.2 Welsh Health Specialised Services Committee's (WHSSC) records are its corporate memory, providing evidence of actions and decisions and representing a vital asset to support daily functions and operations. Records support policy formation and managerial decision-making, protect the interests of WHSSC 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.

1.3 WHSSC 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.

1.4 WHSSC 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.

1.5 This policy should be considered in conjunction with any relevant policies and/or procedures issued from the Host orgnaisation, Cwm Taf Morgannwg University Health Board, and not read in isolation. The following are a guide to relevant policies;

- Information Governance Policy
- Freedom of Information Policy
- Email Use Policy
- NHS Wales Information Security Policy
- Disposal of ICT Equipment and Media Procedure

PURPOSE

2.1   This policy and associated procedures will define the way in which records will be managed throughout WHSSC.

2.2   This policy and associated procedures are also intended to provide standards against which records management procedures can be monitored to inform risk management and identify areas for improvement.

2.3   The purpose of this policy is to ensure that records management systems and practice throughout WHSSC comply with relevant legislation, professional and information governance standards.

POLICY STATEMENT

3.1   WHSSC is committed to a systematic and planned approach to the management of records within the organisation, from the moment they are created to their ultimate disposal. This will ensure that WHSSC can control both the quality and the quantity of the information that it generates; it can maintain that information in a manner that effectively serves its needs, those of government and of the citizen; and it can dispose of the information efficiently when it is no longer required.

3.2   As a public body we are required by law to manage our records appropriately; namely in accordance with regulations such as Data Protection Legislation and the Freedom of Information Act 2000 that set out specific requirements in relation to the creation and management of records

SCOPE

4.1   This policy relates to all clinical and non-clinical operational records held in any format by WHSSC as detailed in the Department of Health's publication *Records Management: NHS Code of Practice*©, i.e.:
   - All administrative records (e.g. personnel, estates, financial and accounting records, notes associated with complaints, etc); and
   - All patient records including individual patient funding requests.

4.2   These include records held in all formats, for example:
   - Paper records, reports, diaries and registers etc;

- Electronic records;
- Digital images; and
- Audio files.

4.3 This policy applies to all staff employed by or contracted to WHSSC and includes experts who the WHSSC might call upon in consultation.

DEFINITION OF TERMS

5.1 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 WHSSC 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; and
- Disposal.

5.2 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.

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

5.4 **Information** is a corporate asset. WHSSC's records are important sources of administrative, evidential and historical information. They are vital to WHSSC 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.

- **AIMS AND OBJECTIVES**

The aims of WHSSC's records management system are to ensure:

6.1 Accountability – Records are adequate to account fully and transparently for all actions and decisions, in particular to:
- Protect legal and other rights of staff or those affected by those actions;
- Facilitate audit or examination; and
- Provide credible and authoritative evidence.

6.2 Availability – WHSSC is able to service its business needs and comply with legislative requirements.

6.3 Accessibility – Those with a legitimate right can access records, and the information within them is located and displayed in a way consistent with its initial use, and the current version is identified where multiple versions exist.

6.4 Interpretation – The context of the record can be interpreted (i.e. identification of staff who created or added to the record and when, during which business process, and how the record is related to other records).

6.5 Quality – Records are complete and accurate and reliably represent the information that was actually used in, or created by, the business process, and its integrity and authenticity can be demonstrated.

6.6 Maintenance through time – So that 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. For records in digital format, maintenance in terms of back-up and planned migration to new platforms must be designed and scheduled to ensure continuing access to readable information.

6.7 Security – From unauthorised or inadvertent alteration or erasure, access and disclosure, ensuring that records are properly controlled and that there are audit trails to track all use and changes in order to ensure that records are held in a robust format which remains readable for as long as records are required.

6.8 Retention and disposal – Using consistent and documented retention and disposal procedures, which include provision for appraisal and the permanent preservations of records with archival value.

6.9 Performance measurement – The application of records management procedures are regularly monitored against agreed indicators and action taken to improve standards as necessary.

6.10 Staff training – All staff are made aware of their responsibilities for records management.

ROLES AND RESPONSIBILITIES

7.1 Managing Director of Specialised and Tertiary Services Commissioning

The Managing Director of Specialised and Tertiary Services Commissioning has overall responsibility for records management in WHSSC. As accountable officer he/she 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.

7.2 Committee Secretary

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

7.3 Caldicott Guardian

The Medical Director of the host organisation, as Caldicott Guardian, has a particular responsibility for reflecting patients' interests regarding the use of patient identifiable information. He/she is responsible for ensuring patient identifiable information is shared in an appropriate and secure manner. The Medical Director of the host organisation is supported by the WHSSC Medical Director, Deputy Medical Director and Committee Secretary in implementation of his/her Caldicott Guardian responsibilities with regards to WHSSC.

7.4 Corporate Directors Group

The Corporate Directors Group is responsible for ensuring that this policy is implemented and that the records management system and processes are developed, co-ordinated, and monitored.

The Corporate Director's Group has a particular responsibility for ensuring that WHSSC meets its legal responsibilities, and for the adoption of internal and external governance requirements.

7.5 Corporate Governance Manager
The Corporate Governance Manager is responsible for the overall development and maintenance of records management practices throughout WHSSC, in particular for raising awareness 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 information.

7.6 Individual Patient Funding Manager
The Individual Patient Funding Manager is responsible for development and maintenance of Individual Patient Funding Request (IPFR) records management within WHSSC.

7.7 Directors and Managers
The responsibility for local records management is devolved to individual Directors and their deputies. For example they must ensure that records within their departments are managed in a way which meets the aims of WHSSC's records management policy and procedures and that any risks with regards to the management of records within their area are appropriately assessed and recorded in line with WHSSC's risk management policy and procedures.

7.8 All Staff
Each member of staff:
- Under the Public Records Act, is responsible for any records that they create or use in the course of their duties;
- Has a contractual and common law duty of confidentiality for any records that they create, handle, store or come across during their employment;
- Must understand their responsibilities when using or communicating personal or commercially sensitive data and information;
- Must not obtain improper access to information which is subject to restrictions which have either been ignored or overridden;
- Should only gain access to information for which they are entitled to (i.e. information should only be obtained on a "need to know" basis);
- Must ensure that they report inappropriate access to records or their loss/theft (whether thought to be temporary or permanent) in accordance with Cwm Taf UHB's (the host organisation) Incident Reporting Procedure.

Registered professionals are responsible for complying with their relevant codes and standards of professional practice for record-keeping and for supervision of unqualified members of the team making entries in health records.

Record keeping and records management responsibilities will be included in staff job descriptions and are also included within the standard Agenda for Change Terms and Conditions of Service. All staff must ensure that they keep appropriate records of their work within WHSSC and that they manage all records in keeping with this policy and any subsequent procedures or protocols that may be issued.

8. LEGISLATIVE AND NHS REQUIREMENTS

All NHS records are Public Records under the Public Records Acts. WHSSC 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:

- General Data Protection Regulation 2018 (GDPR)
- The Access to Health Records Act 1990
- The Common Law Duty of Confidentiality
- The Computer Misuse Act 1990
- The Data Protection Act 1998;
- The Environmental Information Regulations 2004
- The Freedom of Information Act 2000;
- The Human Rights Act 1998
- The Medical Reports Act 1988
- The NHS Confidentiality Code of Practice.
- The Public Records Act 1958; and
- Any new legislation affecting records management as it arises.

9. RECORD CREATION AND MAINTENANCE

9.1 Records created by WHSSC should be kept in a system that will enable quick and easy retrieval of information which will support the business of the organisation, ensure that there is informed patient care and enable WHSSC to respond to requests for information under the Freedom of Information Act, Data Protection Act, General Data Protection Regulations, Access to Health Records Act and Environmental Information Regulations.

9.2 High quality information underpins the delivery of high quality evidence based healthcare. Health records must therefore be complete and accurate and healthcare staff must adhere to the record keeping standards.

9.3 Each department should have in place a process for documenting its activities in respect of records management.

9.4 Paper and electronic record keeping systems should contain descriptive and technical documentation to enable the system to be operated efficiently and the records held in the system to be understood. The documentation should provide an administrative context for effective management of the records.

9.5 The record keeping system, whether paper or electronic, should include a documented set of rules for referencing, titling, indexing and, if appropriate, the protective marking of records. These should be easily understood to enable the efficient retrieval of information when it is needed and to maintain security and confidentiality.

9.6 Upon creation of a new electronic or paper record the user should ensure that there is no duplication within existing record(s). Not every administrative record needs to be registered; however certain categories of record will be important enough to warrant formal registration. Directors must determine the requirement for registration, based on the business need to maintain accountable records of particular activities and on any legal obligations for registration with third parties, such as the Data Protection Act 1998. Some examples of registered file series are personnel and appointments, payroll, finance, estates, and performance monitoring. Where formal registration is not required, good practice would be to categorise and classify the file to allow it to be managed as part of structured filing system.

10. RECORD MAINTENANCE AND STORAGE

10.1 Records must always be kept securely but a balance needs to be achieved between security and accessibility. All current/active records should be stored so that they are accessible and comply with health and safety requirements. Comprehensive records should be retained when long-term storage is used and this should include specification of destruction dates.

10.2 Records should be kept up to date, relevant and accurate, unless preservation is required for historical purposes in which case this should be noted.

10.3 The movement and location of records should be controlled to ensure that a record can be easily retrieved at any time, that any outstanding issues can be dealt with, and that there is an auditable trail of record transactions.

10.4 Storage accommodation for current records should be dry, clean and tidy; should prevent damage to the records and should provide a safe working environment for staff.

10.5 A contingency or business recovery plan must be in place to provide protection for records which are vital to the continued functioning of WHSSC.

10.6 Where off-site storage is used appropriate security measures must be assured so that both clinical and legal obligations are met.

11. Information Asset Register

11.1 WHSSC is fully committed to identifying all recognisable bodies of information held on paper or electronic media that are required to support the work of the organisation. In order to identify all records of information that we hold about our staff and service users (incl. families, friends, etc.) each department are required to develop and assemble an appropriate Information Asset Register (IAR).

11.2 The IAR is a compulsory component of Cwm Taf Morgannwg's Information Governance framework, as the identification of where and how records are being kept can then enable WHSSC to better assess the risks associated with how information is being collected, stored and disposed, thereby ensuring compliance with Data Protection Legislation and associated standards.

12. RETENTION AND DISPOSAL SCHEDULES

12.1 It is a fundamental requirement that all of WHSSC'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 WHSSC's business functions.

12.2 WHSSC has adopted de of Practice (detailed in the UHB's Retention Schedules for Health and Non-Health Records). The retention schedule will be reviewed annually. A description of these obligations can be found in the Records Management Code of Practice for Health and Social Care 2016 the document can be accessed on the following web link. https://digital.nhs.uk/codes-of-practice-handling-information

13. TRAINING IMPLICATIONS

13.1 All staff are required to familiarise themselves with this policy and ensure they are fully aware of their responsibilities in relation to the management of corporate records within the organisation. Advice, guidance or training on local filing systems should be sought from the line manager initially. Further advice on interpretation of relevant legislation may be sought from the Committee Secretary, Corporate Governance Manager or Corporate Governance Officer.

14. REVIEW

14.1 This policy will be reviewed formally every three years (or sooner if new legislation, codes of practice or national standards are to be introduced).

15. RETENTION/ARCHIVING

15.1 This policy will be archived and stored in line with WHSSC's Retention Schedules for Health and Non-Health Records.

16. NON CONFORMANCE

16.1 Non-conformance of this policy and associated documentation may result in disciplinary action under the relevant Cwm Taf UHB (as host organisation) policy.

17. EQUALITY IMPACT ASSESSMENT STATEMENT

Following assessment this policy is not felt to be discriminatory or detrimental in any way with regard to the following equality standards:
Gender; Race; Disability; Age; Sexual Orientation; Religion or Belief; Welsh Language or Human Rights.

18. REFERENCES

i. Access to Health Records Act 1990
ii. Caldicott Principles & Recommendations
iii. Common Law Duty of Confidentiality

iv. Computer Misuse Act 1990 v. Connecting For Health: A Model Records ManagementPolicyhttp://www.connectingforhealth.nhs.uk/systemsandser vice s/infogov/records/manpolicy.doc –

vi. https://digital.nhs.uk/data-and-information/looking-afterinformation/data-security-and-informationgovernance/codes-of-practice-for-handling-information-inhealth-and-care

vii. General Data Protection Regulation 2016

viii. Data Protection Act 2018

ix. Environmental Information Regulations 2004

x. Freedom of Information Act 2000

xi. Human Rights Act 1998

xii. Medical Reports Act 1988

xiii. NHS Confidentiality Code of Practice xiv. Public Records Act 1958

xv. WHC (2000) 71 – For the Record

xvi. WHC (2000) 13 & WHC (2000) 57 – Corporate Governance in the NHS in Wales

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