



Records Management Policy

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Policy Checklist

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1.0 Introduction to Policy

It is a statutory requirement for the HPSS to implement records management as set out in the Public Records Act (Northern Ireland) 1923 Act and in the Disposal of Documents (Northern Ireland) Order (1925).

This policy gives the basis for good records management, and will contribute to the foundation of the Trust's Information Governance Strategy.

2.0 Purpose and Aims

The purpose of this policy is to ensure that the Trust adopts best practices in the management of its records so that reliable records are created, they can be found when needed, and are destroyed or archived, when no longer required.

Compliance with this policy will ensure that the Trust can provide evidence of performance and demonstrate accountability, as well as providing information about its decisions and activities.

3.0 Policy Statement

It is the policy of Southern Health and Social Care Trust that authentic, reliable and useable records are created, which are capable of supporting business functions and activities for as long as they are required. Adherence to this policy will ensure consistency and conformity of approach. The policy applies to all records of the Trust, and will be achieved by creating a procedural framework, which ensures that:

- records are made accessible to enable well-informed and proper judgments to be made;
- records are kept securely and protected from accidental loss, destruction and unauthorised access;
- records are kept for no longer than is necessary, in accordance with legal and professional obligations and with due regard to the Trust's Records Retention and Disposal Schedule;
- members and employees are made aware of and trained in the management of records within their sphere of work or responsibility.

4.0 Scope of the Policy

The international standard of managing records, ISO 15489 defines a record as *"information created, received and maintained as evidence and information by an organisation or person, in pursuance of legal obligations or in the transaction of business."*

In the context of this policy a record is any recorded information that contains information, electronic or in paper, in any media which is created, collected, processed, used, stored and/or disposed of by Southern Health and Social Care Trust employees, as well as those acting as its agents in the course of Trust business.

This policy applies to all directors and employees of the Southern Health and Social Care Trust. Non-compliance with this policy may result in disciplinary action by the Trust or legal action by others.

5.0 Responsibility for Trust Records

5.1 Managerial responsibility

5.1.1 Trust Board

The role of the Trust Board is to oversee the effective records management by officers of the Trust.

5.1.2 Chief Executive and Directors

The Chief Executive and Directors are personally accountable for the quality of records management within the Trust and have a duty to make arrangements for the safekeeping and eventual disposal of those records under the overall supervision of the Deputy Keeper of Public Records Office, Northern Ireland.

5.1.3 Assistant Director of Informatics

The Assistant Director of Informatics is lead officer for records management within the Trust. Responsibilities include:

- co-ordinating, publicising and monitoring implementation of the records management strategy and reporting on a regular basis to the Senior Management Team;
- determining the type of system appropriate to allow effective and efficient discharge of functions while meeting the statutory duty of records management;
- ensuring that the systems in place for records management are monitored and reviewed by the Senior Management Team and the Board at least annually in order to make improvements to the system;
- promotion of and overseeing of the Information Governance Strategy; and
- ensuring that records management functions are supported in their work in terms of commitment and resources.

5.1.4 Senior Managers

The role of Senior Managers is to ensure that records are managed effectively in each service area in accordance with the Trust Records Management Policy (this document). Senior Managers are responsible for ensuring staff are aware of the appropriate records management policies and procedures and that they have been trained in the operational procedures required by the Trust. Responsibilities of Senior Managers include:

- ensuring that any policies, procedures or protocols agreed by Records Management/Policy Committee are implemented within their area;
- ensuring that appropriate employees are designated to assist with the implementation of records management procedures within their area;
- ensuring that employees are supported in terms of training and development in their adherence to the Records Management Policy and procedures;
- ensuring that personal information (e.g. about a patient/member of staff) is not kept longer than is necessary. (Information about individual patients may not be passed on to others without the individual's consent except as permitted under Schedule 2 and 3 of the Data Protection Act 2018);
- ensuring that an inventory of records is maintained which shows the nature and type of records within service function, activity and directorate, is accessible to users and indicates the specific retention periods for those records; and
- ensuring that staff who record, handle, store or otherwise comes across patient information is aware that they may have a common law duty of confidence to patients. Such a duty will continue even after the death of a patient.

5.1.5 Head of Information Governance

The role of the Head of Information Governance is to support the Trust, its directorates and employees in the development, implementation and review of the records management, policies and procedures and to ensure that the Trust has a modern innovative and fully effective records management system. The Head of Information Governance oversees the implementation of the integrated framework, policy, strategy and processes on behalf of the Trust. Responsibilities include:

- ensuring the statutory requirements as laid down in the Disposal of Documents (Northern Ireland) Order 1925 (made under the Public Records Act (Northern Ireland) 1923 for the destruction and preservation of records), are fulfilled;

- providing advice and support of the Information Governance strategy, policy, framework and processes;
- providing training in Records Management, Freedom of Information, Data Protection and Environmental Information;
- providing advice on appropriate low cost storage for departmental records;
- developing procedures for the permanent preservation of selected records with the Public Records Office, Northern Ireland;
- co-ordinating requests for information in compliance with Data Protection and Freedom of Information legislation;
- preparing draft reports for the Senior Management Team to issue to stakeholders on the Trust's Information Governance framework, policy, strategy ;
- undertaking information audits to develop appropriate retention schedules and classification schemes (corporate and health);
- undertaking compliance audits of records management programmes (policies, procedures and systems) to ensure statutory obligations are met including the Freedom of Information Act 2000 and Data Protection Act 2018; and
- providing the Trust, in accordance with the Governance framework, details of records management process to enable internal controls to be monitored.

5.1.6 Head of Health Records

The responsibilities of the Head of Health Records include:

- ensuring the provision of a comprehensive, efficient and effective Acute Health Records Service on a Trust-wide basis.
- providing professional advice on health records.
- ensuring the Health Records Departments comply with the Data Protection Act, Subject Access requirements and Access to Health Records Order (1993).
- ensuring compliance with Information Management Controls Assurance standards.
- ensuring the statutory requirements as laid down in the Disposal of Documents (Northern Ireland) Order 1925, made under the Public Records Act Northern Ireland 1923 regarding the destruction and preservation of acute health records are fulfilled.
- auditing availability of acute health records for patient attendances.

5.1.7 Personal Data Guardian

The Personal Data Guardian has a particular responsibility for safeguarding patients' interests regarding the use of patient identifiable information. The Trust's Personal Data Guardian is the Medical Director. The Director of Children and Young People's Services is the Data Guardian for Social Services Records.

5.1.8 Digital Governance Steering Group

The Digital Governance Steering Group will ensure that the Trust has effective policies, systems and processes in place for record keeping and information handling in accordance with statutory, legal and good practice requirements. The Steering Group's remit is specific to patient and client information governance. The Digital Governance Steering Group will be chaired by the Senior Risk Owner and will steer the work of the following groups:

- Information Governance Committee;
- Data Protection Sub Group;
- Research Governance Committee;
- Data Quality Working Group;
- Technology Enabled Change Group;
- Cyber Security Oversight Group
- Technical Design Authority
- Clinical Coding Sub Group; and
- Corporate Governance
- Clinical & Social Care Governance

5.1.9 Information Governance Committee

A group has been established under the Chairmanship of the Assistant Director of Informatics (Directorate of Performance and Reform). The Head of Information Governance and a representative from each Directorate serve on the committee. The role of the committee is to;

- assist with and oversee Trust compliance in Information Management Controls Assurance Standards and the Freedom of Information Act 2000;
- facilitate consultation and the development of coherent responses on all Records Management issues;
- promote records management and provide support to staff in line with 'Good Management, Good Records; Guidelines for managing records in Health and Personal Social Services organisations in Northern Ireland', (Jan 2021);
- assist with the implementation of a training programme for Records Management, FOI and Data Protection;

- assist with the development of performance indicators and implement benchmarking with other Trusts;
- support the development and population of the Trust Publication Scheme; and
- facilitate the networking, collaborating and sharing of information between those responsible for record keeping.

5.1.10 Individual members of staff

All Trust staff, whether administrative or clinical are responsible for any records, which they create or use in the performance of their duties. They are responsible for documenting their actions and decisions and for maintaining the records in accordance with good records management practice and professional guidelines. This responsibility is established at, and defined by, the law for example, Public Records Act 1958, Data Protection Act 2018 and other professional guidelines covering the handling of public records. Therefore everyone working for or with the Trust who records, handles, stores or otherwise comes across patient information has a personal common law duty of confidence to patients and to his/her employer. The duty of confidence continues even after the death of the patient or after an employee or contractor has left the NHS.

Individuals need to ensure that:

- the record is kept secure and protected against unauthorised access and against accidental loss, destruction or damage
- the record can be accessed;
- the location of the record is tracked, where a tracking system is available. Where no tracking system is available a departmental sign in / sign out log must be created so records can be located when required;
- the record can be interpreted;
- it is possible to establish who created the document, during which operational process and how it relates to other records;
- the record can be trusted;
- the record can be maintained through time;
- the record is disposed of in accordance with Good Management, Good Records (GMGR 2021);
- the record is accessible and meaningful, in the right format, to those who need to use it;
- there is no unnecessary duplication between the paper and electronic record collections; and
- there is no distinction made between the electronic documents that are printed, printed records that reside in paper record systems and other original documents that are retained as records.

5.1.11 Designated Accountability

The person accountable for overseeing the implementation of this Policy and Guidelines is the Assistant Director of Informatics.

The Head of Information Governance will ensure that staff operating in the Trust is made aware of developments in law, NHS and/or professional guidelines and recognised good practice.

The Trust's Records Management Policy is required to be reviewed every 2 years.

6.0 Legislative Compliance, Relevant Policies, Procedures and Guidance

The Lord Chancellor's Code of Practice on the management of records, which can be found under Section 46 of the Freedom of Information Act, requires the Trust to have in place a policy statement endorsed by senior management and made readily available to staff at all levels in the Trust on how it manages its paper and electronic records. Other relevant documents are the Trust's Records Management Procedures and Information Governance Strategy.

7 Sources of Advice and Further Information

Related Policies/Manuals Include:-

1. Code of Practice on Protecting the Confidentiality of Service User Information.
2. Southern Health & Social Care Trust Records Management Procedures
3. Southern Health and Social Care Trust Safeguarding, Movement & Transportation of Records Policy
4. Record Management Strategy, Southern Health & Social Care Trust (V2.1 2019-2021)
5. 'Good Management, Good Records; Guidelines for managing records in Health and Personal Social Services organisations in Northern Ireland', (Jan 2021).