

Records Management Policy

Version	1.2
Approved by	IGSG
Date Approved	19/01/2016
Review Date	March 2019
Version	1.0
Approved by	IGSG
Date Approved	07/06/12

December 2015

CONTENTS

		Page
1.	Scope	3
2.	Purpose of Records	
3.	Aims	
4.	Records Managment Process	
5.	Off-Site Records Management	
6.	Accountability	
7.	Monitoring Compliance	
8.	Review of Policy	
9.	Equality and Human Rights Screening	
Appendix 1	Glossary of Records Management Terms	11
Appendix 2	Legislation & drivers in relation to legal & professional responsibility for records management	16

1. Scope

This Records Management Policy sits within the context of the Information Governance Strategy (2015 to March 2019). The Information Governance Strategy sets out the framework in which that the PHA meets its obligations for planning, developing and implementing records management policies and procedures which are consistent with legislation and the business requirements of the PHA.

This Records Management Policy:

- Sets out the requirements that must be met for the records of the Public Health Agency (PHA) to be considered as a proper record of the activity of the PHA;
- Outlines the requirements for a PHA records management system and processes;
- Highlights the quality and reliability standards which must be maintained to provide a valuable information and knowledge resource for the Public Health Agency;

It relates to all corporate, clinical and non-clinical operational records held in any format by the Public Health Agency as detailed in the Department of Health and Social Services and Public Safety (DHSSPS) publication *Good Management Good Records (GMGR) November 2011* ¹.

The Policy is supplemented by detailed procedures, as set out in Section 4.

For ease of reference, please see Appendix 1 Glossary of Records Management Terms as used throughout this Policy.

2. Purpose of Records

Information is a corporate asset and the records of the PHA are important sources of information including patient/client, administrative, financial, legal, evidential and historical information. They are vital to the PHA in its current and future work, for the purposes of accountability, and for an awareness and understanding of its history. They are the corporate memory of the PHA.

¹ <u>http://connect.publichealthagency.org/policy/records-management-good-management-good-records or http://www.dhsspsni.gov.uk/gmgr.htm</u>

The PHA will create, use, manage and destroy or preserve its records in accordance with all statutory requirements.

Systematic records management is fundamental to the PHA's efficiency. It ensures that the correct information is:

- captured, stored, retrieved and destroyed or preserved according to need;
- fully utilised to meet current and future needs, and to support change;
- accessible to those who need to make use of it; and
- that the appropriate technical, organisational and human resource elements exist to make this possible.

3. Aims

The records management system aims to ensure:

- a consistent systematic and planned approach to records management covering records from creation to disposal;
- compliance with statutory requirements and to increase efficiency by improving the flow of information, and greater coordination of records and storage systems; and
- awareness of the importance of records management and the need for responsibility and accountability at all levels.

All staff of the Public Health Agency who create, use, manage or dispose of records have a duty to protect them and to ensure that any information that they add to the record is necessary, accurate and complete. Confidentiality must always be of primary concern to PHA staff. Appropriate training and guidance will be provided on the management of records.

The Records Management Policy should be read in conjunction with other relevant governance policies and documents including:

PHA Information Governance Strategy

- DHSSPS Guidance Document 'Good Management, Good Records' (GMGR) (the PHA's retention and Disposal Schedule)
- PHA Data Protection and Confidentiality Policy
- PHA Access to Information Policy
- Information Management Controls Assurance Standard
- PHA ICT Security Policy

4. Records Management Process

The records management processes will follow best practice in records management and allow for the users of the records to identify, track and recall particular records. The process includes:

- Classification of the records into a records management system, with meaningful titles and a consistent reference code
- Individuals creating records being responsible for classifying them appropriately and ensuring that they are recorded and maintained correctly.
- Having sequences of reference codes that can facilitate both paper and electronic (where appropriate) records to enable tracking and recall, and eventually align with a single PHA records management system, and that enable tracking and recall of records.
- Checking that the correct records have been allocated to the appropriate reference code and that meaningful titles are used.
- Auditing to ensure that the records management system makes sense and records are traceable.

The detail of the records management processes are defined in a suite of records management factsheets which outline the procedure for each stage of the record lifecycle. The procedures relate to records regardless of formats, throughout their lifecycle, from planning and creation through to disposal ensuring that all records are kept in an accessible format. The factsheets have been developed in line with *Good Management Good Records (GMGR)* and include the following:

- File Covers and File Content
- Closing Files
- Disposal of Records
- Contemporaneous Notes and Marginalia
- The Use of Folio Numbering and Folio Sheets
- Management of Handwritten Notes / File Notes
- Preparing Agendas and Minutes
- Managing Electronic Records including E-mails
- Version Control
- Preparing Records for Archive
- Transporting Records
- Security of Records
- What is a master file and what is a working file?
- Accessing External Confidential Waste Disposal Company
- Protective Markings on File Covers
- Filing Systems

5. Off-site Records Management

It is not possible to store all records locally; therefore some will be stored in secure off-site storage through the regional contract. The principles set out in this policy also apply to the management of off- site records.

All records held in off-site storage should have a review or retention date recorded. It is the responsibility of the relevant information asset owner to ensure that these dates are recorded for each record.

6. Accountability

All records created by the Public Health Agency are public records as defined in the Public Records Act (Northern Ireland) 1923.

6.1 Statutory Responsibility

"Good Management Good Records" states that the Permanent Secretary, Departmental Information Manager, Chief Executives and senior managers are personally accountable for records management within their organisation and have a duty to make arrangements for the safe keeping and eventual disposal of those records under the overall supervision of the Deputy Keeper of Public Records at PRONI.

6.2 Roles and Responsibilities within Public Health Agency

The formal roles and responsibilities relating to records management are set out in section 3 of "Good Management Good Records". Within the PHA these roles and responsibilities are as follows:

- All Staff All staff have a responsibility to comply with the records management strategy, policy and associated procedures.
- Chief Executive The Chief Executive, as Accounting
 Officer, has responsibility for ensuring that the PHA complies
 with its statutory obligations and DHSSPS directives.
- Senior Information Risk Owner (SIRO) The SIRO
 (Director of Operations) is the focus for the management of
 information risk at Board level. The SIRO will advise the
 Accounting Officer on the Information Risk aspect of the
 Governance Statement and will own the overall information
 risk and risk assessment process.
- Assistant Director Planning and Operational Services (AD P&OS) - The AD P&OS has responsibility delegated from the SIRO for ensuring that effective systems and processes are in place to address the information governance agenda including records management.
- Governance Manager The Governance Manager is operationally responsible for the day to day implementation of all aspects of Information Governance including records management.

- Office Managers Responsibility for coordinating and overseeing implementation of records management within their offices.
- The Personal Data Guardian (PDG) The PDG (Director of Public Health/Medical Director) has responsibility for ensuring that the PHA processes satisfy the highest practical standards for handling personal data. The PDG is the 'conscience' of the organization in respect of patient information, and will also promote a culture that respects and protects personal data. The PDG works closely with the SIRO and Information Asset Owners where appropriate, especially where information risk reviews are conducted for assets which comprise or contain patient/service user information.
- Information Asset Owners (IAO's) The IAO's primary role
 is to manage and address risks associated with the
 information assets within their function and to provide
 assurance to the SIRO on the management of those assets.
 Each Assistant Director is the IAO for their function and also
 sit on the Information Governance Steering Group.
- Information Asset Assistants (IAA's) IAAs may be identified in each function to support the IAO.
- Information Governance Steering Group (IGSG) Consisting of representatives from all PHA Directorates the
 primary function of the IGSG will be to lead the development
 and implementation of the Information Governance
 framework across the organisation. The Group will be
 chaired by the SIRO and will meet on a quarterly basis.
- Records Management Working Group (RMWG) Chaired by the Assistant Director of Planning and Operational Services this Group will address the Records Management function within the PHA developing and implementing an effective system across all offices. Membership consists of representatives from each Directorate. Members will in turn cascade progress across all teams within their Directorate. The RMWG reports to the IGSG.

- PHA Governance and Audit Committee (GAC) The GAC
 has responsibility for providing the PHA board with an
 independent and objective review of governance processes
 and an assurance on the adequacy and effectiveness of the
 system of internal control within the PHA. It will formally
 review progress against the Information Governance
 Strategy.
- PHA Agency Management Team AMT will receive updates on Information Governance matters (including Records Management) on both a formal and informal basis via the Director of Operations who fulfils the role of Senior Information Risk Owner (SIRO) and Chair of the Information Governance Steering Group. The PDG will also report on matters relating to patient identifiable information where appropriate.

Appendix 2 outlines the relevant legislation and drivers in relation to legal and professional responsibility for records management.

7. Monitoring Compliance

Compliance with this policy and associated procedures will be monitored by audits of sample records and records storage areas as well as through self assessment (and external verification as appropriate) of the Control Assurance Standards (CAS). Records Management will also be subject to periodic audit by internal and external audit. These audits will seek to:

- identify areas of good practice which can be used throughout the Public Health Agency;
- highlight where non-conformance with the procedures is occurring; and
- if appropriate, recommend changes to the records management system and processes and to how compliance can be achieved.

8. Review of Policy

The PHA is committed to ensuring that all policies are kept under review to ensure that they remain compliant with relevant legislation.

This policy will be reviewed by the Director of Operations in March 2019 or earlier if relevant guidance is issued. That review will be noted on a subsequent version of this policy, even where there are no substantive changes made or required.

9. Equality and Human Rights Screening

This policy has been screened in accordance with the PHA's requirements under Section 75 of the Northern Ireland Act 1998. Cognisance has also been taken of human rights. The policy and screening outcomes are published as part of our agreed process for publication.

APPENDIX 1

Glossary of Records Management Terms

AUDIT - The general definition of an audit is an evaluation of a person, organisation, system, process, enterprise, project or product. Audits are performed to ascertain the validity and reliability of information; also to provide an assessment of a system's internal control. An audit record is a record of an audit.

CORPORATE RECORDS - Records (other than health records) that are of, or relating to, an organisation's business activities covering all the functions, processes, activities and transactions of the organisation and of its employees.

CURRENT RECORDS - Records necessary for conducting the current and ongoing business of an organisation.

DATA PROTECTION ACT 1998 – The Act is concerned with personal data, that is, any data relating to an individual who can be identified.

DEPARTMENT - The Department of Health, Social Services and Public Safety (DHSSPS).

DESTRUCTION - The process of eliminating or deleting records beyond any possible reconstruction. (BS ISO 15489-1.2001(E))

DISPOSAL SCHEDULE - A Disposal Schedule is a document which outlines all types of records held, the period for which such records should be retained and the action required when the retention period has been reached.

DISPOSAL - Disposal is the implementation of appraisal and review decisions. These comprise the destruction of records and the transfer of custody of records (including the transfer of selected records to an archive institution). They may also include the movement of records from one system to another (for example, paper to electronic). (The National Archives, Records Management Standard RMS1.1).

ELECTRONIC RECORD - A record created, generated, sent, communicated, received, or stored by electronic means.

Information recorded in a form that requires a computer or other machine to process it and that otherwise satisfies the definition of a record. Any record that contains machine-readable rather than human-readable information.

FILE - An organised unit of documents grouped together either for current use by the creator or in the process of archival arrangement, because they relate to the same subject, activity or transaction.

FILING SYSTEM - A plan for organising records so that they can be found when needed. (The National Archives, Records Management Standard RMS 1.1)

FREEDOM OF INFORMATION ACT 2000 (FOI) -The Act allows for any person to make a request for information, and to be told whether the public authority holds the information, and subject to exemptions, to be supplied with the information.

GP RECORDS - Records maintained by a general practitioner by virtue of his obligations under The Health and Personal Social Services (General Medical Services Contracts) Regulations (Northern Ireland) 2004.

HEALTH RECORDS - A health record is any record of information relating to someone's physical or mental health that has been made by (or on behalf of) a "health professional." This could be anything from the notes made by a GP in your local surgery to results of an MRI scan or X-rays. Health records are extremely personal and sensitive. They can be held electronically or as paper files, and are kept by a range of different health professionals both in the HSC and the private sector. For the purpose of the Data Protection Act, a registered health professional can be one of the following people:

- A medical practitioner this could be a GP, consultant or hospital doctor
- A dentist
- An optician
- A pharmaceutical chemist 81
- A nurse, midwife or health visitor
- An osteopath

- A chiropractor
- A clinical psychologist, child psychotherapist or speech therapist
- A music therapist
- A scientist employed by a health service body as head of department

INTEGRITY OF RECORDS - The integrity of a record refers to its being complete and unaltered. It is necessary that a record be protected against unauthorised alteration. Records management policies and procedures should specify what additions or annotations may be made to a record after it is created, under what circumstances additions or annotations may be authorised and who is authorised to make them. Any unauthorised annotation, addition or deletion to a record should be explicitly identifiable and traceable.

MINUTES - A written account of what transpired at a meeting. Master copies are the copies held by the secretariat of the meeting, i.e. the person or branch who actually takes, writes and issues the minutes.

NATIONAL ARCHIVES - The National Archives (TNA) is a UK government department and an executive agency of the Secretary of State for Justice. It was created in April 2003 to maintain a national archive for "England, Wales and the central UK government". It is the central advisory body on the care of records and archives, in all media from creation to long —term preservation.

NORTHERN IRELAND RECORDS MANAGEMENT STANDARD (NIRMS) - Standard for Records Management produced by PRONI in March 2002 and revised in 2007. The standard is updated regularly to take account of emerging Freedom of Information issues.

PATIENT RECORD - A collection of documents that provides an account of each episode in which a patient visited or sought treatment and received care or a referral for care from a health care facility. All recorded information regarding a patient's clinical history, examination findings, diagnosis, treatment, and consent.

PAPER RECORDS - Records in the form of files, volumes, folders, bundles, maps, plans, charts, etc.

PERMANENT RETENTION - Records may not ordinarily be retained for more than 20 years. However, the Public Records Act provides for records which are still in current use to be legally retained. Additionally, under separate legislation, records may need to be retained for longer than 30 years, for example Occupational Health Records relating to the COSHH (Control of Substances Hazardous to Health) Regulations, or records required for variant CJD surveillance.

Section 33 of the Data Protection Act permits personal data identified as being of historical or statistical research value to be kept indefinitely as archives.

PERMANENT SECRETARY - The administrative head of the Department working directly to the Minister.

PRESERVATION - Processes and operations involved in ensuring the technical and intellectual survival of authentic records through time. (BS ISO 15489-1:2001(E)).

PUBLIC RECORDS - Records as defined in the Public Records Act 1958 or subsequently determined as public records by The National Archives. Records of NHS organisations (and those of predecessor bodies to NHS organisations) are defined as public records under the terms of the Public Records Act 1958 sections 3(1)–(2). NHS records are not owned by the NHS organisation that created them and may not be retained for longer than 30 years without formal approval by The National Archives. (The National Archives). Records of services supplied within NHS organisations but by outside contractors are not defined as public records, but are subject to the Freedom of Information Act.

PUBLIC RECORDS ACT (NI) 1923 - All files created by public servants as part of their everyday work, are defined as public records under the terms of the Public Records Act (NI) 1923.

PUBLIC RECORD OFFICE OF NORTHERN IRELAND (PRONI) - The Public Records Act (Northern Ireland) 1923

established PRONI as the national archive for Northern Ireland with authority to receive those records of government departments and public bodies which are deemed worthy of permanent preservation. PRONI is part of the Department of Culture. Arts and Leisure.

RECORDS - 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. (BS ISO 15489.1) A record of an Organisation is anything which contains information (in any media) which has been created or gathered as a result of any aspect of the work of its employees – including consultants, agency or casual staff.

RECORDS MANAGEMENT - Field of management responsible for the efficient and systematic control of the creation, receipt, maintenance, use and disposition of records, including processes for capturing and maintaining evidence of and information about business activities and transactions in the form of records. (BS ISO 15489-1:2001(E)).

RETENTION - The continued storage and maintenance of records for as long as they are required by the creating or holding organisation until their eventual disposal, according to their administrative, legal, financial and historical evaluation.

REVIEW - The examination of records to determine whether they should be destroyed, retained for a further period or transferred to PRONI.

TRANSFER OF RECORDS - Transfer (custody) – Change of custody, ownership and/or responsibility for records. (BS ISO 15489-1:2001(E)).

Transfer (movement) – Moving records from one location to another. (BS ISO 15489-1:2001(E)).

Records identified as more appropriately held as archives should be offered to PRONI, who will make a decision regarding their long-term preservation.

APPENDIX 2

Legislation & drivers in relation to legal & professional responsibility for records management

There are a range of legal and professional obligations that limit, prohibit or set conditions in respect of the management, use and disclosure of information and, similarly, a range of statutes that permit or require information to be used or disclosed.

The key legal and professional obligations covering personal and other information listed² in this Appendix are as follows:

- The Access to Health Records (Northern Ireland) Order 1993
- The Access to Personal Files and Medical Reports (Northern Ireland) Order 1991
- Administrative Law
- The Adoption Agencies Regulations (Northern Ireland) 1989
- The Blood Safety and Quality Regulations 2005 (as amended)
- The Census (Confidentiality) (Northern Ireland) Order 1991
- The Civil Evidence (Northern Ireland) Order 1997
- The Common Law Duty of Confidentiality
 Confidentiality: DHSSPS code of practice (PDF 111KB)
- The Computer Misuse Act 1990
- The Congenital Disabilities (Civil Liability) Act 1976
- The Consumer Protection (Northern Ireland) Order 1987
- The Control of Substances Hazardous to Health Regulations (Northern Ireland) 2003

² Further information is detailed in the Department of Health's publication Good Management Good Records (GMGR November 2011) http://connect.publichealthagency.org/policy/records-management-good-records

- The Copyright, Designs and Patents Acts 1988
- The Data Protection Act (DPA) 1998
- The Data Protection (Processing of Sensitive Personal Data)
 Order 2000
- Directive 2001/83/EC of the European Parliament and of the Council of 6 November 2001 on the Community Code Relating to Medicinal Products for Human Use
- The Electronic Communications Act 2000
- The Environmental Information Regulations 2004
- The Foster Placement (Children) Regulations (Northern Ireland) 1996
- The Freedom of Information Act (FOIA) 2000
- The Gender Recognition Act 2004
- The Gender Recognition (Disclosure of Information) (England, Wales and Northern Ireland) (No. 2) Order 2005
- The Health & Personal Social Services, General Dental Services (Amendment) Regulations (Northern Ireland) 2008
- The Health & Personal Social Services, General Medical Services Contracts Regulations (Northern Ireland) 2004
- The Health and Safety at Work (Northern Ireland) Order 1978
- The Health and Social Services (Reform) Act (Northern Ireland) 2009
- The Human Fertilisation and Embryology Act 1990, as amended by the Human Fertilisation and Embryology Act 2008
- The Human Rights Act 1998
- The Limitation (Northern Ireland) Order 1989
- Police Act 1997 and the Memorandum to A Code of Practice for Third Party recipients of Criminal Record Information

- The Privacy and Electronic Communications (EC Directive) Regulations 2003
- Public Health Act (Northern Ireland) 1967
- The Public Interest Disclosure (Northern Ireland) Order 1998
- The Public Records Act (Northern Ireland) 1923
- Disposal of Documents Order (Northern Ireland)1925
- The Radioactive Substances Act 1993
- The High-activity Sealed Radioactive Sources and Orphan Sources Regulations 2005
- The Re-use of Public Sector Information Regulations 2005
- The Sexual Offences (Amendment) Act 1992 (as amended by the Youth Justice and Criminal Evidence Act 1999)
- Relevant Standards and Guidelines
- BSI DISC BIP 0008
- BS 5454:2000
- BS ISO/IEC 17799:2005 BS ISO/IEC 27001:2005 BS 7799-2:2005
- ISO 15489
- ISO 19005 1:2005
- The Records Management Controls Assurance Standard
- The Northern Ireland Records Management Standard
- Professional Codes of Conduct
- British Dietetic Association
- British Association of Occupational Therapy and College of Occupational Therapy
- British Orthoptic Society
- British Association of Social Workers

- The British Dental Association (BDA) Northern Ireland
- The British Medical Association (BMA) Northern Ireland
- The Chartered Society of Physiotherapy: Rules of Professional Conduct
- The General Dental Council
- The General Medical Council
- The Health Archives Group (HAG)
- Health Professions Council
- NI Social Care Council: Codes of Practice for Social Care Workers and Employers
- The Nursing and Midwifery Council
- The Pharmaceutical Society of Northern Ireland
- The Royal College of General Practitioners
- The Royal College of Pathologists
- The Royal College of Physicians
- The Royal College of Speech and Language Therapists
- The Royal College of Surgeons of England
- The Society of Chiropodists and Podiatrists
- The Society and College of Radiographers