

**Records Management Strategy**

**2011/12 to 2013/14**

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**Terms**

1. **Introduction**

Records Management is the foundation on which the Public Health Agency can build its responses to growing demands for governance and operational effectiveness relating to information. The Data Protection Act 1998 and the Freedom of Information Act 2000 require that the Public Health Agency processes Subject Access and Freedom of Information requests within the timeframes set out in law, while there is also an imperative to do so economically to ensure best use of resources. Furthermore, both Acts require that the Public Health Agency publishes and implements policies in relation to the management of records.

The Public Health Agency therefore recognises that records are an important corporate asset requiring proper management throughout their lifecycle, with due regard taken to legal obligations, professional practice and the Public Health Agency's business needs. All public authorities must ensure that records management policies and procedures are fully compliant with legislation and are a good fit with recognised good practice regarding the management of information.

This strategy should be read in conjunction with the PHA’s Records Management Policy and the DHSSPS Guidance Document ‘Good Management, Good Records’ which has been adopted as the PHA’s Retention and Disposal Schedule.

1. **Why do we need a strategy?**

A records management strategy is essential to signal a clear direction to all concerned as to how the governance responsibilities and records/information management issues are to be managed by the Public Health Agency over what will inevitably be a medium-long term timeframe. Staff need to be aware of their individual responsibilities in supporting the Public Health Agency to deliver safe and effective services and support the delivery of the national and local agendas.

Appendix 1 outlines the relevant legislation and drivers in relation to legal and professional responsibility for records management.

1. **Purpose of Strategy**

The purpose of this strategy is to provide a framework for planning, developing and implementing records management policies and procedures which are consistent with legislation and the business requirements of the PHA.

1. **Scope of Strategy**

This strategy 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’s publication *Good Records Good Management (GMGR November 2011):*[[1]](#footnote-1)

*“The guidelines contained in GMGR apply to the DHSSPS, HSC and Public Safety records of all types (including records of HSC patients treated on behalf of the HSC in the private healthcare sector, or receiving social care services contracted for (procured by) HSC bodies)”*

*These may consist of:*

* *patient health records (electronic or paper based, including those concerning all specialties, and GP medical records);*
* *client social care records (electronic or paper based);*
* *records of private patients seen on HSC premises;*
* *accident & emergency, birth, and all other registers;*
* *theatre registers and minor operations (and other related) registers;*
* *X-ray and imaging reports, output and images;*
* *administrative records (including, for example, agendas and minutes of meetings, personnel, estates, financial and accounting records, notes associated with complaint-handling);*
* *records specified in regulations;*
* *audit and accountability records;*
* *information, technology and communication records; and*
* *governance and policy records.*

*These include records held in all formats, for example:*

* *paper records, reports, diaries and registers etc;*
* *photographs, slides, and other images;*
* *microform (i.e. microfiche/microfilm);*
* *audio and video tapes, cassettes, CD-ROM etc;*
* *e-mails;*
* *computerised records;*
* *scanned records; and*
* *Text messages (both outgoing and incoming responses)”.*

## Aims

The aims of the Public Health Agency’s Records Management Strategy are 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.

## 6.0 Objectives

6.1The objectives of the Records Management Strategy are as follows:

6.1.1 Responsibility and Accountability

*To provide a clear system of accountability and responsibility for record keeping and use.*

It is important that all individuals in the Public Health Agency take responsibility and accountability in the creation, amendment, management, storage of and access to all Public Health Agency records. A major target is therefore to have a clear chain of managerial responsibility and accountability for all records created by the Public Health Agency. This is the prerequisite for an effectively coordinated records management strategy.

6.1.2 Record Quality

*To create and keep records which are adequate, consistent, and necessary for statutory, legal and business requirements*

Public Health Agency records should be accurate and complete, in order to facilitate audit, fulfil the Public Health Agency’s responsibilities, and protect its legal and other rights. Records should show proof of their validity and authenticity so that any evidence derived from them is clearly credible and authoritative.

6.1.3 Management

*To achieve systematic, orderly and consistent creation, retention, appraisal and disposal procedures for records throughout their life cycle*

Record-keeping systems should be easy to understand, clear, and efficient in terms of minimising staff time and optimising the use of space for storage.

6.1.4 Security

*To provide systems and the physical environment which maintain appropriate confidentiality, security and integrity for records in their storage and use.*

Records must be kept securely to protect the confidentiality and authenticity of their contents, and to provide further evidence of their validity in the event of a legal challenge. This relates to both manual and electronic records.

6.1.5 Access

*To provide clear and efficient access for employees and others who have a legitimate right of access to Public Health Agency records, and ensure compliance with Access to Health Records, Data Protection and Freedom of Information legislation.*

Access is a key part of any records management strategy. Fast, efficient access to records unlocks the information and knowledge they contain.

This relates to records of all types in all formats, including electronic records, throughout their lifecycle, from planning and creation through to disposal ensuring that all records are kept in an accessible format.

6.1.6 Audit

*To audit and measure the implementation of the records management strategy against agreed standards.*

The performance of the records management programme will be audited.

6.1.7 Training

*To provide training and guidance on legal and ethical responsibilities and operational good practice for all staff involved in records management.*

Effective records management involves staff at all levels. Training and guidance enables staff to understand and implement policies, and facilitates the efficient implementation of good record keeping practices.

1. **Responsibilities for Records**

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

7.1 Statutory Responsibility

“Good Records Good Management” 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.

7.2 Roles and responsibilities within Public Health Agency

The formal roles and responsibilities relating to records management within the Public Health Agency are set out in section 3 of "Good Management Good Records" and are reproduced in the Records Management Policy.

* **All Staff** - All staff have a responsibility to comply with this Strategy and all records management policies and 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 Statement of Internal Control 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 PHA 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 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 on the implementation of the Records Management Strategy as part of the wider progress report on 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.

1. **How do we get there?**

The following Action Plan sets out the actions to be taken forward to achieve the aims and objectives set out in this strategy.

**8.0 How Do We Get There? - Action Plan**

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| **Aim** | **Objective** | **Action** | **When Will It Be Done?** | **Responsibility** | **Controls Assurance Standard** |
| **To ensure awareness of the importance of records management and the need for responsibility and accountability at all levels** | **Responsibility and Accountability:**  To provide a clear system of accountability and responsibility for records | Establish PHA Wide IG Steering Group to oversee and steer the implementation of RM strategy.  Development a PHA Records Management Strategy with process for ongoing monitoring and review.  Establish a Records Management Working Group to oversee and steer the implementation of the records management strategy.  Monitor the performance of the PHA records management programme.  Report progress to PHA Board via IGSG.  Provide advice on records management. | Oct 2011 onwards | Governance Manager  Records Management Working Group (RMWG) | *1.1*  *1.1*  *1.3*  *1.4*  *1.6*  *2.1*  *2.2*  *2.3*  *2.5*  *2.6*  *3.1*  *3.2*  *3.3*  *3.4*  *4.1*  *4.2*  *4.3*  *4.4* |
|  | **Training:**  Provision of appropriate training to all staff within the PHA  Develop and implement guidance for staff on the management of PHA records in line with good practice | Development of the e-learning platform for staff training.  Ensure that records and information management is included in induction training programmes for new staff. |  | Governance Manager  Records Management Working Group (RMWG) | 2.4  4.1  4.2  4.3  5.1  5.2  5.3 |

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| **Aim** | **Objective** | **Action** | **When Will It Be Done?** | **Responsibility** | **Controls Assurance Standard** |
| **To ensure a consistent, systematic and planned approach to records management covering records from creation to disposal** | **Record Quality:**  To create and keep records which are adequate, consistent, and necessary for statutory, legal and business requirements | Develop guidance on good practice with the aim of establishing common and consistent standards of record creation and record keeping within the PHA. This will take account of DPA, FOI and EIR.  Identify all records vital to the continuing functioning of the PHA in the event of disaster and make provision for their protection (cross reference with Risk Register).  Establish good practice guidelines and compliance with the Lord Chancellor’s Code of Practice (S.46), Data Protection Act 1998 and Good Management Good Records.  Internal Audit/Quality Checks made routinely on sample records throughout life cycle | March 2012 | Records Management Working Group (RMWG) | 6.3 |

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|  | **Record Management:**  Record keeping systems should be easy to understand, clear and efficient in terms of minimising staff time and space for storage. | Internal Audit/Quality Checks made routinely on sample records throughout life cycle  Survey all PHA Records to determine what records are held. This will inform the process of appraisal of PHA records, help establish retention and disposal schedules in line with business needs and statutory and legal requirements.  Review of Closed Records and Off Site Storage. Development of File Lists for all Stores.  Review retention and disposal schedules in line with ‘Good Management, Good Records’ guidance.  Establish procedures for the closure of records when no longer current. | Ongoing  Mar 2012  Mar 2012  Mar 2011  Ongoing | Records Management Working Group (RMWG) | 3.1  2.12 |

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| **Aim** | **Objective** | **Action** | **When Will It Be Done?** | **Who Will Do It?** | **Controls Assurance Standard** |
| **To ensure compliance with statutory requirements and increase efficiency by improving the flow of information, and greater coordination of records and storage systems** | **Security:**  Records must be kept securely to protect the confidentiality of their contents, and to provide further evidence of their validity in the event of legal challenge.  Ensure Record Management policy includes assessment of the physical environment  **Access:**  Ensure the fast and efficient access to records to unlock the information and knowledge they contain. | Implement appropriate access controls for records.  Ensure records are disposed of in a secure confidential method. Develop appropriate protocols for information sharing and subject specific information sharing agreements for the exchange of confidential and personal information.  Undertake a physical check of record storage areas to ensure that they are safe from unauthorised access.  Review the provision of storage for records held off site to ensure that no environmental damage is caused to records and that they are safe from unauthorised access. | Ongoing  Feb 2012 | Records Management Working Group (RMWG)  Governance Manager | 2.8  4.5 |

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|  | **Audit:**  Develop performance indicators for the records management programme.  Introduce the auditing of performance of the records management programme in order to ensure the maintenance of standards. | Undertake assessment of compliance with the Records Management Controls Assurance Standard and development of associated remedial actions.  Provide advice and support for departments in meeting the agreed standards.  Development of performance indicators and ongoing monitoring of the performance of the PHA records management programme. Ensure that effective internal controls are in place and that records management objectives are being met.  Implement reporting arrangements of performance against the Records Management Action Plan.  Ensure records management policies and procedures are reviewed and updated annually. | Ongoing | Records Management Working Group (RMWG) | 2.7  6.2  6.3  6.4 |

1. **Summary and Conclusions**

Good records management plays a vital role in promoting excellence in information governance in our organisation. High quality public health requires the support of well functioning records systems which encourage better use of space, better use of staff time, reduced costs, reduction in risk exposure and compliance with legislation and standards. Implementation of this Strategy and its subsequent policies procedures protocols and guidelines will ensure that the Public Health Agency has the appropriate framework in place to meet legislative and organisational records management requirements.

**Appendix 1**

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 listed[[2]](#footnote-2) in this Appendix are as follows:

* [The Access to Health Records (Northern Ireland) Order 1993](http://www.legislation.gov.uk/nisi/1993/1250/contents/made)
* [The Access to Personal Files and Medical Reports (Northern Ireland) Order 1991](http://www.legislation.gov.uk/nisi/1991/1707/contents/made)
* Administrative Law
* [The Adoption Agencies Regulations (Northern Ireland) 1989](http://www.dhsspsni.gov.uk/print/index/hss/child_care/adoption/adoption_guidance_and_regulations.htm)
* [The Blood Safety and Quality Regulations 2005 (as amended)](http://www.uklaws.org/statutory/instruments_34/doc34240.htm)
* [The Census (Confidentiality) (Northern Ireland) Order 1991](http://www.legislation.gov.uk/nisi/1991/760/contents/made)
* [The Civil Evidence (Northern Ireland) Order 1997](http://www.legislation.gov.uk/nisi/1997/2983/introduction?timeline=true)
* The Common Law Duty of Confidentiality  
  – Confidentiality: [DHSSPS code of practice (PDF 111KB)](http://www.dhsspsni.gov.uk/print/codeofpracticeleafletmay2009.pdf)
* [The Computer Misuse Act 1990](http://www.legislation.gov.uk/ukpga/1990/18/contents)
* [The Congenital Disabilities (Civil Liability) Act 1976](http://www.legislation.gov.uk/ukpga/1976/28/contents/enacted)
* [The Consumer Protection (Northern Ireland) Order 1987](http://www.legislation.gov.uk/nisi/1987/2049/contents/made)
* [The Control of Substances Hazardous to Health Regulations (Northern Ireland) 2003](http://www.legislation.gov.uk/nisr/2003/34/introduction/made?view=plain)
* [The Copyright, Designs and Patents Acts 1988](http://www.legislation.gov.uk/ukpga/1988/48/contents)
* [The Data Protection Act (DPA) 1998](http://www.legislation.gov.uk/ukpga/1998/29/contents)
* [The Data Protection (Processing of Sensitive Personal Data) Order 2000](http://www.legislation.gov.uk/uksi/2000/417/contents/made)
* [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](http://www.ema.europa.eu/pdfs/human/pmf/2001-83-EC.pdf)
* [The Electronic Communications Act 2000](http://www.legislation.gov.uk/ukpga/2000/7/notes/contents)
* [The Environmental Information Regulations 2004](http://www.opsi.gov.uk/si/si2004/draft/20040331.htm)
* [The Foster Placement (Children) Regulations (Northern Ireland) 1996](http://www.legislation.gov.uk/nisr/1996/467/introduction/made?view=plain)
* [The Freedom of Information Act (FOIA) 2000](http://www.legislation.gov.uk/ukpga/2000/36/contents)
* [The Gender Recognition Act 2004](http://www.legislation.gov.uk/ukpga/2004/7/section/22)
* [The Gender Recognition (Disclosure of Information) (England, Wales and Northern Ireland) (No. 2) Order 2005](http://www.legislation.gov.uk/uksi/2005/916/contents/made)
* [The Health & Personal Social Services, General Dental Services (Amendment) Regulations (Northern Ireland) 2008](http://www.legislation.gov.uk/nisr/2008/395/contents/made)
* [The Health & Personal Social Services, General Medical Services Contracts Regulations (Northern Ireland) 2004](http://www.legislation.gov.uk/nisr/2004/140/contents/made)
* [The Health and Safety at Work (Northern Ireland) Order 1978](http://www.legislation.gov.uk/nisi/1978/1039)
* [The Health and Social Services (Reform) Act (Northern Ireland) 2009](http://www.legislation.gov.uk/nia/2009/1/notes/contents)
* [The Human Fertilisation and Embryology Act 1990, as amended by the Human Fertilisation and Embryology Act 2008](http://www.legislation.gov.uk/ukpga/2008/22/contents)
* [The Human Rights Act 1998](http://www.legislation.gov.uk/ukpga/1998/42/contents)
* [The Limitation (Northern Ireland) Order 1989](http://www.legislation.gov.uk/nisi/1989/1339/schedule/3/made?view=plain)
* [Police Act 1997](http://www.legislation.gov.uk/ukpga/1997/50/contents) and the [Memorandum to A Code of Practice for Third Party recipients of Criminal Record Information](http://www.dojni.gov.uk/index/accessni/support/code_of_practice_-_amended_for_12_october-5.doc)
* [The Privacy and Electronic Communications (EC Directive) Regulations 2003](http://www.legislation.gov.uk/uksi/2003/2426/contents/made)
* [Public Health Act (Northern Ireland) 1967](http://www.statutelaw.gov.uk/content.aspx?LegType=All+Legislation&searchEnacted=0&extentMatchOnly=0&confersPower=0&blanketAmendment=0&sortAlpha=0&PageNumber=0&NavFrom=0&parentActiveTextDocId=1908736&ActiveTextDocId=1908736&filesize=120977)
* [The Public Interest Disclosure (Northern Ireland) Order 1998](http://www.statutelaw.gov.uk/content.aspx?LegType=All+Legislation&searchEnacted=0&extentMatchOnly=0&confersPower=0&blanketAmendment=0&sortAlpha=0&PageNumber=0&NavFrom=0&parentActiveTextDocId=1922108&ActiveTextDocId=1922108&filesize=57516)
* [The Public Records Act (Northern Ireland) 1923](http://www.statutelaw.gov.uk/legResults.aspx?LegType=All+Legislation&title=freedom+of+information&Year=2000&searchEnacted=0&extentMatchOnly=0&confersPower=0&blanketAmendment=0&TYPE=QS&NavFrom=0&activeTextDocId=1876329&PageNumber=1&SortAlpha=0)
* [Disposal of Documents Order (Northern Ireland)1925](http://www.proni.gov.uk/index/professional_information/legislation.htm)
* [The Radioactive Substances Act 1993](http://www.legislation.gov.uk/ukpga/1993/12/contents)
* [The High-activity Sealed Radioactive Sources and Orphan Sources Regulations 2005](http://www.legislation.gov.uk/uksi/2005/2686/contents/made)
* [The Re-use of Public Sector Information Regulations 2005](http://www.legislation.gov.uk/uksi/2005/1515/introduction/made)
* [The Sexual Offences (Amendment) Act 1992 (as amended by the Youth Justice and Criminal Evidence Act 1999)](http://www.legislation.gov.uk/ukpga/2003/42/schedule/6)

**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

**Glossary of Records Management Terms**

**A**

**ACCESS**

The availability of or permission to consult records. (The National Archives, Records Management Standard RMS1.1)

**APPRAISAL**

The process of evaluating an organisation’s activities to determine which records should be kept, and for how long, to meet the needs of the organisation, the requirements of Government accountability and the expectations of researchers and other users of the records. (The National Archives, Records Management Standard RMS 1.1)

The process of distinguishing records of continuing value from those of no value so that the latter may be eliminated. (The National Archives, Definitions in the Context of the Seamless Flow Programme)

**ARCHIVES**

Those records that are appraised as having permanent value for evidence of ongoing rights or obligations, for historical or statistical research or as part of the corporate memory of the organisation. (The National Archives, Records Management Standard RMS 3.1)

It is a legal requirement for HSC records selected as archives to be held by PRONI.

**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.

**AUTHENTICITY**

An authentic record is one that can be proven to:

• be what it purports to be;

• have been created or sent by the person purported to have created or sent it; and

• have been created or sent at the time purported.

To ensure the authenticity of records, organisations should implement and document policies and procedures which control the creation, receipt, transmission, maintenance and disposition 71 of records to ensure that record creators are authorised and identifiable and that records are protected against unauthorised addition, deletion, alteration, use and concealment. (BS ISO 15489-1:2001(E))

**B**

**BEST PRACTICE – BEST CARE**

“Best Practice – Best Care” defines clinical and social care governance as a framework within which HSC organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care and treatment.

**C**

**COMPLAINT**

A complaint is “an expression of dissatisfaction that requires a response”.

**CONTRACT**

Legally enforceable binding agreement between parties.

**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.

**D**

**DATA PROTECTION ACT 1998**

The Act is concerned with personal data, that is, any data relating to an individual who can be identified.

**DATA CONTROLLER**

A person who (either alone or jointly or in common with other persons) determines the purposes for which and the manner in which any personal data are, or are to be, processed.

**DATA SUBJECT**

An individual who is the subject of personal data.

**DEPARTMENT**

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

**DEPARTMENTAL INFORMATION MANAGER (DIM)**

In accordance with the Disposal of Documents Order (NI) 1925 No. 167 each Government Department has a statutory duty to appoint an officer who is specially conversant with the records of the Department. This is the Departmental Information Manager, appointed by the Permanent Secretary with a duty to provide advice, guidance and general support to all grades of staff within the DHSSPS on matters relating to the Records Management, Freedom of Information, and Data Protection.

**DESTRUCTION**

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

**DIRECTOR**

Officers next in line to the Chief Executive. This usually means those who form part of the Senior Management Team or Organisational Board.

**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).

**DIRECTORATE**

The term can mean unit, operational business area, branch, division, service/service area, department. It is the term used to define the breakdown of groups of people with the same purpose within the organisation. The name used for the breakdown within organisations can differ.

**E**

**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.

**ENVIRONMENTAL INFORMATION REGULATIONS (EIR)**

The Environmental Information Regulations 2004 (EIR) is a UK Statutory Instrument (SI 2004 No. 3391) that provides a statutory right of access to environmental information held by UK public authorities. The regulations came into force on 1 January 2005.

**F**

**FILE**

An accumulation of records maintained in a predetermined physical arrangement.

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. A file is usually the basic unit within a records series.

**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.

**G**

**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.

**H**

**HEALTH RECORD**

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

**HSC**

Health and Social Care

**I**

**INFORMATION ACCESS REQUEST**

A request from a data subject for information. They are entitled to be told whether the public authority holds the information, and subject to exemptions, to be supplied with the information.

**INFORMATION COMMISSIONER**

The Information Commissioner enforces and oversees the Data Protection Act 1998 and the Freedom of Information Act 2000.

**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 83 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.

**J**

**K**

**L**

**M**

**MICROFORM**

Records in the form of microfilm or microfiche, including aperture cards.

**MINUTES (MASTER COPIES)**

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.

**N**

**NATIONAL ARCHIVES**

The National Archives (TNA) is a UK government department and an executive agency of the 85 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.

**O**

**P**

**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)).

**PRIVATE PATIENTS**

A patient who pays for medical treatment or advice, rather than receiving it free through the government's system.

Article 31 of the Health and Personal Social Services Order 1972 (known as the 1972 Order), authorises HSC hospital accommodation and services to be used by private patients - it appears that under this provision the patient continues to be treated as a private patient whilst in hospital. Article 33 of the 1972 Order provides for Trusts to be able to charge for hospital accommodation. A patient who pays for a single room under Article 33 of the 1972 Order is still receiving treatment under the HSC.

**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.

**PUBLICATION SCHEME**

A publication scheme is required of all HSC organisations under the Freedom of Information Act 2000. It details information which is available to the public now or will be in the future, where it can be obtained from and the format it is or will be available in. Schemes must be approved by the Information Commissioner and reviewed periodically to make sure they are accurate and up to date.

**Q**

**R**

**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)).

**REGISTER**

An official written (either on hard copy or computer) record of names or events or transactions.

**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.

**S**

**SUBJECT ACCESS REQUEST**

A written signed request for information made by an individual to a person or organisation that they believe holds the information, to see the information held about them.

**T**

**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.

**U**

**V**

**VIDEOS**

Film recorded on video cassette.

**W**

**X**

**Y**

**Z**

1. [*http://connect.publichealthagency.org/policy/records-management-good-management-good-records*](http://connect.publichealthagency.org/policy/records-management-good-management-good-records) *or* [*http://www.dhsspsni.gov.uk/gmgr.htm*](http://www.dhsspsni.gov.uk/gmgr.htm) [↑](#footnote-ref-1)
2. *Further information is detailed in the Department of Health’s publication Good Records Good*

   *Management (GMGR November 2011)*

   [*http://connect.publichealthagency.org/policy/records-management-good-management-good-records*](http://connect.publichealthagency.org/policy/records-management-good-management-good-records)

   *or* [*http://www.dhsspsni.gov.uk/gmgr.htm*](http://www.dhsspsni.gov.uk/gmgr.htm) [↑](#footnote-ref-2)