PAPER AND ELECTRONIC CORPORATE RECORDS POLICY

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POLICY SUMMARY
The purpose of this Policy Guideline document is to ensure that the Trust efficiently and effectively manages the creation, filing, retrieval, appraisal, archive and destruction of paper and electronic corporate records.

The Trust monitors the implementation of and compliance with this policy in the following ways:
A three yearly audit will be undertaken by the Information Governance Department looking at the following:
- Roles and Responsibilities have been undertaken as outlined
- Legal Requirements have been met
- Process for tracking records has been followed
- Process for creating records has been followed
- Process for retrieving records has been followed
- Process for retaining and disposing of records has been followed

Services | Applicable | Comments
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Trustwide | ✓ | 
Essex MH&LD |  | 
CHS |  | 

The Director responsible for monitoring and reviewing this policy is Executive Chief Finance Officer
CONTENTS

1.0 INTRODUCTION
2.0 SCOPE
3.0 PURPOSE
4.0 RESPONSIBILITIES
5.0 DEFINITIONS
6.0 LEGAL AND PROFESSIONAL OBLIGATIONS
7.0 IMPLEMENTATION
8.0 MONITORING COMPLIANCE
9.0 REFERENCE TO OTHER POLICIES AND PROCEDURES
Assurance Statement

The purpose of this policy is to ensure that the Trust efficiently and effectively manages the creation, filing, retrieval, appraisal, archive and destruction of paper and electronic corporate records. This policy has been developed in accordance to the Information Governance Alliance – Records Management Code of Practice 2016, and other relevant guidance and legislation and general good practice in records management.

1.0 INTRODUCTION

1.1 Records management is the process by which an organisation manages all the aspects of its records, whether internally or externally generated and in any format or media type, from their creation, all the way through their lifecycle to their eventual disposal or transfer to National Archives / County Archives.

1.2 The Information Governance Alliance have published an NHS Records Management Code of Practice 2016; this document has been put together as a guide to the required standards of practice in the management of records for those who work within or under contract to NHS organisations in England. It is based on current legal requirements and professional best practice.

1.3 The Trust’s records (as defined below) are its corporate memory, providing evidence of actions and decisions; they represent a vital asset to support daily functions and operations. Records support policy formation and managerial decision-making, protect the interests of the Trust and the rights of service users, staff and members of the public. They support consistency, continuity, efficiency and productivity and help deliver services in consistent and equitable ways.

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

1.5 The key consideration of this policy is the way that records are created and filed. Filing systems are at the heart of information storage and retrieval activities. They will ensure that records are accessible and retrievable when and where required, to meet business needs and information access requests (such as Freedom of Information), whilst protecting their security and integrity.

1.6 The Trust has invested in a corporate Electronic Document and Records Management (EDRM) system from Laserfiche. This will be used for filing all corporate electronic records at a suitable point in their lifecycle. It provides capabilities for storage and retrieval, version control, retention and disposal.
2.0 SCOPE

2.1 In the context of Corporate Information Assurance, corporate information refers to information generated by an organisation other than clinical/care (or service user) information. It will therefore include records from the following (and other) areas of the Trust:

- Estates/Engineering
- Financial
- Information Management & Technology (IM&T)
- Personnel/Human Resources
- Purchasing/Supplies

*This list is not exhaustive.*

3.0 PURPOSE

3.1 The purpose for a Records Management system is to ensure that:

- **Records are available whenever needed or requested,** The Trust is able to form an audit of the activities or events that have taken place.
- **Records can be accessed,** both records and the information within them can be located and displayed in a way consistent with its initial use, and that the current version is identified where multiple versions exist.
- **Records can be interpreted,** the context of the record can be interpreted: who created or added to the record and when, during which business process it was created / amended, and how the record is related to other records.
- **Records can be trusted,** the record reliably represents the information, and that its integrity and authenticity can be demonstrated.
- **Records can be maintained through time,** the qualities of availability, accessibility, interpretation and trustworthiness can be maintained for as long as the record is needed, perhaps permanently, despite changes of format.
- **Records are secure,** from unauthorised or inadvertent alteration or erasure, that access and disclosure are properly controlled and audit trails will track all use and changes. To ensure that records are held in a robust format which remains readable for as long as records are required.
- **Records are retained and disposed of appropriately,** using consistent and documented retention and disposal procedures, which include provision for appraisal and the permanent preservation of records with archival value.
- **All Staff are appropriately trained,** so that they are made aware of their responsibilities for record-keeping and record management.
4.0 RESPONSIBILITY

4.1 Chief Executive

4.1.1 The Chief Executive has overall responsibility for records management within the Trust, as accountable officer, and is responsible for the management of the Trust and for ensuring that appropriate mechanisms are in place to support the service delivery and continuity. Records management is key to this as it will ensure appropriate, accurate information is available as required.

4.2 Director of ITT

4.2.1 The Director of ITT has delegated responsibility for ensuring appropriate measures are developed and implemented and that adequate procedures and good practice are in place and followed and enforced to ensure good records management underpins the work of the Trust.

4.2.2 This delegated responsibility includes:

- The development of Electronic Management Systems for electronic records;
- Developing action plans to address records management issues arising from Risk Management Standards (RMS), Information Governance and other reviews.
- Ensuring appropriate training in records management is provided.

4.3 Data Protection Officer (Legal Services Manager)

4.3.1 The Data Protection Officer is responsible for the development, implementation, compliance, monitoring and review of the data protection legislation, including providing guidance on corporate records management issues, and ensuring that related policies and procedures conform to the latest legislation and NHS guides on data protection, confidentiality, information security and rights of access to information (Subject Access Requests).

4.4 Freedom of Information / Environmental Information Regulations Team (Information Governance Team)

4.4.1 The Information Governance Team will provide advice and support on the Freedom of Information Act and the Environmental Regulations Act.

4.5 Individual Responsibilities

4.5.1 All staff, whether clinical or administrative, who create, receive and use corporate records have records management responsibilities. In particular all staff must ensure that they keep appropriate records of their work in the Trust and manage those records in keeping with this policy and any subsequent guidance issued.
5.0 DEFINITIONS

**Definition of a Record:-**

5.1 Records are defined as ‘recorded information, in any form, created or received and maintained by the Trust in the transaction of its business or conduct of affairs and kept as evidence of such activity’.

5.2 These can be primary, management or support activities. They are kept as audit trail evidence of and information about the Trust’s functions, decisions, processes, procedures, operations, proper conduct, rights and obligations, transactions or other activities of the organisation.

5.3 Records can exist in any medium and format, both electronic and hard copy, including but not restricted to e-mail messages, word processing and spreadsheet documents, presentations, PDFs, desktop publishing, scanned images, instant messages, audio, video, databases, electronic forms, computer reports, photographs, CAD and maps.

**Definition of Information:-**

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

**Definition of a Records Lifecycle:-**

5.5 This describes the life of a record from its creation / receipt into the organisation, 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.

**Definition of Records Management:-**

5.6 This 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 legally sound, serves the operational needs of the organisation and preserves an appropriate historical record. The key components are:-

- Record Creation
- Record Keeping
- Record Maintenance (including tracking of record movements)
- Access and Disclosure
- Closure and Transfer
- Appraisal
- Archiving
- Appropriate Disposal
6.0 LEGAL AND PROFESSIONAL OBLIGATIONS

6.1 All NHS records are Public Records under the Public Records Acts. The Trust will take actions as necessary to comply with the legal and professional obligations set out in the Information Governance Alliance Code of Practice - Records Management in particular:

- The Public Records Act 1958
- The Data Protection Act 2018
- General Data Protection Regulation 2016
- The Freedom of Information Act 2000
- The Common Law Duty of Confidentiality
- The NHS Confidentiality Code of Practice
- Any new legislation affecting records management as it arises.

7.0 IMPLEMENTATION

7.1 The management of records is a complex process with the need to comply with much guidance and legislation. The Trust has therefore developed a range of procedural guidelines to support implementation of this policy. These guidelines are available on the Trust’s intranet site. They provide comprehensive information and guidance, where appropriate, that ensures all Trust staff are aware of their responsibilities for records from creation, through day-to-day use, selection, storage, maintenance and finally disposal.

8.0 MONITORING COMPLIANCE

8.1 The Executive Chief Finance Officer is responsible for monitoring the implementation and effectiveness of this policy and related procedural guidelines.

8.2 A three yearly audit will be undertaken by the Information Governance Department looking at the following:

- Roles and Responsibilities have been undertaken as outlined
- Legal Requirements have been met
- Process for tracking records has been followed
- Process for creating records has been followed
- Process for retrieving records has been followed
- Process for retaining and disposing of records has been followed

8.3 Results of all audits and monitoring will be presented to the Trust Records Committee for review and an action plan developed to address issues, where necessary.

8.4 All audit reports will contain the background information on what was audited and why, outcome data for each element of the audit tool and recommendations and action plans for improvements.
9.0. REFERENCE TO OTHER POLICIES AND PROCEDURES

9.1 When processing records in any capacity reference should be made to any Trust policies relating to records as well as to local and professional guidance.

9.2 Other documentation will include:

- Records Management Policy and Procedures
- Data Protection and Confidentiality Policy / Procedure
- Information Governance and Security Policy / Procedures
- Information Sharing and Consent Policy / Procedure
- Paper and Electronic Corporate Records (Laserfiche) Procedures
- Records Management Lifecycle Strategy
- Freedom of Information Policy / Procedure

This list is not exhaustive….

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