Procedure for the Retention, Storage and Disposal of Records

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Board Secretary	Jean Aim

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1 Introduction

1.1 This procedure provides practical guidance in retaining, archiving and disposal of clinical and non clinical records in relation to NHS Orkney's requirements.

1.2 NHS Boards have an obligation to disclose information to members of the public. There are also subject access obligations to disclose health records to individual patients and or their legal representatives. NHS Orkney must therefore be capable of tracing all records efficiently, ensure that records are maintained for the minimum periods specified by the Scottish Government, and maintain written proof of disposals.

1.3 This procedure has been produced in accordance with NHS Orkney's Information Governance Strategy and links to the Records Management Policy. Both accessible on the Blog.

1.4 A procedure is needed that will ensure that all inactive records are stored securely, readily available when required and disposed of appropriately.

1.5 Implementation of this procedure will be monitored and audits will be carried out of stored/archived records to ensure that this Procedure has been followed.

2 Aim

2.1 The aim of the procedure is to ensure uniformity across the organisation, and to ensure that records management practice throughout NHS Orkney complies with relevant legislation and national standards.

3 Scope

3.1 This procedure covers all **inactive** paper records belonging to the organisation. Detailed guidance on computer records is contained in the NHS Orkney IT Security Policy, for example CD, DVD, memory stick and computer held records.

4 Procedure

4.1 All records must be stored securely until minimum retention periods have expired. Staff should refer to the retention schedule for non clinical records and clinical records in the NHS Orkney Records Management Policy

4.2 **Current** records should be kept in department/service bases. Confidential records should be kept in a locked filing cabinet or cupboard, and the room should be locked when not in use. Access should be limited to designated staff and movement of records should be tracked either manually or electronically.

4.3 Additional records that fall within minimum retention periods may be sent for storage at the designated Records Archive section in the Selbro Joint Store at Hatston, Kirkwall, ensuring this is followed.

4.4 The procedure for archiving/storing records is as follows:

4.4.1 All records for archiving/storage must be sorted and placed in archive boxes. These should be ordered from Central Stores.

4.4.2 Records Storage List should be used to list all records in box. All boxed documents should be in alphabetic order and listed on the contents list alphabetically where possible. Each record should be listed with the name of the document, date of the document and disposal date. For clinical records the patients name, address, CHI and last date of treatment/intervention should be noted. The list should be placed inside the box on top of the records and a copy kept by the department. It is essential that this process is followed. At the end of the retention period the box of records will be destroyed and it is a requirement that a record of what has been destroyed is kept.

4.4.3 Label 1 should be used for the storage of non clinical documents that fall within the retention period. The A4 sheet cut in half will provide two A5 labels. Labels should be attached just below the handle so that they will be visible on the shelf.

4.4.4 Label 2 should be used for the storage of clinical documents that fall within the retention period. The A4 sheet cut in half will provide two A5 labels. Labels should be attached just below the handle so that they will be visible on the shelf.

Records Storage List:

List of Clinical Records to be stored / destroyed
(delete as appropriate)

Specialty / Department

Storage Location

Name of Patient	CHI	Home Address	Date of last treatment / intervention	Destruction Method
				Secure in house shredding

Authorised for Storage / Disposal

Name: **Title:**

Signature: **Date:**

(1 copy to be kept in box – 1 copy to be kept at Specialty / Department)

Records Storage List:

List of Non-clinical Records to be stored / destroyed
(delete as appropriate)

Specialty / Department

Storage Location

File Reference/Name	Period Covered (Yrs)	Date to be destroyed	Destruction Method
			Secure shredding - Estates

Authorised for Storage / Disposal

Name: **Title:**

Signature: **Date:**

(1 copy to be kept in box – 1 copy to be kept at Specialty / Department)

NON CLINICAL DOCUMENTS FOR STORAGE (label 1)

Specialty / Department

Description and Date of Documents contained within box

Reason for storage e.g. documents no longer required but within retention period

Contact Person	**Person authorising destruction**
Name:	**Name:**
Title:	**Title:**

Disposal Date:

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NON CLINICAL DOCUMENTS FOR STORAGE

Specialty / Department

Description and Date of Documents contained within box

Reason for storage e.g. documents no longer required but within retention period

Contact Person	**Person authorising destruction**
Name:	**Name:**
Title:	**Title:**

Disposal Date:
CLINICAL DOCUMENTS FOR STORAGE **(label 2)**

Specialty / Department

Description and Date of Documents contained within box

Reason for storage e.g. documents no longer required but within retention period

Contact Person	**Person authorising destruction**
Name:	**Name:**
Title:	**Title:**

Disposal Date:

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CLINICAL DOCUMENTS FOR STORAGE

Specialty / Department

Description and Date of Documents contained within box

Reason for storage e.g. documents no longer required but within retention period

Contact Person	**Person authorising destruction**
Name:	**Name:**
Title:	**Title:**

4.5 **Disposal Date:**

The procedure for the destruction of records is as follows:

4.5.1 Records for destruction, that is those that fall outside the retention period, should be put in separate archive boxes. These should be ordered from central stores

4.5.2 Label 3 should be used for the destruction of non clinical documents that fall outside the retention period. The A4 sheet cut in half will provide two A5 labels. Labels should be attached just below the handle so that they will be visible on the shelf. For A4 folders that are stored directly on shelves a sheet of labels is attached that should be copied.

4.5.3 When the procedure has been followed Contact the Estates Helpdesk via the Blog (contact the helpdesk link) to inform them that there are records for collection and destruction.

The porters will shred all records for destruction in-house.

4.5.4 For digital records, destruction should apply to all copies of a record. It is the case that if you delete a document from your computer, it is not deleted completely. If the record is of a medium or high level of sensitivity, you may wish to ensure that it is deleted completely. You should empty your recycle bins and deleted items folders, both on e-mail and on your pcs, regularly. It is possible that a document may still remain on a disc in hidden form.

Do not forget back-ups. Documents may have been deleted from the main network, but unless back-ups are regularly over-written or disposed of, records and data may linger there. Monthly back-up tapes are kept permanently however documents can only be retrieved if a request is passed to the Head of IT. This is covered fully in the NHS Orkney IT Security Policy.

RECORDS FOR DESTRUCTION **(label 3)**

Specialty / Department

Description and Date of Documents contained within box

Reason for destruction e.g. documents no longer required and outwith retention period

Contact Person	**Person authorising destruction**
Name:	**Name:**
Title:	**Title:**

Destruction Date:

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RECORDS FOR DESTRUCTION

Specialty / Department

Description and Date of Documents contained within box

Reason for destruction e.g. documents no longer required and outwith retention period

Contact Person	**Person authorising destruction**
Name:	**Name:**
Title:	**Title:**

Destruction Date:

4.6 Records for permanent preservation

4.6.1 Records over 30 years and selected for permanent preservation must be transferred to a ‘relevant place of deposit’ for public records. Such records will be stored at the Orkney Library and Archives, Junction Road, Kirkwall.

4.6.2 Label 4 should be used for records for permanent retention. The A4 sheet cut in half will provide two A5 labels. Labels should be attached just below the handle so that they will be visible on the shelf.

DOCUMENTS FOR PERMANENT RETENTION (label 4)

Specialty / Department

Description and Date of Documents contained within box

Reason for permanent retention ie Board records

Contact Person	**Person authorising permanent retention**
Name:	
Title:	**Name:**
	Title:

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DOCUMENTS FOR PERMANENT RETENTION

Specialty / Department

Description and Date of Documents contained within box

Reason for permanent retention ie Board records

Contact Person	**Person authorising permanent retention**
Name:	
Title:	**Name:**
	Title:

5 References and sources of information

NHS Orkney Information Governance Strategy

NHS Orkney Records Management Policy

NHS Orkney IT Security Policy

Computer Misuse Act (1990)
Access to Health Records Act (1990)
Freedom of Information (Scotland) Act 2005
Public Records (Scotland) Act 2011
NHS Code of Practice on Protecting Patient Confidentiality
NHS Scotland Information Security Handbook
Caldicott Report (1997)
General Medical Council Code of Practice
Nursing & Midwifery Council Code of Practice
Health & Care Professions Council Code of Practice
Scottish Accord for the Sharing of Personal Information (SASPI) 2012
CEL 26(2011) Information Assurance Strategy
HDL (2006) 41 NHS Scotland Information Security Policy
MEL (2000) 17 Data Protection Act 1998 – (Guidance to the service on the Data Protection Act 1998)
MEL (1997) 45 Guidance on use of fax for transfer of personal health information within NHSS
MEL 1992(14) – Safeguarding Confidentiality Identifiable data in the Contracting Process
NHS 1990 (GEN) 22 – Confidentiality of Personal Health Information – A Code of Practice
NHS/DGM (1992)20 – Security of Health Records
Data Protection Act. (1998)
Human Rights Act (1998)