

Records Management Policy

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Scottish Government Records Management Code of Practice for Health and Social Care Error! Bookmark not defined.

Annex B: Record Retention Schedule.....Error! Bookmark not defined.

1. Changes since last approval

Change	Version	Date
Update following release of 2024 RM Code of Practice. Minor wording amendments, and addition of IAO responsibilities paragraph. Reformatting to new document template	7	09/2024

2. References

Document	Location
Information Governance Policy	NHSO-IG-POL003 Information Governance Policy v4.1.pdf
Freedom of Information Policy	NHSO-IG-POL002 Freedom of Information Policy v6.pdf
Scottish Government Health and Social Care Records Management Code of Practice	Records Management Code of Practice for Health and Social Care - gov.scot (www.gov.scot)

Retention, Storage, and Disposal of Records Procedure	NHSO-IG-PRO003 Retention, Storage and Disposal of Records Procedure v6.pdf
Record Naming Conventions and Metadata Guidelines	NHSO-IG-GUI001 Record naming conventions and metadata guidelines v1.pdf
Paper Records in Selbro Destruction Procedure	NHSO-IG-PRO004 Paper Records in Selbro Destruction Procedure.pdf
Photographic and Audio-Visual Recording Guidelines	Under review September 2024

3. Introduction

Records Management is concerned with the systematic creation, capture, storage and retrieval of records throughout their lifecycle. A record is recorded information, in analogue or digital format, created or received and maintained by NHS Orkney in the transaction of business or the conduct of affairs, and kept as evidence of such activity. Records include charters, deeds, legal documents, minutes, reports, accounts, agreements, licenses, registers, project work, clinical, client and staff files etc. For the purposes of the Board, a record is recorded information that has been created or received by NHS Orkney or those contracted to provide services on its behalf in the regular course of its business activities or in the pursuance of legal transactions.

As such, all records are the property of NHS Orkney and not of the employee, agent, contractor, patient or client. This applies regardless of the physical location of the record, or whether it is held in off-site storage, in a computer or within a service provider's system. NHS Orkney's records constitute an auditable account of the Board's activities, which provides evidence of the business, actions, decisions and resulting policies formed by the organisation.

Records represent a vital asset, which support the daily functions of the Board and protect the interests and rights of staff, patients and members of the public who have dealings with the organisation. Effective record keeping supports efficiency, consistency and continuity of work and enables the Board to deliver a wide range of sustainable services. It ensures that the correct information is: captured, stored, maintained, retrieved and destroyed or preserved in accordance with business need, statutory and legislative requirements.

The [Scottish Government Records Management Health and Social Care Code of Practice 2024](#) has been published by the Scottish Government 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 Scotland. It is based on current legal requirements and professional best practice.

Records management is an essential part of enabling the Health Board to achieve priority outcomes that reflect what is most important to the people and communities of Orkney.

NHS Orkney will maintain records management policy, procedures and practices across all its service areas. These will be based upon the requirements of the Public Records (Scotland) Act 2011, records management best practice and the principles detailed in the Records Management Policy. Records Management is a corporate function within NHS Orkney and brings together responsibilities for all records held by and on behalf of the Board, from creation through to disposition. This document sets out a framework within which the staff responsible for managing the Board'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.

4. Purpose and scope

This policy relates to all clinical and non-clinical 'corporate' operational records held in any format by the Board, irrespective of format (analogue or digital). These include:

- all administrative records, including but not limited to: workforce, estates, financial and accounting records, governance and projects, quality improvement and service management; and
- all patient health records, for all specialties, and including private patients, including x-ray and imaging reports, registers and similar records

5. Definitions

Records Management 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 administratively and legally sound, whilst at the same time serving the operational needs of the Board and preserving an appropriate historical record. The key components of records management are:

- record creation;
- record keeping;
- record maintenance (including tracking of record movements);
- access and disclosure;
- closure and transfer;
- appraisal;
- archiving; and
- disposal.

The term **Records Life Cycle** describes the life of a record from its creation/receipt 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.

In this policy, **Records** are defined as 'recorded information, in any form, created or received and maintained by the Board in the transaction of its business or conduct of affairs and kept as evidence of such activity'.

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

6. Responsibilities

1.1 Chief Executive

The Chief Executive has overall responsibility for records management in the Board. As Accountable Officer they are responsible for the management of the organisation and for ensuring appropriate mechanisms are in place to support service delivery and continuity. Records management is key to this as it will ensure appropriate, accurate information is available as required.

1.2 The Board

The Board has a particular responsibility for ensuring that it corporately meets its legal responsibilities, and for the adoption of internal and external governance requirements.

1.3 Caldicott Guardian

The Board's Caldicott Guardian has a particular responsibility for reflecting patients' interests regarding the use of patient identifiable information. They are responsible for ensuring patient identifiable information contained within records is shared in an appropriate and secure manner.

1.4 Digital and Information Operations Group

The Board's Digital and Information Operations Group is responsible for ensuring that this policy is implemented, through the Records Management Plan and in adherence to the Scottish Government Health and Social Care Code of Practice, and that the records management system and processes are developed, co-ordinated and monitored.

1.5 Clinical Administration Manager

The Clinical Administration Manager is responsible for the overall development and maintenance of health records management practices throughout the organisation. They have particular responsibility for drafting guidance to support good records management practice in relation to patient clinical records and for promoting compliance with the Records Management Policy, in such a way as to ensure the efficient, safe, appropriate and timely retrieval of patient information.

1.6 Corporate Records Manager

The Corporate Records Manager is responsible for the overall development and maintenance of corporate and administrative records management practices throughout the organisation. They have particular responsibility for drafting guidance to support good

records management practice (other than for clinical records) and for promoting compliance with NHS Orkney's Records Management Policy.

1.7 All Staff and contractors

All Board staff and contractors, whether clinical or administrative, who create, receive and use records have records management responsibilities. In particular all staff must ensure that they keep appropriate records of their work in the Board and manage those records in keeping with this policy and with any guidance subsequently produced.

1.8 Information Asset Owners (IAOs)

An Information Asset Owner is a senior member of staff who is the nominated owner for one or more identified information assets of the organisation. Information assets can be analogue records, digital records or records systems, or intangible information (e.g. the knowledge of staff).

Responsibilities for the organisation's information fall into four main categories:

1. Recording Information Assets and Data Flows
2. Understanding and monitoring access to the information asset
3. Management of the information risk for the asset
4. Information security culture

7. Auditable Standards

Please list the audit requirements for your area

Monitoring requirement	Monitoring type	Frequency
Public Records (Scotland) Act compliance	Progress Update Review and Records Management Plan Resubmission	Annual, and every 5 years upon request

8. Legal and Professional Standards

All NHS records are Public Records under the Public Records (Scotland) Act 2011. The Board will take actions as necessary to comply with the legal and professional obligations set out in the [Scottish Government Records Management Health and Social Care Code of Practice 2024](#), in particular:

- The Public Records (Scotland) Act 2011;
- The Data Protection Act 2018 and any subsequent update including the UK General Data Protection Regulations (UKGDPR);
- The Freedom of Information (Scotland) Act 2002; and
- The Common Law Duty of Confidentiality

and any new legislation affecting records management as it arises.

9. Registration of Records Collections

The Board will establish and maintain mechanisms through which departments and other units, led by Information Asset Owners (IAOs), can register the records they are maintaining. The inventory or 'information asset register' of record collections will facilitate:

- the classification of records into series;
- operational criticality; and
- the recording of the responsibility of individuals creating and managing records

It is the responsibility of Information Asset Owners to create and monitor provisions for the management of records created or used within their operational area(s).

10. Retention and Disposal Schedules

It is a fundamental requirement that all the Board's records are retained for a minimum period of time for legal, operational, research and safety reasons. The length of time for retaining records will depend on the type of record and its importance to the Board's business functions.

The Board has generally adopted the retention periods set out in the [Scottish Government Records Management Health and Social Care Code of Practice 2024](#) and provided in *Appendix 1*. The Board will adopt the Business Classification Scheme of NHS Scotland.

11. Records Management System Audit

The Board will regularly audit its records management practices for compliance with this framework, including assessing new digital information systems for their compliance with the Scottish Government Records Management Health and Social Care Code of Practice 2024.

The results of audits and Records Management Maturity Assessments will be reported to the Digital and Information Operations Group for operational effectiveness.

It is the responsibility of Information Asset Owners to create and monitor provisions for the management of records created or used within their operational area(s).

12. Training

All Board staff will be made aware of their responsibilities for record-keeping and record management through generic and specific training programmes and guidance.

13. Review

This policy will be reviewed every three years (or sooner if required by new legislation, codes of practice or national standards are to be introduced).

This policy will be updated to reflect the latest guidance (in development) on records management for Integration Joint Board delivered services.

14. Appendix 1 – Records Retention Schedule

<https://www.digihealthcare.scot/app/uploads/2024/08/RM-CoP-for-HSC-2024-v04.0-MASTER-2024-08-09.pdf>