

Records Management Policy

Produced by the Human Resources and Corporate Services Directorate
Business Services Organisation
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1. Introduction & Policy Statement

- 1.1** All Health and Social Care (HSC) records are public records under the terms of the Public Records Act (Northern Ireland) 1923 and in the Disposal of Documents (Northern Ireland) Order (1925). The Act sets out the broad responsibilities for everyone who works with such records. The Business Services Organisation (BSO) therefore has a statutory duty to make arrangements for the safe keeping and eventual disposal of its records.
- 1.2** Further, information is a corporate asset and the records of the BSO are important sources of service user and client information in addition to administrative, financial, legal, evidential and historical information. They are vital to the organisation 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 organisation.
- 1.3** This policy should be read in conjunction with the following:
- Relevant BSO policies and procedures relating to information governance;
 - Relevant BSO ICT Policies;
 - Relevant legislation, to include those referred to within section 1.1, The Data Protection Act (2018), The General Data Protection Regulation (2016) and The Freedom of Information Act (2000);
 - Relevant guidance, to include The Department of Health's (DoH) 'Good Management, Good Records'.

2. Purpose and Aims

- 2.1** The purpose of this policy is to ensure that BSO adopts best practices in the management of its records so that authentic, reliable and useable records are created, which are capable of supporting business functions and activities for as long as they are required.
- 2.2** This policy will ensure that:
- records are made accessible to enable well-informed and proper judgments to be made;
 - records are kept securely and protected from accidental loss, destruction and unauthorised access;
 - records are kept for no longer than is necessary, in accordance with legal and professional obligations and with due regard to the regionally-agreed retention and disposal schedule;
 - staff are made aware of and trained in the management of records within their sphere of work or responsibility
- 2.3** Compliance with this policy will ensure that BSO can provide evidence of performance and demonstrate accountability, as well as providing information about its decisions and activities.

3. Scope

- 3.1 The international standard of managing records, ISO 15489 defines a record as *“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”*.
- 3.2 In the context of this policy a record is any recorded information that contains information, in any media which is created, collected, processed, used, stored and/or disposed of by BSO employees, as well as those acting as its agents in the course of BSO business.
- 3.3 This policy applies to **all staff**. In this document, the term ‘all staff’ refers to regular full-time, regular part-time, contractors, consultants, agency and temporary employees.

4. Responsibilities

- 4.1 The **Board** has overall responsibility to ensure compliance in all areas of information governance, including records management.
- 4.2 The **Chief Executive** and **Directors** have a duty to ensure that BSO complies with the requirements of legislation affecting management of the records and with supporting regulations and codes.
- 4.3 The **Personal Data Guardian (PDG)** is a senior person responsible for protecting the confidentiality of patient and service-user information and enabling appropriate information sharing.
- 4.4 The **Senior Information Risk Officer (SIRO)** is an executive who has responsibility to ensure compliance with legislation through the development and monitoring of policy and codes of practice. The SIRO is supported in this role by Information Asset Owners (IAOs) who must provide assurance to the SIRO that information risk is managed effectively for the information assets that they own.
- 4.5 The **Data Protection Officer** on behalf of the SIRO will work closely with all directorates to ensure that there is consistency in the management of records and that advice and guidance on good records management practice is provided throughout the organisation.
- 4.6 **Managers** will ensure that records are managed effectively in each service area in accordance with this policy and for ensuring that staff members are aware of their responsibilities. Specifically they will be responsible for ensuring that:
- Any policies, procedures or protocols agreed by BSO are implemented within their area;
 - Appropriate employees are designated to assist with the implementation of records management procedures within their area;
 - Employees are supported in terms of training and development in their

adherence to this policy and the broader suits of information governance policies.

- 4.7 All members of staff** are responsible for documenting their actions and decisions in the records and for maintaining records in accordance with section 5 of this policy.

5. Records Management Systems

Directorates and staff need to ensure that:

- 5.1** The record is present: BSO has the information that is needed to form a reconstruction of any activities or transactions that have taken place.
- 5.2** The record can be accessed: It is possible to locate access and evaluate the information and display it in a way consistent with the purpose for which it was created. Records will be signed, dated and appropriately stored.
- 5.3** The record can be interpreted: It is possible to establish the context of the record: who created the record, during which operational or business process, and how the record is related to other records. Records will be legible and easily understood.
- 5.4** The record can be trusted: The record reliably and accurately represents the information that was actually used in or created by the business process, and its integrity and authenticity can be demonstrated.
- 5.5** The record can be maintained through time: The qualities of accessibility, interpretation and trustworthiness can be maintained for as long as the record is needed, perhaps permanently, despite changes of formats or business processes/practices. Records will be protected during their life cycle by ensuring safe and adequate storage facilities or media.
- 5.6** The record is registered: Records registration / identification ensures that a link between the record and its business roots/function. Records will be classified into series that have meaningful titles, and allow for the users of the records to identify and track particular records and record collections.
- 5.7** The record is disposed of in accordance with the agreed disposal schedule.

6. Version Control

- 6.1** Version control is the management of multiple revisions to the same record. It is used to track the changes that occur to a record throughout its initial development and subsequent revision(s).
- 6.2** Version control is particularly important for electronic documents because they can easily be changed by a number of different users. Knowing the appropriate version of a document is vital to ensure compliance with current

policies, legislation, guidance and best practice. A Version Control system must therefore be in place for all records created by BSO

- 6.3** The version control system adopted by BSO uses numbers greater than zero with decimal points. Minor amendments equate to an incremental change to the number at the right of the decimal point, while a major¹ change will result in an incremental change to the number at the left. The following should be used as a guide:
- All new, draft documents should initially be numbered Version 0.1;
 - Changes to this document would result in version 0.2, 0.3 (etc.) until the document is approved and becomes the 'final' version;
 - When the document is approved for the first time, the number converts to Version 1.0 and the document is published
 - Once published the number to the right will increase with each minor amendment approved (Version 1.1, 1.2 etc.)
 - A major amendment to the document will result in the number to the left of the decimal point increasing by 1 and the number to the right returning to zero (i.e. Version 2.0)
 - In addition to adding the version number to the end of the file title, it should also be displayed within the document. The version number should appear on any document title page, and also in the header or footer of each page.

7. Non-Compliance

- 7.1** A failure to adhere to this policy and any associated procedures may result in disciplinary action.
- 7.2** Serious breaches may be reported to the PSNI, Information Commissioner's Office or other public authority for further investigation.

8. Review

- 8.1** This policy and any associated procedures will be reviewed no later than every 2 years, to ensure their continued relevance to the effective management of Information Governance within BSO.

9. Equality Statement

- 9.1** This policy has been screened for equality implications as required by Section 75 of Schedule 9 of the Northern Ireland Act and it was found that there were no negative impacts on any grouping. This policy will therefore not be subject to an Equality Impact assessment.

¹ For example, circumstances when a document may require immediate and significant change to comply with new legislation, best practice or other external factors.

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- 9.2** This Policy has been considered under the terms of the Human Rights Act 1998, and was deemed compatible with European Convention Rights contained in the Act