Peninsula Dental Social Enterprise (PDSE)

Record Management Policy

Version 3.0

Date approved: November 2016
Approved by: The Board
Review due: November 2018
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1. **Statement of Intent by PDSE Board**

1.1 “PDSE will continue to work toward a systematic and planned approach to the management of records, from the moment the need for a record to be created is identified, through its creation and maintenance to its ultimate disposal. The PDSE Board are personally accountable for records management, all staff are responsible for the management of records they create. We will maintain past and future information in a manner that effectively serves our business needs, those of Government and of the citizen, and to dispose of the information efficiently when it is no longer required.”

2. **Introduction**

2.1 PDSE adopts and will work to the Department of Health’s Records Management: NHS Code of Practice parts one and two, in regard to issues of Record Management, for both corporate and clinical records. This includes record creation, maintenance, storage, disclosure and transferral, and retention and disposal arrangements.

2.2 This policy sets out the specific record management needs and requirements of PDSE and is to be used alongside the Department of Health’s Code of Practice for the management of records within company.

2.3 It is the responsibility of all public organisations to ensure that records are managed properly and securely for the lifecycle of the document and that at its end it is disposed of responsibly.

3. **The Department of Health’s Records Management: NHS Code of Practice.**

3.1 The Code of Practice is based on current legal requirements and professional best practice for all staff within, or under contract with, the NHS.

3.2 It covers all types of records and draws on guidance from both the Department of Constitutional Affairs and the National Archives.

3.3 The Department of Health’s guidance also contains information on government acts, such as the Freedom of Information Act 2000, and the National Data Protection Legislation, which have a great bearing on the way that records must be managed. (PDSE has separate guidance on the application of these Acts as
4. Record Management

4.1 Responsibilities:

4.1.1 It is the responsibility of all staff to ensure that they are aware of their obligations about record management. This policy is available to all staff, students, and supervisors via PDSE website.

4.1.2 All staff should receive training appropriate to their job description regarding issues of records management. This is included in the PDSE IG training for all staff.

4.1.3 It is the responsibility of each individual staff member to ensure that they promote careful record management throughout their day-to-day duties. This should be done by ensuring accurate record keeping and paying attention to their environment (for example who’s around), information security, best practice, and participating in appropriate training updates.

4.2 Relevant Guidance:

The Law and other local and national guidance that pertinent to records management include:

- Access to Health Records Act 1990
- National Data Protection Legislation (The NHS Confidentiality Code of Practice)
- Equality Legislation and Human Rights (See Local Schemes)
- Environmental Information Regulations 2004 (Policy and Procedure)
- Freedom of Information Act 2000 (Policy and Procedure)
- Public Records Act 1958 (S.3 (1)-(2) and 1967
- Re-Use of Information Regulations 2005

4.3 Business Record Creation:

4.3.1 Any staff member writing corporate documents of the following types,

- Guidance (Local and Corporate)
- Strategies and Schemes
- Patient Information and service leaflets
- All documents that require ongoing review must submit the documents to the Governance and Compliance Manager to be catalogued with a unique identifying number.
4.3.2 When writing business documents on behalf of PDSE all staff must ensure that where a template exists for that type of document it is used.

4.3.3 Authors of documents, such as annual reports, policies, development plans and strategies must consider how the document/information they develop may impact on minority groups, wherever possible seeking to promote equality both in style and content. To this end, an impact assessment must be considered before documents are ratified and published in their final form.

4.3.4 All documents, letters and emails held by and developed within PDSE are public records and subject under the terms of the Public Records Act 1958 and other laws. These include:

- Access to Health Records Act 1990 (c. 23)
- Copyright, Designs and Patents Act 1988 (c. 48)
- National Data Protection Legislation
- Environmental Information Regulations 2004
- Freedom of Information Act 2000
- Other legislation cited in Part One of the Records Management Code of Practice Annex C.

4.3.5 Staff should be aware that all public records can be requested by a member of the public at any time. This can include e-mail correspondence (see below). This does not necessarily mean that the public will be granted the information requested. Please refer to PDSE policy Confidentiality and code of conduct within the dental education facilities.

5. Business Record Development

5.1 All staff will manage documents in a way that enables corporate control and monitoring. They will ensure that PDSE can ensure its responsibilities to maintain corporate records within its asset register for major corporate documents and in shared folders for team documents and email.

5.2 Business Record Maintenance

5.2.1 To ensure best practice, document owners are responsible for ensuring their documents are maintained and updated as appropriate and maintained as part of the corporate record. All documents not reviewed will be removed from the website and intranet and not considered a current working document of PDSE. All business records must be stored and maintained in conditions identified in Part One of the Code of Practice. Where a document type is not included in the Code of practice, a maintenance and retention schedule will be determined based on comparable documentation.
5.2.2 All staff must save and/or back up computer files to shared drives and maintain master copies of all records in accordance with the retention period and the need to access records within five days.

5.3 **Business Record Disposal/Transferral**

5.3.1 All staff members are responsible for ensuring that information is not disposed of until the minimum retention date has expired. For retention schedules, please see the Department of Health’s Code of Practice Part 2 (link in appendix A). Again where a type of record does not appear in the code of practice, retention period will be determined using a similar document.

5.3.2 Please note, that e-mail and other electronic records should not be overlooked, as a corporate or health record. Correspondence in email form may be required in the future and should be saved to subject folders on your shared drives. Microsoft Outlook is not a safe place to store email and regular maintenance is required.

5.3.3 Staff are encouraged when destroying documents at the end of the lifecycle to obtain a certificate of destruction if appropriate.

5.4 **Clinical records storage when not in use**

5.4.1 All clinical records, when not in use, will be stored according to standards agreed by the PDSE Board.

6. **National Data Protection Legislation**

6.1 The National Data Protection Legislation is enforced within PDSE. In conforming with the National Data Protection Legislation, staff members must also ensure that data is secure at all times, including being disposed of in a confidential manner.

6.2 The PDSE Director of Community Based Dentistry will ensure that the release of information is compliant with the law.

7. **Compliance**

7.1 Compliance with the Department of Health’s Records Management: NHS Code of Practice, and all record management issues will be maintained.
8. Training

8.1 All staff members will complete mandatory training on data protection and information governance. PDSE will review training offered in pursuance of its clinical and corporate record management and information governance objectives.

8.2 The confidentiality training includes:

- What should remain confidential and why. Including information on the National Data Protection Legislation and its relevance to staff

- Other Acts that are relevant to confidentiality and information security,

- Information Governance information, including contact details for information officers, an outline of the Caldicott principles and details on useful/relevant trust policies

- ‘Handy hints’ regarding information security, focusing on environmental problems, for example: locking computers, security when taking documents outside Trust premises, awareness of who is around when working on confidential information, and how to minimise information security risks.

- Details on the Freedom of Information Act 2000 and what to do if you are given a Freedom of Information request.
### Appendix A

Appendix A details retention periods for dental records – correct as at October 2016

Link to NHS Corporate Records Retention & Disposal Schedule & Guidance


<table>
<thead>
<tr>
<th>Document type</th>
<th>Detail</th>
<th>Retention Time</th>
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<tr>
<td>CLINICAL AUDIT</td>
<td>Clinical Audit records</td>
<td>5 years</td>
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<tr>
<td>DENTAL</td>
<td>Dental, ophthalmic and auditory screening records including Orthodontic Records and Models</td>
<td>Community records 11 years for adults - children 11 years or up to their 25th birthday whichever is the longest - hospital records adults 8 years - children and young people 25th birthday or 26th if person was 17 on conclusion of treatment or 8 years after death.</td>
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<tr>
<td></td>
<td>Teeth mould impressions (See Dental)</td>
<td>Community records 11 years for adults - children 11 years or up to their 25th birthday whichever is the longest - hospital records adults 8 years - children and young people 25th birthday or 26th if person was 17 on conclusion of treatment or 8 years after death.</td>
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