

Records Management

Briefing Paper

February 2022

Hywel Dda University Health Board

NWSSP Audit and Assurance

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Acknowledgement

NHS Wales Audit & Assurance Services would like to acknowledge the time and co-operation given by management and staff during the course of this review.

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Executive Summary

Purpose

The overall objective of this review was to provide a position statement highlighting ongoing work by the organisation to improve Records Management arrangements following previous Internal Audit report in 2019 and 2020.






Overview of findings

Concluding a review of the previous Internal Audit recommendation, we noted limited progress had been achieved to address the issues raised. However, we acknowledge that Covid-19 pandemic has impacted on the Health Board, which has resulted in the progress being made by management being placed on hold.

This briefing paper has been produced to provide an update on the progress made to date whilst highlighting the actions required to be undertaken to address the previously raised issues and risks.

During our review we noted positive steps undertaken with the implementation of a Corporate Records Management Corporate Policy, and the introduction and roll out of an audit programme for record storage with external providers and internally. However, significant work remains outstanding in order to mitigate the issues previously identified.

Progress Summary

Previous Matters Arising	Previous Priority Rating	Direction of Travel (Status)	Current Status
1 Corporate Records Management Strategy and Policy	Medium		Partially Actioned
2 Storage Capacity	High		Partially Actioned
3 Retention and Destruction of Records	Medium		Partially Actioned
4 Third Party Storage Providers	High		Partially Actioned
5 Records Management Training	Medium		Not Actioned

1. Introduction and Scope

- 1.1 The review of Records Management was included in the 2021/22 Internal Audit Plan. The executive lead for the review was the Director of Operations.
- 1.2 Initial planning meetings with the Digital Director (responsible for developing the Records Management Strategy) and Health Records Manager established that work to address the issues identified in the two previous limited assurance reviews (reports HDUHB-1819-33 and HDUHB-2021-19) had not progressed as planned. It was acknowledged that Covid-19 has created challenges and difficulties throughout the last 18 months and has contributed to the lack of progress.
- 1.3 Consequently, it was agreed with management that an assurance review at this stage would not prove beneficial. Instead, this Briefing Paper has highlighted an overview of the current situation, ongoing/planned actions, and the arrangements for providing assurance to the Board in this respect.

2. Objective

- 2.1 The overall objective of this review was to provide a position statement highlighting ongoing work by the organisation to improve Records Management arrangements.

3. Associated Risks

- 3.1 Potential risks considered during this review:
 - non-compliance with records management policies and procedures;
 - poor management of records, including security, storage, accessibility, archiving and disposal; and
 - potential for reputational damage and financial penalty from the Information Governance Commissioner.

4. Audit Approach

- 4.1 Through enquiries with key officers and review of Board/sub-committee papers, we will seek to confirm:
 - the progress made to date and planned actions to address the issues identified in the previous limited assurance reviews and other actions identified by the Health Board; and
 - the Board or appropriate sub-committee is appraised of issues and ongoing actions in relation to Records Management.

5. Summary of Audit Findings

Previous Matter Arising 1: Corporate Records Management Strategy & Policy		
Original Recommendation		Original Priority
Management should ensure the Corporate Records Management Strategy and Policy are submitted to the Business Planning & Performance Assurance Committee for approval.		Medium
Management Response	Target Date	Responsible Officer
Following internal discussions, the Corporate Office is leading the review and updating of the Corporate Records Management Strategy and Policy. This will require contributions and input from a number of teams across the UHB. Once reviewed, these will be submitted to the Business Planning & Performance Assurance Committee at the earliest opportunity.	September 2019	Head of Corporate Office
Current Findings		Conclusion
A Corporate Records Management Policy has been reviewed and was presented at the December 2021 Information Governance Sub Committee (IGSC) meeting for approval. The Digital Director confirmed that an overarching Health Board Records Management Strategy is to be developed, with a view for completion by February/March 2022.		Management Action Partially Addressed

Previous Matter Arising 2: Storage Capacity		
Original Recommendation		Original Priority
We would recommend that management review current storage arrangements to establish whether they continue to be fit for purpose, whilst consideration should be given in the progression of other solutions for example, scanning of documents, to reduce the amount of manual health records retained by the Health Board.		High
Management Response	Target Date	Responsible Officer

<p>Whilst we noted that the Health Records Management Group meetings had been paused due to the pandemic and development of the workstreams had not yet come about, some progress within records management have been made in relation to storage capacity. We noted the following:</p> <ul style="list-style-type: none"> • An audit programme of record storage both for external providers and internally across the Health Board has commenced, with the aim of providing a detailed list of all areas of record storage across the Health Board and any associated risks. • A paper presented to the Executive Team in July 2021, 'Health Records Storage Pressures – Short and Longer Term Strategies to Resolution – Planning Objective 5M (to provide patient records via a digital medium within 3 years)' highlighted the risks posed to the Health Board if changes cannot be made to the current overstretched and unsafe storage facilities. • The Health Board has recently employed a project manager to oversee the digitalisation of health documentation. • The Health Board are currently in the process of finalising the lease agreement for a new facility in Dafen Llanelli, that will provide the necessary additional storage capacity to fully resolve all current and future health records storage issues • Monies have recently been made available following a successful presentation of a business case to create and run a Health Board run 'Scanning Bureau' for the patient health records and to include the ability to relocate other Health Board records (i.e physio, podiatry, maternity etc) for storage and scanning with the ultimate goal of becoming as paper free and digital as possible. 	<p>Management Action Partially Addressed</p>
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<p>Previous Matter Arising 3: Retention and Destruction of Records</p>		
Original Recommendation	Original Priority	
Management should ensure that the services and functions holding patient records locally are reminded of their requirement to comply with the Retention & Destruction Policy.	Medium	
Management Response	Target Date	Responsible Officer

Previous Matter Arising 4: Third Party Storage Providers		
Original Recommendation		Original Priority
<p>4.1 Management should review the current arrangements in place with third party storage providers to establish whether they meet the required Health Board standards.</p> <p>4.2 Management should establish what information is stored with the third party storage providers and that the retention and destruction of information is being undertaken in line with the Welsh Government arrangements.</p>		High
Management Response	Target Date	Responsible Officer
<p>Again as identified in finding 3 and 4, early this year a financial report was presented to the non-pay review panel. The report identified that the Health Board was utilising private storage companies to store a wide range of records and Health Board information. There were significant costs associated with the storage facilities and the report was presented to the Health Records Manager for comment. Following the comments received it was identified that potentially not all service/departments utilising private storage may have confirmed contractually arrangements in place. Further discussion lead to the records management brief presented to the Executive Team in November 2018. Again as part of the relevant project groups there will be a requirement and responsibility for the groups to confirm:</p> <ul style="list-style-type: none"> • What records/information they have in storage • What are the costs (per box per month/year) • Are there any exit costs • Is there an agreed formal contract in place between the Health Board and the company <p>Again this work will be driven by the main project group with sub group implementation planned for early next year.</p>	March 2019	Director of Operations
Current Findings		Conclusion
<p>An audit programme of all storage providers has commenced by the Information Governance team headed by Sarah Bevan. We can confirm that details of the programme and outcomes were being reported through to the IGSC, such</p>		Management Action Partially Addressed

as the recent review of the Lloyd & Pawlett storage facility undertaken in July 2021. Issues identified following these audit reviews were placed on the IGSC risk register.

Previous Matter Arising 5: Records Management Training		
Original Recommendation		Original Priority
Management should establish refresher sessions to ensure existing staff receive records management training.		Medium
Management Response	Target Date	Responsible Officer
Ad hoc Health Records training sessions have been completed for all ward clerks and secretaries across the Health Board apart from at Bronglais and these training sessions will be completed by February 2019. Recently the Health Records Manager and Head of Governance have discussed the possibility of introducing joint IG/Health Records training sessions. Further discussions are planned for next year with the potential to implement across the Health Board in 2019.	February 2019	Health Records Manager/Head of Governance
It is correct that after receiving robust departmental induction and on the job training, staff within the Health Records service currently do not receive any update or refresher training. The responsibilities within the service and the staff roles have not altered when compared to the duties undertake 10 years ago and the majority of the tasks are exactly the same, as they always have been. The Health Records Manager will discuss this recommendation with the Deputy Director of Operations and the Deputy Health Records Managers and identify if this is an essential requirement and the most effective format to deliver refresher training if required.	February 2019	Health Records Manager
Current Findings		Conclusion
The situation on training has not progressed due to lack of resource and the impact of Covid. Training was discussed at the last Welsh Health Records Management Group in regard to the development of an All Wales training materials over the next six months to supplement to the mandatory e-learning or in house records management training.		Management Action Not Addressed

<p>This item remains of the agenda of the Health Records Management Advisory Group and further discussions are planned on developing records management training, unfortunately more urgent issues have surpassed the training element and have required more attention. Discussions at January 2022 Information Governance Sub Committee meeting confirmed that discussions are ongoing at a national levels to provide records management training as part of the services providing by e-learning and the e-learning model. The Health Board's Information Governance (IG) Manager has also confirmed that additional slides/information in regards records management will be included within the IG training.</p>	
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