Appendix 4

Health Records Policies & Procedures

Polices & Procedures

There is a policy for the retention, destruction or archiving of Health Records in accordance with national guidelines. The method of destruction must ensure that confidentiality is maintained at all times.	General Policy Health Records Retention & Destruction Policy
There is a policy on confidentiality and the release and management of information that complies with the relevant legislation and national guidance. The policy sets out how the organisation ensures that information held about patients, their families and staff is managed confidentially.	General Policy GP/D3 Confidentiality and Data Protection Policy Local MR procedures
There is a procedure for ensuring the physical security of areas where Health Records may be accessed e.g. locking doors; filing cabinets etc.	Local MR procedure
There is a policy in respect of safe and secure transportation of Health Records within and without the organisation's boundaries.	Local MR procedure
There is a policy in respect of receipt and transmission of faxes and electronic data flows containing confidential patient-identifiable information.	General Policy GP/D3 Appendix 3a Obtaining Approval to use data
There is a procedure for the creation and subsequent incorporation of temporary records.	Local MR procedure
There is a protocol for safe manual and object handling practices that all staff are fully aware of.	General Policy GP/M1 Manual Handling
There is a mechanism to ensure that all equipment used in the department conforms to the appropriate legislation.	General Policy GP/E7 Non NHS Equipment GP/E8 Estates Services E14 Equipment Procurement
There are procedures for the safe storage and retrieval of Health Records, both manual and electronic.	Local MR procedure
There are procedures for booking records out from the normal filing system, which enables rapid retrieval of records and prevents misfiling.	Local MR procedure
There is a method for indicating alert to risk factors, which is used consistently in all patient records, with the casenote containing a designated place for healthcare professionals to	General Policy Behaviour Alerts (being progressed by OHSAS) Clinical Alerts (being progressed by Head of Information)

record actual allergies/risks; to be signed and dated.	
There is a procedure for splitting fat folders, including cross-referencing of the volumes, such that clinical staff may efficiently use them.	Local MR procedure
There is a procedure relating to the return of patient-held records to the Health Records department when the episode of care for an individual patient is complete.	Local MR procedure
There is a procedure for issuing local patient identifiers. The relevant staff are aware of the procedure and there is evidence of implementation.	Local MR procedure
There is a procedure for updating patient demographic details (e.g. change of address) when these are notified to a member of the organisation's staff.	Local MR procedure
There is a Policy for handling subject access requests, with clear responsibility for responding by fully trained and resourced staff who process such requests efficiently and in accordance with the law.	General Policy Subject Access to Health Records
There is a procedure in place which identifies the responsibility for filing of loose documentation within case records. This makes reference to the responsibility of all stakeholders.	Local MR procedure