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**Code: SOP16**  
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<b>Standard Operating Procedure (SOP) Archiving Records</b>
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Lead executive	Medical Director
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Type of document	Procedure
Target audience	All CWP staff
Document purpose	Standard Operating Procedure (SOP) for archiving records with off-site storage company (Dataspace)

Approving meeting	Information Governance & Data Protection Sub-Committee	Date 21/12/2020
Implementation date	December 2020	

<b>CWP documents to be read in conjunction with</b>	
<a href="#">HR6</a>	Mandatory Employee Learning (MEL) policy
<a href="#">CP3</a>	Health records policy
<a href="#">CP63</a>	Access for health records policy
<a href="#">GR41</a>	Corporate records policy

<b>Document change history</b>	
What is different?	Amended title to delete Dataspace to incorporate wider archiving of records Page 5 added flow chart for accessing archived files Page 6 added processing for accessing other scanned archived records
Appendices / electronic forms	N/A
What is the impact of change?	N/A

Training requirements	Training requirements for this policy are in accordance with the CWP Training Needs Analysis (TNA) with Education CWP.
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<b>Document consultation</b>	
Clinical Services	Clinical representatives of the Information Governance & Data Protection Sub-Committee
Corporate services	Corporate representatives of the Information Governance & Data Protection Sub-Committee
External agencies	N/A

Financial resource implications	None
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<b>External references</b>	
<ol style="list-style-type: none"> <li>1. Health Service Circular 1999/053 - For the Record</li> <li>2. NHS Litigation Authority Risk Management Standards for Mental Health &amp; Learning Disability Trusts 2012/13</li> <li>3. Audit Commission - Setting the Records Straight 1995</li> <li>4. UKCC - Guidelines for Records and Record Keeping 1998</li> </ol>	

5. Institute of Health Record Information and Management - Quality Guidelines
6. NHS Records Management Code of Practice 2006
7. Connecting for Health Information Governance Toolkit
8. Information Governance Alliance Records Management Code of Practice for Health & Social Care 2016  
NHS Digital Data Security & Protection Toolkit

<b>Equality Impact Assessment (EIA) - Initial assessment</b>	<b>Yes/No</b>	<b>Comments</b>
Does this document affect one group less or more favourably than another on the basis of:		
- Race	No	
- Ethnic origins (including gypsies and travellers)	No	
- Nationality	No	
- Gender	No	
- Culture	No	
- Religion or belief	No	
- Sexual orientation including lesbian, gay and bisexual people	No	
- Age	No	
- Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
Is there any evidence that some groups are affected differently?	No	
If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable? N/A		
Is the impact of the document likely to be negative?	No	
- If so can the impact be avoided?	N/A	
- What alternatives are there to achieving the document without the impact?	N/A	
- Can we reduce the impact by taking different action?	N/A	
Where an adverse or negative impact on equality group(s) has been identified during the initial screening process a full EIA assessment should be conducted.		
If you have identified a potential discriminatory impact of this procedural document, please refer it to the human resource department together with any suggestions as to the action required to avoid / reduce this impact. For advice in respect of answering the above questions, please contact the human resource department.		
Was a full impact assessment required?	N/A	
What is the level of impact?	N/A	

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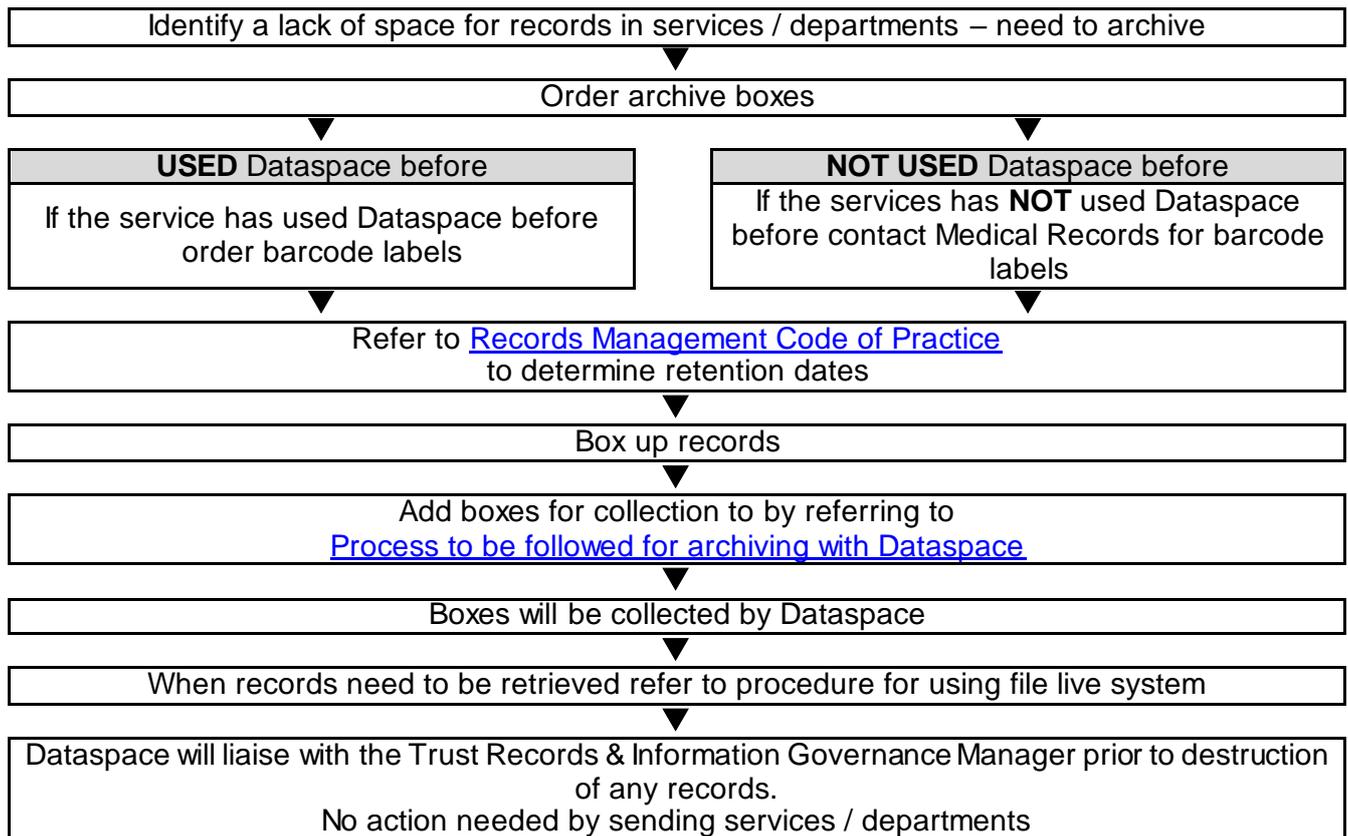
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## Quick reference flowchart archiving records with Dataspace



## Quick reference flowchart for accessing archived records

To access records which have been sent for long term storage with Dataspace contact usual administrative staff who will have access to the Dataspace file live system and will be able to retrieve a file upon request



Dataspace will scan a requested file and the administrative staff will attach the scanned file to the relevant clinical system



A further large volume of paper files have been scanned by an external company and are available in the CSCAN folders under favourites on the intranet



To access records which have already been scanned contact the usual administrative staff who will have access to CSCAN and will be able to email the scanned record to staff



To preserve server space avoid attaching scanned files from CSCAN to clinical systems as the scanned files are already held within CSCAN

## 1. Introduction

This standard operating procedure is to provide staff with guidance for the process to archive records.

## 2. Process for retrieving and archiving records with Dataspace

When records are no longer required on site but are still within the period they need to be retained for (see Information Governance Alliance [Records Management Code of Practice](#) retention guidelines), they must be archived with the Dataspace offsite storage company following this Standard Operating Procedure (SOP).

### 2.1 Archive boxes

Archive boxes should be sturdy enough to stand several years of use and they must be fit for purpose (Dataspace or Niceday standard archive boxes are recommended). The total weight of any box should not exceed a maximum of **15 kilograms**.

If your service has not sent records to offsite storage before, please contact medical records who will provide contact details to arrange an account and bar code labels.

See embedded **Dataspace procedure** for entering information onto the file live system:

#### [Process to be followed for archiving with Dataspace](#)

The box and its contents remain the responsibility of the sending department until they are collected and must be kept in a safe and secure environment.

### 2.2 Destruction of records

It will be each sending department's responsibility to advise Dataspace when records are due for destruction. The details must be checked by the sending department before authorisation is given to Dataspace to destroy the records. When records have been destroyed by Dataspace, a certificate of destruction will be issued to the sending department. Certificates of destruction must be forwarded to the Trust Records & Information Governance Manager. **Note:** Due to the ongoing Independent Inquiry into Child Sexual Abuse (IICSA), all Trusts have been instructed that no records are to be destroyed until further notice. This does not apply to records which have been scanned and attached to the electronic record.

When records have been scanned by Dataspace using the scan on demand service, a work order will be sent to the Records & Information Governance Manager by Dataspace at the end of every month which includes the items for destruction for all items which have been scanned. The Records & Information Governance Manager will check that the images have been attached correctly to the Trust clinical systems and then give Dataspace authorisation to destroy the notes.

### 2.3 Attaching scanned images to patient electronic records

When a record has been scanned by Dataspace the scanned image will be held on the Dataspace file live system. The image should be retrieved and saved e.g. to staff desk tops, re-named appropriately e.g. archive volume 1, archive volume 2 etc. The image should then be attached to the patient's electronic health record and deleted from wherever it has been saved, e.g. desktop. Staff should add an alert to the patient electronic health records to indicate that a scanned volume has been attached and the paper file destroyed.

## 3. Process for accessing other scanned archived records

A further very large volume of paper files have been scanned by an external company and are available in the CSCAN folders under favourites on the intranet.

To access records which have already been scanned contact the usual administrative staff who will have access to CSCAN and will be able to email the scanned record to staff.

To preserve server space avoid attaching scanned files from CSCAN to clinical systems as the scanned files are already held within CSCAN.