

# INFORMATION GOVERNANCE RECORDS MANAGEMENT GUIDANCE NOTE NUMBER 008

## DECOMMISSIONING OF NHS PREMISES

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## **Background**

In October 2008, the Cabinet Secretary for Health and Wellbeing accepted the recommendations which were published in the report produced by NHS QIS in response to reports that person identifiable information had been found by members of the public in buildings on the former Strathmartine Hospital in Tayside.

The expert group made a number of recommendations in relation to records management.

This document addresses the following recommendations:

- Disused buildings should not be used for storage of any health records or other person identifiable information.
- All sites should be effectively sanitised prior to being vacated; this should be checked and confirmed by effective sweeping and thorough inspection, and fully documented before the site is handed over to a new owner.
- Guidance on the operational procedure for management and disposal as necessary of health records and other patient identifiable information retained by clinical staff on departure from their post (for example if the post holder moves out of the area or retires) is required.
- All information relating to patients should be stored as part of their formal health record; if the information is no longer required it should be disposed of appropriately.
- Improved guidance about disposal of health records is required; NHS Boards appear to be clear about retention periods but the process of actual disposal when this period expires could be streamlined.

## **Purpose and Scope**

This document directs the principles and practice for managing the inspection of NHS premises for presence of records, other documents or media containing person identifiable information and business documents (see glossary) prior to decommissioning, and the arrangements for safe transfer, storage or confidential destruction.

## **NHS Board Responsibilities**

The Chief Executive Officer has overall accountability for ensuring that records management operates legally within the Board.

The Caldicott Guardian works in liaison with the organisation's Health Records Manager(s), Information and Communications Technology (eHealth) Manager(s), Information Governance Manager and others with similar responsibilities, to ensure there are agreed systems for managing confidentiality and security of information and records in the organisation.

All NHS staff should be aware of their personal responsibilities in respect of records management. Staff and their line managers should be aware of the procedures to be followed for safe transfer or handover of records, documents or media containing person identifiable information when they leave or retire from their post. The procedure should include arrangements for clearing of databases and computers containing person identifiable information. Staff are responsible for ensuring records they have created have been dealt with according to local NHS Board policy prior to their departure from the organisation.

## **Key Points for Action by NHS Boards**

1. A Director is identified with accountability for decommissioning within each NHS Board.
2. A dated, documented Health Records policy approved by the NHS Board or its delegated committee is in place. This has been written/reviewed within the last three years. The policy document makes specific reference to the following:
  - Role of the Health Records, Information Governance, Facilities and Estates Services in relation to the decommissioning of NHS premises.
  - Procedure for checking/auditing of NHS premises for records, documentation and media containing business and or person identifiable information prior to decommissioning.
  - Procedure for safe transfer, storage or confidential disposal of such data.

- Arrangements for the transfer/disposal of records and other person identifiable information when a post holder leaves post or retires.
3. Each NHS Board has an inventory for all health records or records containing person identifiable information which provides a description of the record collection along with its location and details of the responsible manager.
  4. A register of databases containing person identifiable information is established and maintained including details of device, encryption, location and responsible manager.
- 5.

## **Process for Inspection of NHS Premises Prior to Decommissioning**

In this document the term ‘decommissioning’ has been used to describe any retraction, transfer, closure or change of use of any accommodation, building or premises which are used by health services.

The process for inspection of premises should be a joint role between Estates, Facilities and Health Records Services and should be led by a senior manager who is accountable for the decommissioning process.

A two stage process should be undertaken to enable absolute clearance of business documents health records or documents containing person identifiable information.

### **Stage 1 – Preparing for retraction**

6. A sub-group of the retraction team should be assembled to prepare plans for transferring, archiving or destruction of records, documents or media containing business sensitive or person identifiable information. This team should be led by a Senior Manager (Decommissioning Manager) who liaises with the Board’s Records Manager. The Decommissioning Manager should assemble and lead an inspection team to undertake this task.
7. Estates Department should prepare an accommodation schedule (see Appendix 1) from up to date copies of building plans. This schedule should list all areas of accommodation contained within the building including any

cupboards, basements, attics or areas which have been subject to alteration over the years. Each individual room or area should be listed on the accommodation schedule.

8. An audit inspection checklist should be drafted (see Appendix 2) to include all areas contained within the accommodation schedule.
9. Each individual room or area should be physically checked by the inspection team and crosschecked against the accommodation inventory. Any changes or omissions should be entered on to the schedule. Any health records or other documentation containing person identifiable information or business documentation should be noted on the inspection checklist along with details of the responsible department or record holder. Whenever a particular course of action can be identified (e.g. exceeds minimum retention period – suitable for destruction) this should also be recorded on the inspection checklist.
10. The Decommissioning Manager and Records Manager should liaise with the appropriate departments or record holders to agree a course of action and timescale for the transfer, archiving or destruction of the records. The inspection checklist should be updated. The departments or record holders should be asked to notify the Decommissioning/Records Managers when their actions have been completed and the inspection check list updated appropriately. In the event that departments/record holders fail to comply this should be escalated to the Director responsible for decommissioning to resolve.
11. Responsible managers in departments transferring out of accommodation should be advised of procedures for safe transfer, archiving and destruction of health records and documents containing person identifiable information.
12. The Decommissioning Manager should table progress reports at relevant operational meetings and progress should be monitored until all actions are complete and the area has been cleared of all records and documentation containing person identifiable information.

## **Stage 2 – Verification that premises have been cleared**

- 13.**The inspection team are re-assembled when departments have moved out of the accommodation and a further thorough inspection exercise is undertaken to ensure that all business and person identifiable information has been removed. Due diligence is undertaken to ensure that:
- All desks, filing/storage cabinets, drawers, cupboards, and storage shelving have been thoroughly checked. Care is taken to remove drawers and removable fittings to ensure that no business or person identifiable information has been left behind.
  - Notice boards are checked.
  - Whenever shelving or racks have been used for records storage these should be dismantled to ensure that no business or person identifiable information has slipped under, behind or between shelves.
  - Where accommodation contains attic or basement areas or has been altered from plans to conceal areas, arrangements should be made via the Estates Department to have these areas accessed and inspected, including taking photographic images as proof of clearance if the areas are inaccessible by the inspection team.
  - Whenever areas cannot be completely accessed e.g. locked areas or areas where shelving units require to be dismantled these should be noted on the checklist and the team should return to inspect the area.
  - Each individual room and area should be photographed using a digital camera which dates and times the image as proof that the area was cleared.
- 14.**Each area should be labelled with a self adhesive notice ‘Inspected, Date: This area has been cleared of all NHS Board records and documentation. Under no circumstances should any records or documentation be stored in this room. If you require further information contact .....’.
- 15.**Any records or documents found containing business or person identifiable information should be bagged, labelled with room number/description and location and removed from the decommissioned area to a secure area for further action by the Records Manager or other designated officer. The

appropriate individual should be contacted to remove any IT equipment or media.

- 16.**The inspection checklist should be updated to advise whether the area is clear, whether records, documentation or media have been removed for safekeeping, archiving or destruction along with the action taken e.g., relocated to, destroyed etc, or the area requires to be revisited.
- 17.**When all records, documents or media containing business or person identifiable information have been safely removed the checklist should be signed off by the Inspection Team and countersigned by the Director who is accountable for the decommissioning process.
- 18.**Records, documents and media removed by the Inspection Team should be dealt with in accordance with Section 3 Records Management : NHS Code of Practice (Scotland) CEL 28 (2008)
- 19.**At this point access to the area or building should be restricted to designated personnel through the Decommissioning Manager.

## Contact Details for further Information

Robert Bryden  
Records Management Lead  
[robert.bryden@scotland.gsi.gov.uk](mailto:robert.bryden@scotland.gsi.gov.uk)

## Glossary

**Person identifiable information** includes:

- name, address, post code, date of birth;
- pictures, photographs, video tapes, audio tapes or other images of patients, clients and staff;
- CHI number and local patient/person identifiable numbers;
- Anything else that may be used to identify a person directly or indirectly (for example, rare diseases, drug treatments or statistical analyses which have very small numbers within a small population may allow individuals to be identified).

A combination of these items increases the chance of person identification.

( Reference: NHS Code of Practice on Protecting Patient Confidentiality - SEHD June 2003)

## Further guidance

NHS Code of Practice on Protecting Patient Confidentiality (SEHD 2003)  
[http://www.elib.scot.nhs.uk/SharedSpace/ig/Uploads/2008/Oct/20081002150659\\_6074NHSCode.pdf](http://www.elib.scot.nhs.uk/SharedSpace/ig/Uploads/2008/Oct/20081002150659_6074NHSCode.pdf)

Closure of Strathmartine Hospital : Improvement Review Report – NHS Quality Improvement Scotland (October 2008) [www.nhshealthquality.org](http://www.nhshealthquality.org)

Clinical Governance and Risk Management – National Standards : NHS QIS (October 2005)

<http://www.nhshealthquality.org/nhsqis/files/CGRMCSFOct05.pdf>

Security Management Framework for NHS Boards in Scotland – Health Facilities Scotland (December 2008)

<http://www.hfs.scot.nhs.uk/publications/Security962520Management962520Framework96250Final.pdf>

## **Appendix 1**

\_\_\_\_\_ NHS Board  
**Decommissioning of NHS Premises**

**Accommodation Schedule** (This should list all accommodation including areas which are inaccessible to be compiled from current Estates Department building plans)

**Decommissioning of:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Floor	Room/Accommodation Number	Room/Accommodation Description

## **Appendix 2**

\_\_\_\_\_ NHS Board

**Decommissioning of NHS Premises**

**Inspection Schedule Decommissioning of \_\_\_\_\_**

### **Inspection Team**

Name	Designation

*Following inspection I confirm that the accommodation listed below has been cleared of all business documents, health records, other documents or media containing person identifiable information.*

**Signed** \_\_\_\_\_

**Director** \_\_\_\_\_

## **Appendix 2 Continued...**

<b>Floor</b>	<b>Room/ Accommodation Number</b>	<b>Room/ Accommodation Description</b>	<b>1st Inspection Date</b>	<b>Comments</b>	<b>Actions</b>	<b>2nd Inspection Date</b>	<b>Comments</b>	<b>Actions</b>	<b>Date Confirmed Clear</b>