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Policy on Retention of Records		

Policy on Retention of Records.	
Developed by: Drogheda Services for Older People.	Date Developed: Revised February 2011 Revised August 2014, sept 2023
Developed By: Nursing Department.	Date Approved: February 2011 and post Revision August 2014, August 2017, Aug 2021, Sept 2023
Implementation Date: April 2009	Review Date: Sept 2026
Policy Reference Number: DSOP	No. of Pages: 8
Status of the Policy: Final	

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Policy on the Retention of Records.

This policy updates the 1999 Health Board retention policy and sets out the minimum periods for which records should be retained.

It should be read in conjunction with the HSE's Standards and Recommended Practices for Healthcare Records Management (Section 5 - retention and disposal schedule for health care records) (weblink) and the HSE's National Financial Regulation Retention of Financial Records (weblink). Together, these policies help ensure the HSE is maintaining necessary records for an appropriate length of time. This is a controlled document and is subject to change at any time.

Record Retention Periods

Legal obligation and good practice

The Health Service Executive must comply with the provisions of section 2(1)(c) of the Data Protection Acts 1988 and 2003. The Acts set out the principle that personal data shall not be kept for longer than is necessary for the purpose or purposes for which it was obtained. This requirement places a responsibility on the HSE to be clear about the length of time personal data will be kept and the reasons why the information is being retained. To comply with this rule the HSE must have a policy on retention periods for personal data that is retained.

This policy must include defined retention periods for records and systematic disposal of records within a reasonable period after the retention period expires. Since 2003, Data Protection legislation applies to both electronic and hard copy records.

The HSE is committed to effective records management retention and disposal to ensure that it:

- meets legal standards in terms of retention periods;
- optimises the use of space;
- minimises the cost of record retention;
- securely destroys outdated records

However desirable it is to keep in original format, every single record forever, the reality is, that there is limited storage capacity available and perpetual retention of all records will be in breach of the Data Protection Acts. The HSE must seek to balance the cost of indefinite storage (on-site, off-site, microfilm, IT based, etc.) against costs which may arise from an action where the service does

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not have records to assist with its defence.

The categories of records referred to in this document are as follows:

- Healthcare records, including acute hospitals and non acute services, including health and social care professionals such as physiotherapists, speech and language therapists and public health nurses. A healthcare record refers to all information collected, processed and held both in manual and electronic formats pertaining to the service user and their care. It includes demographics, unique identification, clinical data, images, photographs, investigations, samples, correspondence and communications relating to the service user and their care.
- Environmental Health records
- Personnel / HR records.
- Financial records.

Prior to implementation of this policy, the following issues should be considered:

- Recommended minimum retention periods should be calculated from the end of the calendar
 month or accounting year following the last entry on the record. This should be recorded on the
 outside of the notes i.e. WRITE THE LAST DAY OF THE MONTH ON WHICH THE LAST
 ENTRY WAS MADE ON THE OUTSIDE OF THE CHART AND LEAVE INTO
 ADMINISTARTION OFFICE
- Local requirements/instructions (e.g. if there is live litigation) must be considered before activating retention periods in this schedule.
- Decisions should also be considered in the light of the need to preserve records, whose use cannot be anticipated fully at the present time, but which may be of value to future generations.
- On-going legislative requirements.

Documenting the Retention Schedule

The implementation of this retention policy should involve the departments OF Nursing and Administration in this Service who create and use the records as well as legal and financial advice, where appropriate. This policy sets out the minimum retention periods and when implementing it the following should be taken into consideration;

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- All Staff must comply with relevant legislation.
- Avoid trying to accommodate every conceivable need.
- Retain information if it is likely to be needed in the future and if the consequences of not having it would be substantial.
- Be conservative, avoid inordinate degrees of risk.
- Apply common sense.
- Ensure systematic disposal of records within a reasonable period after their retention period expires.

Healthcare records

Types of Healthcare Record	Retention Period	Derivation	Final Action
Admission Books	8 years after the last entry		Likely to have archival value. Contact the National Archives (Records Acquisition Division)
Audiology Records	persons with a mental disorder (within the meaning of the Mental Health Acts 1945 to 2001) 20 years after the last entry in the record or 8 years after the patient's death if the patient died while in the care of the organisation		Destroy under confidential conditions
Breast screening X-Rays	8 years		Destroy under confidential conditions
Clinical Audit Records	5 years		Destroy under confidential conditions
Death - Cause of, Certificate counterfoils	2 years		Destroy under confidential conditions
Death registers – i.e. register of deaths kept by the hospital, where they exist in paper format	10 years		Likely to have archival value. Contact National Archives (Records Acquisition Division)
Dietetic and	Retain for the period of		Destroy under confidential

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	(within the meaning of the Mental Health Acts 1945 to 2001) 20 years after the last entry in the record or 8 years after the patient's death if the patient died while in the care of the organisation 8 years after the last entry For post-mortem records which form part of the Coroner's report, approval should be sought from the Coroner for a copy of the report to be incorporated in the patient's notes, which should then be kept in line with the specialty, and then reviewed. All other records retain for 30 years 8 years after conclusion of treatment or death	appropriate to the patient/speciality, persons with a mental disorder (within the meaning of the Mental Health Acts 1945 to 2001) 20 years after the last entry in the record or 8 years after the patient's death if the patient died while in the care of the organisation 8 years after the last entry For post-mortem records which form part of the Coroner's report, approval should be sought from the Coroner for a copy of the report to be incorporated in the patient's notes, which should then be kept in line with the specialty, and then reviewed. All other records retain for 30 years 8 years after conclusion of treatment or death 6 years 30 years

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Patient-held records	At the end of an episode of care the hospital organisation responsible for delivering that care and compiling the record of the care must make appropriate arrangements to retrieve patient-held records. The records should then be retained for the period appropriate to the specialty	Destroy under confidential conditions
Physiotherapy records	Retain for the period of time appropriate to the patient/specialty, mentally disordered persons (within the meaning of the Mental Health Acts 1945 to 2001) 20 years after the last entry in the record or 8 years after the patient's death if patient died while in the care of the organisation	Destroy under confidential conditions
Records/documents related to any litigation	As advised by the organisation's legal advisor. All records to be reviewed. Normal review 10 years after the file is closed	Destroy under confidential conditions
Forensic Material - criminal cases	Permanently, not part of the healthcare record	
Personnel Files	Personnel files to be retained for 7 years after the employees term of service has completed. Retain for duration of employment and forward to Pensions Section on retirement of staff member. Hold for 7 years	Destroy under confidential conditions

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Internal/local personnel files – sick leave certificates/records and	Retain for duration of employment and forward to Pensions Section on retirement of staff member	Destroy under confidential conditions
and internal issues	member	

For a Complete Listing see: RECORD RETENTION PERIODS Health Service Policy, Health Services Executive 2013