

Witness Name: Sandra Elizabeth
Carman
Statement No.: WITN3425007
Exhibits: WITN3425008 - 010
Dated: 05/09/2022

INFECTED BLOOD INQUIRY

THIRD WRITTEN STATEMENT OF SANDRA ELIZABETH CARMAN

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 20 May 2022

I, Sandra Elizabeth Carman, will say as follows: -

Was there a fire, or any other event, which caused the destruction of records at some stage before 2012 at Northern General Hospital, Royal Hallamshire Hospital, Weston Park Hospital or any storage facility for these Hospitals?

If so, please note in your reply which and answer the following questions;

1. Please provide details of:

- a. the nature of the incident(s), and identified cause(s) of the incident/s;***
- b. the time and date(s) when the incident(s) occurred;***
- c. the extent of the damage to medical records (i.e: percentage of records damaged/destroyed);***

- 1. The Trust has now had the opportunity to undertake a robust and comprehensive search. Given the expansive date range provided for the

potential incident, this has consisted of a number of steps which have been summarised below.

- Engagement with departments and colleagues across the Trust, including the Trust's Medical Records Team and Estates Team.
- A comprehensive search undertaken on DATIX, the Trust's current incident management database. Furthermore, we have been able to access the legacy incident management system to further enhance the searches undertaken.
- Engagement with Sheffield City Archives to explore a potential incident.

Despite the thorough searches conducted and the engagement with colleagues across the Trust, we have not been able to identify any incident that has caused any irretrievable destruction to medical records by way of fire or flood.

2. Please provide any documentation in relation to the incident and give details of the records that were damaged/destroyed (where that exists);

2. A response to this question isn't relevant as no incident has been identified where records were irretrievably destroyed.

3. Were there any archives which backed-up the records which were subsequently destroyed? If so, where are these held?

3. A response to this question isn't relevant as no incident has been identified.

4. Were there any applicable policies or guidelines that recommended or discussed how an incident of this nature should be dealt with? If so,

a. Please provide us with the relevant policies or guidelines that were applicable at the time of the incident/s.

b. Did relevant policies/guidelines stipulate that a record of incidents causing damage/destruction to medical records should be kept? If so, was this followed by your Trust?

c. How often were the relevant policies/guidelines reviewed and who was responsible for reviewing and updating these policies/guidelines?

d. Were the policies/guidelines governing storage of medical records subject to review following any incidents so as to prevent any recurrences?

4. In response to Question 4, the Trust has an Incident Management Policy in place that provides comprehensive guidance on how incidents are managed and recorded within the Trust (WITN3425008). The current version of the policy was approved in April 2020 by the Patient Safety and Risk Committee and the Serious Incident Group. The current policy superseded previous versions of the policy.

5. Following the destruction of records at some stage before 2012, have any policies or guidelines that recommended or discussed specifically how to prevent an incident of this nature in the future been put in place? If so, please provide us with the relevant policies or guidelines that were established after the incident/s occurred.

5. In relation to Question 5, The Trust has a detailed procedure in place for the management of Data Security and Protection Incidents (WITN3425009). This procedure provides guidance on how data / records incidents are managed and recorded. Additionally, The Trust Records Management Policy has been provided as WITN3425010. The Records Management provides guidance on how the Trust manages all the aspects of records whether internally or externally generated and in any format or media type, from their creation, all the way through to their lifecycle to their eventual destruction. The policy was approved in May 2022 by the Healthcare Records Committee and supersedes previous versions of the policy.

6. Please confirm whether the record searches undertaken for this request covered the Jessop Hospital for Women?

6. The Jessop Hospital for Women closed in 2001 and a new Jessop Wing was built on a different site. However, I can confirm searches undertaken covered the Jessop Wing and any information that may be available from the Jessop Hospital for Women.

We thank you for your patience in allowing the Trust to ensure this is appropriately investigated. Should you have any more queries, please don't hesitate to contact us.

Statement of Truth

I believe that the facts stated in this witness statement are true.

GRO-C

Signed: _____

Dated: 05 September 2022

Table of exhibits:

Date	Notes/ Description	Exhibit number
09/08/2022	Incident Management Policy	WITN3425008
29/05/2019	Management of Data Security and Protection Incidents Procedure	WITN3425009
30/05/2022	Records Management Policy	WITN3425010