

Witness Name: Iain Paterson
Statement No.: WITN6911007
Exhibits: WITN6911008-012;
PRSE0000552;
SCGV0000038_042; RLIT0001152
Dated: 01 September 2022

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF IAIN PATERSON, ON BEHALF OF GREATER GLASGOW HEALTH BOARD

I provide this statement on behalf of Greater Glasgow Health Board in response to a request under Rule 9 of the Inquiry Rules 2006 dated 7 June 2022.

I, Iain Paterson, will say as follows:

Section 1: Introduction

Name: Iain Paterson
Job Title: Corporate Services Manager
Address: NHS Greater Glasgow and Clyde
J B Russell House
Gartnavel Royal Hospital Campus
Glasgow
G12 0XH

Section 2

1. What policies, if any, relating to the destruction or retention of medical records did NHS Greater Glasgow and Clyde have in place during the time period 1980-present? If so, please supply copies of any such policies.

1.

- i. SHM 58/60 'Scottish Health Service, destruction of hospital records' (1958) - (PRSE0000552);
- ii. NHS MEL (1993) 152 'Guidance for the retention and destruction of health records' (1993) - (SCGV0000038_042);
- iii. CEL 31 (2010) 'Records Management: NHS Code of Practice (Scotland)' (2010) - CEL 31 (2010) - Records management: NHS code of practice (Scotland) - (WITN6911008);
- iv. 'Records Management: NHS Code of Practice (Scotland)' Version 2.1 (2012) - (RLIT0001152); and
- v. DL (2018) 14 - Letter from Gareth Brown, Deputy Director and Head of Health Protection Division, dated 17th July 2018 – 'UK Infected Blood Inquiry – Retention Of Records' (WITN6911009)

2. Photographic evidence of the Board's Archives Deaccession Register is also provided (WITN6911010). A record of deaccessions from the Archives has been maintained since 1990. Deaccession includes activities of securely destroying records and transfer of records to other archive services.

2. Were there any archives which backed up records which were subsequently destroyed, for example on microfiche or elsewhere?

a. If so, please outline:

- i. the nature of records held in these archives;
- ii. To which period the records kept refer to (for example patient admissions dated X-Y);
- iii. The projected time frame to maintain these archives.

3. The Board's former Archivist, Alistair Tough, provided a witness statement to the Inquiry providing an historical overview of the Board's archiving arrangements (WITN6911004). He notes that, following the creation of NHS trusts in 1993/94, there was widespread destruction of non-current clinical records, particularly those dating to the 1950s, 1960s and 1970s.
4. Further explanation for why Board cannot provide particular records pre-2006 was also supplied in my previous Witness Statement (WITN6911001). Prior to the Board-wide records inventory system, records were managed locally by services.

Furthermore, you will be aware that the Inquiry has previously liaised directly with the Board's Archive Services. That contact will have demonstrated what documentation, of a more historical nature, is held by the Board.

5. In 2003, the Board Archivist made a proposal for the transfer of non-current patient records held on microfiche to the Archives (WITN6911011). This is provided in the appendix. It is understood that the microfiche were made as part of the routine management of clinical records, which saw transfer to microfiche format and the destruction of the paper originals.

However, no record of the transfer of these clinical records is held within the Archives' Accession Register, and they are not maintained within the repository.

3. How often were the relevant practices reviewed and who was responsible for reviewing and updating the policies in place?

6. Responsibility for the Board's Archives Policy currently rests with the Director of Public Health while the responsibility for the Records Management Plan rests with the Director of eHealth. All Board policies

are required to be reviewed within three years as per the terms of the NHSGGC Policy Development Framework (WITN6911012).

4. To the best of your knowledge, were any records disturbed, misplaced or destroyed because of an incident that occurred to the storage environment, for example, fire, flooding or otherwise unforeseen events. If so, were the policies/guidelines governing storage of medical records subject to review following any such incidents so as to prevent any future recurrences?

7. In 2002, the shelving for the archives of Glasgow Royal Infirmary and Gartnavel Royal Hospital collapsed within the Archives repository. The affected records were safely recovered from the collapsed shelving with no lasting damage. The damaged shelving was replaced following the Archivist's recommendation to procure new shelving rather than re-using shelving. To the best of my knowledge, there have been no further unforeseen events or incidents that impacted upon records held by NHSGGC.

5. In relation to changes, updates and improvements of the policies over the time period, please explain to the best of your knowledge what these were driven by, for example any Government guidance provided.

8. NHSGGC has followed national guidance on retention and destruction of health/hospital records, provided in response to Q1, throughout the period of interest for this Inquiry and has only produced local guidance for administrative/business records.

Section 3: Other issues

6. Please provide further comments that you wish to add on these matters.

9. None.

Statement

GRO-C

I believe that

Signed _____

Dated 01/09/2022

Table of exhibits:

Date	Notes/ Description	Exhibit number
27 August 2010	CEL 31 (2010) - Records Management: NHS Code of Practice (Scotland)	WITN6911008
17 July 2019	DL (2018) 14 - Letter from Gareth Brown, Deputy Director and Head of Health Protection Division, dated 17 th July 2018 – 'UK Infected Blood Inquiry – Retention Of Records' (WITN6911008)	WITN6911009
Various	NHSGGC Archives Deaccession Registers (photos of physical registers from 1990, 1991-93, 1994-2006, 2006-2021)	WITN6911010
30 June 2003	Preservation of hospital patient records in microfiche format - Proposal from Archivist to Director of Public Health	WITN6911011
7 July 2022	NHSGGC Policy Development Framework	WITN6911012