

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF CLAIRE ALEXANDER, DIRECTOR OF QUALITY GOVERNANCE

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 16 June 2022 which was addressed to Sue Musson, LUHFT Chair.

The information required has been shared with the Associate Director of Corporate Affairs/Company Secretary, Director of Quality Governance, Associate Director of Legal Services, Lead for Procedural Document Control, Information Assurance Manager and Deputy Head of Patient Access Services.

I, Claire Alexander, Director of Quality Governance will say as follows: -

- 1. In the time period 1980-present, what archiving policy/policies on destruction and retention of documents were/are in place for Royal Liverpool and Broadgreen University Hospitals NHS Trust (RLBUHT) and its successor LUHFT? Please supply copies of any policies from the time period 1980-present.**

The Trust has undertaken a search of the procedural documents archives and has located policy documents related to this request dating from 2004.

Exhibit number WITN7166002 provides a list of these documents, review date and author. This attachment also notes when documents were superseded by others and notes the changes made.

Information on the retention and destruction of documents could be found within the Royal Liverpool and Broadgreen University Hospitals NHS Trust Record Management Policy commencing with Version 1 on the 16th March 2004 through to Version 10 [**Exhibit numbers WITN7166003 – WITN7166016**] which was superseded by a LUHFT Corporate Records and Archiving Policy on the 1st of March 2021 [**Exhibit number WITN7166017**]. This was then superseded by the LUHFT Access and Management of Information Policy [**Exhibit number WITN7166018 – WITN7166019**]. There is a further RLBUHT document which relates to staff recording and destroying patient handover information. There is one version of this policy approved on the 20th March 2009 and archived on the 13th

November 2012 [Exhibit number WITN7166020]. The Trust is not aware of documents that were in place prior to 2004.

- 2. To the best of your knowledge, how often were these procedures and policies reviewed and who was responsible for reviewing and updating the policies in place?**

Exhibit number WITN7166002 provides information on the review dates and the job titles of those responsible for reviewing and updating the policies in place.

- 3. 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?**

Prior to the opening of the Royal Liverpool Hospital (RLH), I understand that the closing hospitals in Liverpool were allocated a new RLH number to each convert their records to the same numbering system. This resulted in some patients having more than one number in the RLH. During this time, it is understood that there was some damage to roofs of some of the old buildings including water and fire damage, which resulted in paper records being 'officially' written off because they were unreadable/unusable. There is a potential for some of those (then) current records, which began before 1980 having been destroyed. The RLH opened in 1978.

The non-current records at the opening of the RLB which needed to be retained were microfilmed, and if a patient presented to the (new) RLH their microfilmed records were copied under their old case-note number and another volume of records was commenced. Once discharged, the record was then microfilmed and then filed behind the first volume microfilm, then second volume etc. The Royal and Broadgreen Hospitals amalgamated in 1995 and it is understood that the same process was followed. A number of paper records held in an attic at Broadgreen that were over 25 years old were sent for destruction.

Given the details provided above to the best of my knowledge and the Trust's procedural document archive identifying relevant documents from 2004, I am unable to state whether policies/guidelines governing storage of medical records were subject to review following these incidents.

- 4. 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**

Exhibit number WITN7166002 includes reference to the changes made to the policies forwarded to the inquiry [Exhibit numbers WITN7166003 – WITN7166020]

Statement of Truth

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

Signed

GRO-C

Dated

4 August 2022

Table of exhibits:

Notes/ Description	Exhibit number
List of retention and destruction related policy documents in place since 2004 which outlines: <ul style="list-style-type: none">• When documents were superseded by others• Authors• Changes made	WITN7166002
Records management policy V1	WITN7166003
Records management policy V1.1	WITN7166004
Records management policy V1.2	WITN7166005
Records management policy V2	WITN7166006
Records management policy V3	WITN7166007
Records management policy V4	WITN7166008
Records management policy V5	WITN7166009
Records management policy V6	WITN7166010
Records management policy V6.1	WITN7166011

Records management policy V7	WITN7166012
Records management policy V8	WITN7166013
Records management policy V9	WITN7166015
Records management policy V10	WITN7166016
Corporate Records and Archiving Policy LUHFT V1	WITN7166017
Access and Management of Information Policy V1	WITN7166018
Access and Management of Information Policy V2	WITN7166019
Policy for Recording Handover Details V1	WITN7166020