

Witness Name: Dr Ben Pearson

Statement No.: WITN7228001

Exhibits: WITN7228002 -

WITN7228006

Dated: 5 September 2022

## INFECTED BLOOD INQUIRY

---

### WRITTEN STATEMENT OF DR BEN PEARSON, ON BEHALF OF DERBYSHIRE COMMUNITY HEALTH SERVICES NHS FOUNDATION TRUST

---

I, Dr Ben Pearson, Executive Medical Director and Caldicott Guardian, Derbyshire Community Health Services NHS Foundation Trust, Ash Green Learning Disability Centre, Ashgate Road, Ashgate, Chesterfield S42 7JE, will say as follows: -

1. I make this statement in relation to the letter received via email by Tracy Allen, Chief Executive dated 24 August 2022 from Not Relevant on behalf of the Infected Blood Inquiry.

2. I work for Derbyshire Community Health Services NHS Foundation Trust (DCHS), and have been the Executive Medical Director and Caldicott Guardian since June 2019. I qualified as a doctor (MBBS London) in 1993.

3. Under Rule 9(2) of the Inquiry Rules 2006, the letter requests that I address the following four questions:

**a. Please supply copies of any policies on records retention and destruction from the hospitals that now form the current Trust (including Scarsdale Maternity Hospital) from the time period 1980-present.**

DCHS became a legal entity on the 1 November 2011 and I have attached the Information Lifecycle and Records Management policies that have been in place

since that time. (WITN7228003; WITN7228004; WITN7228005; WITN7228006). These policies detail DCHS' retention and destruction processes. The retention and destruction periods we have followed have always been in line with the national schedules provided by the Department of Health and NHS Digital.

**b. How often were these procedures and policies reviewed and who was responsible for reviewing and updating the policies in place?**

The policies are due to be reviewed on a two-yearly basis. However, if there are material changes that occur before the two year review period it would be expected that policies would be reviewed and updated sooner to ensure our staff are always working to the most up to date procedures. Occasionally, an extension is granted if the policy cannot be reviewed at the two-year point.

The Information Lifecycle and Records Management Policy was reviewed in 2011, 2013, 2016, 2019 and 2021. The box on the front of the policy details the policy sponsor, the date it was approved and the approving group/committee. Only certain committees/groups within DCHS can approve policies and this is delegated by the Board in our Scheme of Delegation.

**c. 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?**

DCHS had a flood at Repton Health Centre in June 2013. The records affected were Health Visitor (Childrens) records and Intermediate Care records and are not related to the Infected Blood Inquiry. DCHS followed its Serious Incident Policy to record, investigate and learn lessons from the incident.

**d. 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.**

Any changes to the sections related to records retention would be due to changes in Government guidance only. Changes to other aspects of the policies would be due to Government guidance, local process changes or organisational change. The policies have a revision history on the front box, which provides a short summary of the changes made.

### **Statement of Truth**

I believe GRO-C ss statement are true.

Signed

Dated 5 September 2022

### **Table of exhibits:**

Date	Notes/description	Exhibit number
November 2011	Information Lifecycle Records Management Policy v0.8	WITN7228002
October 2013	Information Lifecycle and Records Management Policy	WITN7228003
September 2016	Information Lifecycle And Records Management Policy	WITN7228004
January 2019	Records Management Policy	WITN7228005
November 21	Records Management Policy	WITN7228006