

HPSS	Controls Assurance Standard	Records Management
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RECORDS MANAGEMENT

STANDARD

A systematic and planned approach to the management of all records is in place within the organisation that ensures, from the moment a record is created until its ultimate disposal, that the organisation can control, both the quality and quantity of information it generates; can maintain that information in a manner that effectively services its needs and those of its stakeholders; and it can dispose of the information appropriately when it is no longer required.

OVERVIEW

This standard covers HPSS records of all types, both corporate and administrative, including:

- Patient health records (electronic or paper based: including those containing all specialities, but excluding GP medical records).
- Accident and Emergency, Birth, and all other Registers.
- Theatre Registers and Minor Operations (and all other related) Registers
- Administrative records (including eg personnel, estates, financial and accounting records; notes associated with complaint handling).
- X-Ray and imaging reports, output and images.
- Photographs, slides and other images.
- Microform (ie fiche/film).
- Audio and videotapes, cassettes, CD-Rom etc.
- Computer databases, output and disks etc and all other electronic records.
- Material intended for short term or transitory use, including notes and 'spare' copies of documents.

Recent legislation, particularly the Freedom of Information Act 2000, is having a significant effect on record keeping arrangements in public authorities. HPSS bodies must ensure that records management policies and procedures are fully compliant with this new legislation and with government policy on the management of information. Further information can be accessed via the Freedom of Information website <http://nwww.foi.nhs.uk/home.html> and <http://www.proni.gov.uk>.

An effective records management service ensures that such information, in whatever medium, is properly managed and is available:

- To support patient care and continuity of care.
- To support day-to-day corporate activities which underpin delivery of care.
- To support evidence based practice.

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- To support sound administrative and managerial decision-making, as part of the knowledge base for HPSS services.
- To meet legal requirements, such as those relating to the storage, handling and disposal of records as well as requests from patients under access to health records legislation.
- To assist medical and other audits.
- To support improvements in clinical effectiveness through research and also support archival functions by taking account of the historical importance of material and the future needs of research.
- Whenever and wherever there is a justified corporate need for information, and in whatever media it is required.
- To ensure that the management of such data is appropriate and that any risks to the integrity of the data are minimised.

The organisation should identify the range and type of information:

- Generated within the organisation (for example, individual patient records, other information relating to patient care, data required to support the business activities of the organisation etc)
- Passed by the organisation to other stakeholders
- Received by the organisation from other individuals/organisations.

It is also important to organise the different risks associated with the various systems of data capture, recording and retrieval and for these to be controlled, ie paper based systems may require different controls than those which are computer based, although the underlying principles of confidentiality etc will remain common. It is also essential for any assessment to consider the potential variation in records management across the organisation (in that different organisations may well have historically different records management systems, especially if there is no previous history of working together). Ensuring that all organisations comply with relevant policies and legislation and maintain the highest standards of data management is central to the achievement of the organisation's objectives.

HPSS staff are responsible for the safe-keeping of all records which they handle. This includes being conversant with systems provided for the tracking of records so that their locations are known at any time.

The development of electronic records for both patient services and administration will offer benefits, but also significant challenges. Records, management strategies will need to take account of the opportunities presented by new standards and a developing Health Records Infrastructure, and of the effort required to make a smooth transition from paper to electronic record keeping.

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Records management strategies will need to include measures for ensuring the confidentiality, integrity and availability of electronic records. Full account should be taken of electronic patient records in business continuity planning.

Information is the lifeblood of the HPSS organisation and is essential to the delivery of high quality evidence-based health care on a day-to-day basis. Records are a valuable resource because of the information they contain. That information is only usable if it is correctly recorded in the first place, is regularly updated, properly stored and maintained, and is easily accessible when needed.

It should be noted that any lists of examples throughout this standard are not exhaustive.

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KEY REFERENCES

The majority of documents appearing on this page are downloadable in PDF (Portable Document format). Viewing these requires **Adobe Acrobat Reader** on your computer. If you do not have this free software, you are advised to contact your administrator to arrange for a copy to be installed on your computer. Alternatively Adobe Acrobat can be downloaded directly from Adobe's website <http://www.adobe.com/acrobat>.

The links below were all accurate at the time of publication.

British Standards Institution (1999) *A code of practice for legal admissibility and evidential weight of information stored electronically*. BS PD 0008: 1999 London, BSI <http://www.bsi.org.uk/index.xalter>.

British Standards Institution (2000) *Information security management* BS 7799-ISO/IEC17799: 2000 London BSI <http://www.bsi.org.uk/index.xalter>.

British Standards Institution (2000) *Recommendations for the storage and exhibition of archival documents* BS5454 <http://www.bsi.org.uk/index.xalter>.

British Standards Institution (2002) *Effective Records Management: Part 1, A management guide to the values of BS ISO 15489-1* BS PD 0025-1: 2002 London, BSI <http://www.bsi.org.uk/index.xalter>.

British Standards Institution (2002) *Effective Records Management: Part 2, Practical implementation of BS ISO 15489-1* BS PD 0025-2: 2002 London, BSI <http://www.bsi.org.uk/index.xalter>.

British Standards Institution *Storage, transportation and maintenance of media for use in data processing and information storage*. BS 4783: London BSI <http://www.bsi.org.uk/index.xalter>.

Great Britain (1987) *The Consumer Protection Act 1987* The Stationery Office, London <http://www.hmso.gov.uk/si/si1987/Uksi 19871680 en 1.htm>.

Great Britain (1990) *the Access to Health Records Act 1990* The Stationery Office, London <http://www.hmso.gov.uk/acts/acts1990/Ukpga 19900023 en 1.htm>.

Great Britain (1998) *the Data Protection Act 1998* The Stationery Office, London <http://www.hmso.gov.uk/acts/acts1998/19980029.htm>.

Great Britain (2001) *The Health and Social Care Act 2001* The Stationery Office, London <http://www.hmso.gov.uk/acts/acts2001/20010015.htm>.

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Great Britain (1958) *Public Records Act 1958 (as amended)* The Stationery Office, London <http://www.hmso.gov.uk/si/si2001/200140058.htm>.

Health Activists Group (2002) *Hospital Patient Case Records: a guide to their retention and disposal* <http://www.pro.gov.uk/archives/standards/hospitalrecords.htm>.

HCASU The Health Care Standards Unit <http://www.hcsu.org.uk>.

IHRIM Institute of Health Record and Information Management
<http://www.ihrim.co.uk>.

HPSS ICT Security Policy
<http://hpssweb.n-i.nhs.uk/dis/secure/index.htm>

NHS Executive (1999) Caldicott Guardians HSC 1999/012.1999

DAO(DFP) 5/2001 – Corporate Governance: Statement of Internal Control

Circular HSS(F) 24/2001 - Corporate Governance: Statement of Internal Control

Circular HSS(FAU) 18/2002 - Statement of Internal Control

Circular HSS(FAU) 19/2003 - Statement of Internal Control

DAO(DFP) 25/2003 – Statement of Internal Control

Circular HSS(F) 2/2004 - Statement of Internal Control: Full Implementation for 2003/2004

Circular HSS(PPM) 3/2002 - Corporate Governance: Statement of Internal Control

Circular HSS(PPM) 6/2002 – AS/NZ 4360:1999 – Risk Management

Circular HSS(PPM) 8/2002 – Risk Management in the Health and Personal Social Services

Circular HSS(PPM) 10/2002 – Governance in the HPSS: Clinical and Social Care Governance – Guidelines for Implementation

Circular HSS(PPM) 13/2002 – Governance in the HPSS: Risk Management

Circular HSS(PPM) 5/2003 - Governance in the HPSS: Risk Management and Controls Assurance

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Circular HSS(PPM) 8/2004 - Governance in the HPSS: Controls Assurance
Standards – Update

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INDEX OF RECORDS MANAGEMENT CRITERIA

Criterion 1

Board level (ie the senior management team responsible for the organisation as a whole) responsibility for records management is clearly defined and there are clear times of accountability for records management throughout the organisation, leading to the Board.

Criterion 2

There is an organisation-wide records management strategy, which is endorsed by the Board.

Criterion 3

A senior manager is responsible for co-ordinating, publicising implementing and monitoring the records management strategy and reporting on a regular basis to the Board.

Criterion 4

The organisation has a comprehensive records management programme which includes the cost-effective management of non-current as well as active records, the storage, tracking, retrieval, environmental control and destruction of records when no longer required, and which also takes account of the organisation's risk management policy and strategy.

Criterion 5

All managers ensure that staff are aware of their personal responsibilities for record keeping. This includes the creation, use, storage, security and confidentiality of records.

Criterion 6

Records management services and control are included in the organisation's plans and strategies.

Criterion 7

Employees, including managers are provided with appropriate information, instruction and training on records management matters.

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Criterion 8

Key indicators capable of showing improvements in records management and/or providing early warning of risk are used at all levels of the organisation, including the Board, and the efficacy and usefulness of the indicators is reviewed regularly.

Criterion 9

The systems in place for records management are monitored and reviewed by management and the Board at least manually in order to make improvements to the systems.

Criterion 10

The Board seeks independent assurances that an appropriate and effective system of managing records is in place and that the necessary level of controls and monitoring are being implemented.

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CRITERION 1

Board level responsibility for records management is clearly defined and there are clear lines of accountability for records management throughout the organisation, leading to the Board.

INFORMATION

Source

- Circular HSS(PPM) 3/2002 - Corporate Governance: Statement of Internal Control
- Circular HSS(PPM) 8/2002 – Risk Management in the Health and Personal Social Services
- Circular HSS(PPM) 5/2003 – Governance in the HPSS: Risk Management and Controls Assurance
- Guidelines for Managing Records in Health and Personal Social Services Organisations in Northern Ireland – Good Management, Good Records.
- Standards Australia (1999) Risk Management AS/NZS 4360:1999. Standards Association of Australia. Strathfield NSW.
- PRONI – Northern Ireland Records Management Standards (NIRMS).

Guidance

All HPSS records are public records under the terms of the Public Records Act (NI) 1923 and the Disposal of Documents Order No 167, 1925. Chief Executives and senior managers of all HPSS bodies are personally accountable for records management within their organisation and have a duty to make arrangements for the safekeeping of those records under the overall supervision of the Keeper of Public Records. Other legal obligations exist in respect of particular classes of records, especially those containing personal information.

Everyone working for or with the HPSS organisations who records, handles, stores, or otherwise comes across information, has a personal common law duty of confidence. The Data Protection Act 1998 now places statutory restrictions on the use of personal information, including health information.

Clear lines of accountability should be established throughout the organisation for the management of records.

Examples of Verification

- Accountability arrangements chart
- Board minutes

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- Job descriptions

Links with other standards

All standards (generic criterion)

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CRITERION 2

There is an organisation-wide records management strategy, which is endorsed by the Board.

INFORMATION

Source

- Guidelines for Managing Records in Health and Personal Social Services Organisations in Northern Ireland – Good Management, Good Records.
- PRONI – Northern Ireland Records Management Standards (NIRMS)

Guidance

All HPSS organisations should have in place an organisational records management strategy, identifying the resources needed to ensure that records of all types (administrative as well as medical) are properly controlled, tracked, readily accessible and available for use, and eventually archived or otherwise disposed of. It is important that the resources devoted to records management are adequate for the work to be done.

A record is anything that contains information in any medium, e.g. paper, microfiche, audio or video tapes, x-ray images, computer database, notes, e-mail etc which has been created or gathered as a result of any HPSS activity, whether clinical or non-clinical, by employees – including consultants, agency or casual staff. Records management strategies should have been agreed, with implementation now well in hand, including arrangements to monitor progress and compliance.

Where possible the strategy should encourage the rationalisation of records collections through the development of systems which allow records and the information they contain to be shared in a controlled way (but subject to statutory security and agreed confidentiality guidelines e.g. The Data Protection Act 1998) and which facilitate cross-referencing or merging (e.g. of all records for the same patient).

Full strategy guidance is given in HSC 1999/53.

Examples of Verification

- A comprehensive policy statement that demonstrates that all records management issues have been identified.
- Board minutes which identify any endorsements or amendments of the policy statement.

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- Evidence of compliance with Freedom of Information action plan.

Links with other standards

Information and Communications Technology
Risk Management

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CRITERION 3

A senior manager is responsible for co-ordinating, publicising implementing and monitoring the records management strategy and reporting on a regular basis to the Board.

INFORMATION

Source

- Guidelines for Managing Records in Health and Personal Social Services Organisations in Northern Ireland – Good Management, Good Records.

Guidance

Senior management must take responsibility for records management and for ensuring that all staff are involved in the programme for implementing the records management strategy. The programme should encompass:

- Profile raising and publicity
- Appropriate resources including training
- Review of procedures and implementation plan for specific actions arising
- Monitoring individual and organisational compliance

Local records managers should have the appropriate cross-organisational authority to achieve key objectives; should determine their relationship with internal audit and management teams; and should ensure that they have the necessary competences.

Examples of Verification

- A senior manager has been given written responsibility for co-ordinating, publicising and monitoring implementation of the records management strategy.
- Job descriptions
- Appraisals of information surveys, records, audits, etc.
- The authority of local records managers is documented.
- The relationship between local records managers and management teams is documented.
- Board reports.
- Board minutes.

Links with other standards

Information and Communications Technology

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CRITERION 4

The organisation has a comprehensive records management programme which includes the cost-effective management of non-current as well as active records, the storage, tracking, retrieval, environmental control and destruction of records when no longer required, and which also takes account of the organisation's risk management policy and strategy.

INFORMATION

Source

- British Standards Institution Storage, transportation and maintenance of media for use in data processing and information storage. BS4783: London, BS1
- Guidelines for Managing Records in Health and Personal Social Services Organisations in Northern Ireland – Good Management, Good Records.
- PRONI – Northern Ireland Records Management Standards (NIRMS)
- Standards (1999) Storage of Semi-current Records, Standards for the Management of Government Records RMS 3.1 1999

Guidance

Senior managers must ensure that all staff are involved in this programme, which should encompass profile raising and publicity; appropriate resources including training; review of procedures and implementation plans for specific actions arising; monitoring and reviewing organisational compliance and the ability to retrieve records quickly when required for business or other reasons.

Additionally, senior managers have a duty to make arrangements for the safe-keeping of records, under guidance contained in the Guidelines for Managing Records in Health and Personal Social Services Organisations in Northern Ireland, - Good Management, Good Records. Current records should be kept in the business area adjacent to users, and stored securely in lockable desk drawers or cabinets, within rooms, which should be locked when left unattended. Less frequently used or archived records should be moved to more effective and space efficient storage options. These options should take account of:

- Adequate off-site secure storage and retrieval services
- Sufficient mobile ranking and warehouse-type units.
- Appropriate environmental storage conditions.
- Microfilm, microfiche and digital scanners to capture and store images;
- Picture archiving for diagnostic imaging.

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It is important to recognise that different record types and different storage media may require different approaches. Appropriate retrieval arrangements should be agreed before archiving, including appropriate strategies for migration of electronic information between systems.

Contracts for non-HPSS agencies or staff must require that patient information is stored and retrieved according to specified security and confidentiality standards and Data Protection guidelines. Records identified for permanent preservation must be stored by the Public Record Office of Northern Ireland (PRONI).

Guidance on the destruction and disposal of records is contained in Departmental Guidelines, Good Management, Good Records.

The Board should receive periodic reports (e.g. quarterly) on the progress of implementation of records management programmes.

Examples of Verification

- Documented records management programme which takes account of the risk management policy and strategy.

Links with other standards

Risk Management

Information and Communications Technology

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CRITERION 5

All managers ensure that staff are aware of their personal responsibilities for record keeping. This includes the creation, use, storage, security and confidentiality of records.

INFORMATION

Source

- HPSS ICT Security Policy
- Great Britain (1998) *The Data Protection Act 1998* The Stationery Office, London
- Guidelines for Managing Records in Health and Personal Social Services Organisations in Northern Ireland – Good Management, Good Records.

Guidance

In practice, individuals within HPSS organisations are responsible for any records they create or use. This responsibility is established at, and defined by law. Furthermore, as an employee of the HPSS, any records that he/she creates are public records in accordance with the Public Records Act (NI) 1923 and the Disposal of Documents Order, 1925 No 167. Everyone working for or with the HPSS who records, handles, stores or otherwise comes across information has a personal common law duty of confidence. The Data Protection Act 1998 now places statutory restrictions on the use of personal information, including health information.

Even the most stringent security and confidentiality measures can be undermined by the improper actions of staff who handle personal data and information. Examples include:

- Confidential patient, staff or operational information in visible format (ie on a white board at the nursing station).
- Patient notes or charts kept unsecured at the foot or side of a patient's bed.
- Confidential patient, staff or operational data discussed with, or in the presence of, others who should not have access to such information.
- Patient electronic records visible on a computer screen to those who should not have access to such information.

As a matter of policy and procedure, all staff should understand their responsibilities when using or communicating personal data and information.

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Examples of Verification

- Induction training includes consideration of records management issues.
- The responsibilities of employees for managing records, which they create or use, are documented.

Links with other standards

Human Resources

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CRITERION 6

Records management services and controls are included in the organisation's plans and strategies.

INFORMATION

Source

- Northern Ireland HPSS Information and Communications Technology Strategy [To be launched shortly]
- Guidelines for Managing Records in Health and Personal Social Services Organisations in Northern Ireland – Good Management, Good Records

Guidance

The HPSS Information and Communications Technology Strategy, which is due to be launched in the near future sets out a comprehensive information strategy. The draft strategy is currently accessible on the HPSS Intranet. **[DN: This wording will be reconsidered before formal issue of the standard]**

Increasingly, information will be created, stored and disseminated electronically as work progresses implementation of an Integrated Care Record Service (ICRS). The underlying principles for effective records management apply equally to electronically held records. It is important, therefore, to ensure adequate consideration is given to records management in all relevant Information and Communications Technology strategies.

The detailed procedures for each Information and Communications Technology system should cover records management issues such as access, usage, retention and destruction.

Examples of Verification

- Copies of Information and Communications Technology and other organisational strategies.
- Copies of relevant systems and operating procedures.
- Organisational corporate/business plan

Links with other standards

Risk Management
Information and Communications Technology

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CRITERION 7

Employees including managers are provided with appropriate information, instructions, and training on Records Management matters.

INFORMATION

Source

- Guidelines for Managing Records in Health and Personal Social Services Organisations in Northern Ireland – Good Management, Good Records.

Guidance

Provision of information, instruction and training is an important means of achieving competence and capability. Accordingly, therefore, staff induction programmes should include reference to records management and records of attendance at training should be maintained and inadequate attendance rectified. Job rotation/re-location should trigger a training needs analysis.

Training and guidance are available from the National Archives www.nationalarchives.gov.uk (introductory and bespoke courses on all aspects of records management). Private training consultants offer regular short courses covering records management issues. The National Archives, Liverpool University and the University of Northumbria are co-operating (as the RM3 consortium) to offer courses focused on records management in Government. Other Universities offer modules on records management as part of wider Information Management or Information Science courses, some of which can be studied as “stand alone” modules. Further information and guidance on the Freedom of Information Act can be accessed at <http://www.foi.nhs.uk/home.html> and on the DHSSPS Extranet.

Examples of Verification

- Training records

Links with other standards

Human Resources

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CRITERION 8

Key indicators capable of showing improvements in records management and/or providing early warning of risk are used at all levels of the organisation, including the Board, and the efficacy and usefulness of the indicators is reviewed regularly.

INFORMATION

Source

- Circular HSS(PPM) 3/2002 - Corporate Governance: Statement of Internal Control
- Circular HSS(PPM) 8/2002 – Risk Management in the Health and Personal Social Services
- Circular HSS(PPM) 5/2003 – Governance in the HPSS: Risk Management and Controls Assurance

Guidance

The organisation should develop indicators, which demonstrate that all stages of the records management process are being properly managed and risks are minimised.

Ideally the indicators should be designed to demonstrate improvement in managing the risks associated with records management over time. The number of indicators devised should be sufficient to monitor the records management service. It is not necessarily the case that the Board will use all the indicators. The Board should select those which are useful for ensuring that the internal controls are working satisfactorily and objectives for managing records are being met.

One indicator is a degree of compliance with this standard. Some other examples of indicators which would be appropriate measures are:

- Percentage of planned staff attending training/awareness sessions.
- Availability of records for clinics/on admission etc.
- Percentage of records released under the 40 day requirement of the Data Protection Act
- Number of requests made under FOI Act 2000.
- Number of complaints involving records
- Number of incidents involving records

All organisations should be engaged in development and use of key indicators for their own internal performance, but they should also maximise the value of such measures by benchmarking themselves against like organisations, whether those are other HSS Trusts or others who measure similar processes.

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Examples of Verification

- Indicators
- Evidence of usage at all levels
- Access control records

Links with other standards

All standards (generic criterion)

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CRITERION 9

The systems in place for records management are monitored and reviewed by management and the Board at least annually in order to make improvements to the systems.

INFORMATION

Source

- Guidelines for Managing Records in Health and Personal Social Services Organisations in Northern Ireland – Good Management, Good Records
- Circular HSS(PPM) 3/2002 - Corporate Governance: Statement of Internal Control
- Circular HSS(PPM) 8/2002 – Risk Management in the Health and Personal Social Services
- Circular HSS(PPM) 5/2003 – Governance in the HPSS: Risk Management and Controls Assurance

Guidance

All aspects of the systems in place for records management should be reviewed, including:

- Accountability arrangements
- Processes, including risk management arrangements
- Capability
- Outcomes
- Audit findings

The Risk Management Committee (or a sub-committee of the Board over-seeing risk management within the organisation) may play a role in monitoring and reviewing all aspects of the systems in place as a basis for establishing significant information that should be presented to, and dealt with by the Board. The Audit Committee should review any internal audit findings.

Examples of Verification

- Internal audit report(s)
- Risk Management Committee (or equivalent) minutes
- Audit Committee minutes

Links with other standards

All standards (generic criterion)

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CRITERION 10

The Board seeks independent assurance that an appropriate and effective system of managing records is in place and that the necessary level of controls and monitoring are being implemented.

INFORMATION

Source

- Circular HSS(PPM) 3/2002 - Corporate Governance: Statement of Internal Control
- Circular HSS(PPM) 8/2002 – Risk Management in the Health and Personal Social Services
- Circular HSS(PPM) 5/2003 – Governance in the HPSS: Risk Management and Controls Assurance

Guidance

Management should consider the range of independent internal and external assurance available, and avoid duplication and omission.

The adequacy of the independent assurance will depend upon the scope and depth of the work performed, bearing in mind its timeliness and the competency of the staff performing it. The level of reliance that can be placed upon such assurances should consider, among other things, the professional standing of the assurer, their level of independence, and whether they could reasonably expect to provide an objective opinion. It is important that any review that takes place results in a report, recommendations for action where necessary, and the retention of sufficient evidence to enable other potential reviewers to rely upon the work already undertaken. The reports should be made to the appropriate sub-committee of the Board.

Management arrangements will include an internal audit function, as well as other quality control and assurance functions such as clinical audit. The internal audit function is required to give an opinion to the Board on the adequacy and effectiveness of the overall system of internal control. In doing so, they will seek to work with, and rely on the work of, other review bodies as far as is practical. External assurance will be provided to the HPSS by such bodies as:

- External auditors, as appointed by the Directorate of Health Audit, Northern Ireland Audit Office.
- Health and Personal Social Services Registration and Inspection Authority (HPSSRIA).

More specific assurance for this standard may be gained by visits by:

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- Information Commissioner
- PRONI

Examples of Verification

- Schedule of planned reviews
- Copy of reports
- Committee minutes
- Action plans
- Notes to follow up of actions
- Evidence file
- Details of staff involved in the review
- Reports from HPSSRIA and other review bodies
- Reports from external audit

Links with other standards

All standards (generic criterion)