

Witness Name: Suzanne Rankin

Statement No.: WITN4665008

Exhibits: WITN4665009 -

WITN4665021

Dated:

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF SUZANNE RANKIN ON BEHALF OF CARDIFF AND VALE UNIVERSITY HEALTH BOARD

I provide this statement in response to a request from Jesse Farragher from the Infected Blood Inquiry team for the production of documents and information under Rule 9(2) of the Inquiry Rules 2006 dated 7 June 2022.

I, Suzanne Rankin, will say as follows: -

Section 1: Introduction

1. My name is Suzanne Rankin, my professional address is Woodland House, Maes y Coed Road, Cardiff, CF14 4HH. My date of birth is GRO-C1967. My professional qualifications are as follows:
 - Master of Arts Defence Studies (Merit), Kings College London (2006)
 - ENB 219 Orthopaedic Nursing Certificate (1994)
 - ENB 998 Teaching and Assessing in Clinical Practice (1993)
 - Registered General Nurse (Not currently on the register) (1990)
2. I am the current Chief Executive Officer at Cardiff and Vale University Health Board ("CVUHB").

Section 2: Response to the Request

1. 'What policies, if any, relating to the destruction or retention of medical records (including electronic documents) did Cardiff and Vale University Health Board, or the individual hospitals that now make up the Trust, have in place during the period of 1980 - present? Please supply copies of such policies that have not yet been provided to the Inquiry.'

3. Document retention periods at CVUHB are guided by the Records Management Code of Practice for Health and Social Care 2022 (RMCOP) (Exhibit A, WITN4665009). The RMCOP is made available to all CVUHB staff via CVUHB's internal Information Governance (IG) page on the staff intranet. Where the RMCOP doesn't explicitly cover a type of record, the UHB holds data in accordance with the UK General Data Protection Regulation (GDPR) principles. Prior to this, the UHB relied upon the 2016 and 2021 iterations of the RMCOP and made the document retention schedules contained therein available via the CVUHB intranet pages.
4. Colleagues within the CVUHB Information Governance, Medical Records and Corporate Governance teams have undertaken a search of the Health Board's electronic and physical records to identify and locate policies relating to the destruction or retention of medical records for the period 1980 to present. Following a search of CVUHB's records the following policies have been found:

Date	Notes / Description	Exhibit Number
17/09/2013 (subsequently amended 20/09/2016 and 08/08/2017)	Records Management Retention and Destruction Protocol and Schedule	B WITN4665010
10/06/2016 (subsequently amended 17/07/2018)	Record Management Procedure	C WITN466011

16/10/2012 (subsequently updated on the 06/09/2016 and 08/08/2017)	Record Management Policy	D WITN4665012
15/11/2019	CV IG Policy v.04	E WITN4665013
15/11/2019	CV IG Policy v.06	F WITN4665014
01/09/2021	CV IG Policy v.07	G WITN4665015
22/06/2015	Information Asset Management Procedure	H WITN4665016
19/01/2016	Information Governance Operational Management and Responsibilities Procedure	I WITN4665017

5. The extent of the searches undertaken by Health Board Colleagues is detailed below at Section 2, Paragraph 5. Those searches have not resulted in the location of any additional policies relating to the destruction or retention of medical records for the period 1980 to 2013, beyond those detailed above.
6. It should be noted that the Records Management Retention and Destruction Protocol and Schedule attached as Exhibit B WITN4665010 stipulates that the retention periods for such documents ('Policy Records') was, at the time of preparation in 2013 '10 years after last action'. It is acknowledged that the RMCOP retention period currently in place is the 'Life of organisation plus 6 years.' However, for the purpose of this statement it should be acknowledged that this has not always been the position at CVUHB which may explain the unavailability of historic records retention documentation within the organisation.
7. Whilst no additional policy document could be found prior to 2013 a letter dated 18/08/1999 (Exhibit J WITN4665018) from the University Hospital of Wales and Llandough NHS Trust Medical Records Department has been located addressed to all consultants at the University Hospital of Wales

which confirms that the Trust Board approved a Policy for the Retention and Destruction of Personal Health Records in 1996 which would be implemented in 1999. That policy would enable the hospital to destroy the notes of patients who had not attended for treatment in over 8 years, though this period was extended to 25 years for patients from Paediatrics and Obstetrics. The policy further confirmed that the records of patients who had not attended for treatment during the previous 18 months were to be microfilmed.

8. A letter from the CVUHB Haemophilia Centre dated 10/09/1999 (Exhibit K WITN4665019) has also been located which was shared with the Health Board's Health Records Manager in relation to the Medical Records of Patients with Inherited Bleeding Disorders. That document references the importance of retaining the records of patients with inherited bleeding disorders for life. The letter stresses the need for retention to enable adequate treatment and that as a reference centre, there was a duty to keep records so that any other hospital in the country who need background details would be able to contact the centre for this purpose. Whilst this document is not a Record Retention Document in and of itself, it highlights that meaningful conversations and communications were had regarding the retention of records by individual clinical areas within the Health Board.

2. In your previous written statement dated 30th September 2019, you stated that certain records had been digitally scanned to disc and microfiche as a way of backing up the information. In light of this, please outline:

- 1) the nature of these records held in this archive***
 - 2) to which period the records relate to (for example patient admissions dated X - Y); and***
 - 3) The projected timeframe to maintain these records.***
9. Advice in response to these requests has been sought from CVUHB's Director of Digital Health and Medical Records and Information Governance managers.

10. Within the statement of Len Richards dated 30th September 2019 a table was shared as Figure 1, which is copied below for ease of reference. It is assumed, for the purpose of this response, that the above query relates to the records referred to in the below table as 'Microfiche, scanned to CD, Digitally Scanned Records and Electronically Scanned' in the 'Format' column.

Figure 1: Archived and Current Acute Medical records

Information Type	Format	Site	Volume	Availability of Original
Medical Records	Archived original hard copy	Hywel Dda Unit 1 stradey Park Llangenech	410 000	Yes
Medical records	Archived original hard copy	Logic Department Unit 2 stradey Park Llangenech	356 000	Yes
Medical Records	Archived original hard copy	Restore Datashred 14b Greenway, Bedwas	46 000	
Medical Records	Archived original hard copy	C&V Treforrest offsite storage	276 000	Yes
Medical records	Current hard copy	On site medical records storage	530 000	Yes
Medical records	Microfiche	On site medical records storage	100 000	No but records can be re

				constituted on demand
Medical records	Scanned to CD	On site medical records storage	46 500	No but records can be re constituted on demand
Medical records	Digitally Scanned Records	On site medical records storage	100 000	Yes
Casualty Cards	Electronically saved	Scanned to Clinical Portal	500 000	No
Total			2365400	

11. I am informed that records referred to in the above table as 'Microfiche, scanned to CD, Digitally Scanned Records and Electronically Scanned' will relate to acute secondary care episodes such as casualty attendances inpatient and day case stays and outpatient attendances.
12. In accordance with CVUHB's Records Management policy and relevant instruction, the retention of digital records, where appropriately stored and accessed, can be for a period of up to 100 years. Microfiched and scanned records fall into the category of digital records and can, where required, be stored for up to 100 years although such records will, in the first instance, be stored in line with the RMCOP. Scanning and microficheing commenced in the late 1990s and was initially undertaken for records where the patient had not had an acute contact for two years or more.
13. Due to the volumes of records the CVUHB is required to retain, the Health Board utilises off-site storage facilities to hold records. To minimise the number of records that need to be retrieved, the UHB tries to limit those

sent for offsite storage to those records identified as not having been seen within the previous 18-24 months. The same process applies to the scanning and microfiching of records. Due to this practice it is not the case that each site or digital repository would relate to a certain cohort of patients (e.g. determined by clinical speciality, age, time period) and we are unable to confirm what time period each set of records detailed within Figure 1 relates to.

14. As part of the Health Board's archiving processes each patient record, when scanned or moved to offsite storage is allocated a unique reference which is able to be searched for and located via CVUHB's Patient Management System. This system confirms where a named record is located at a given point in time, including records included within the table at Figure 1.

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

15. The current and most recent Record Retention policies within CVUHB have a 2-year review period with reviews and re-drafting undertaken by Information Governance Leads. Changes to these documents are reviewed and approved at Committee, currently the Digital Health and Intelligence Committee and at Board Level.
16. Policies may also be updated and reviewed in advance of stipulated periods in response to legislative or regulatory changes.
17. It is anticipated that previous iterations of similar documents, that are not available, would have been reviewed and updated in a similar fashion.

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?

18. In the 1970s, documents stored at the Cardiff Royal Infirmary were moved to the University Hospital of Wales as part of the Health Board's restructuring. In this move, it is possible that some documents and records may have been lost or destroyed.
19. In 2011 one offsite storage unit referred to as Unit Seven was decommissioned. The majority of records were transferred and tracked to a separate storage facility and approximately 5000 sets of historical records were destroyed in line with the retention and destruction of medical records procedure. The destruction of these records was not recorded in accordance with current standards.
20. Whilst it is not known whether a similar process was in place during the 1970s, CVUHB's current practice is to record all Information Governance breaches, including the loss of records, via its incident reporting system, DATIX. DATIX Records became digital in 2016.

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.

21. It is not known what specific changes, updates and improvements to the Health Board's policies and procedures had been driven by over the period 1980 to present. It is however anticipated that legislative and regulatory changes, alongside the expiry of review periods will have been the key driver to this process.

22. As can be seen at paragraph 8 above, specific requests for changes to policies and procedures will also have been made over time which will have influenced record retention practices and policies.

6. For Inquiry record-keeping purposes we would require details of the searches conducted, including in relation to document retention and destruction policies of relevance.

23. An Electronic Search of the Health Board's digital repositories, websites and intranet sites has been undertaken by the Health Board's Information Governance and Corporate Governance teams to locate document retention and destruction policies of relevance. The outputs of those searches are detailed as Exhibits to this statement.
24. A full physical search has also been undertaken of the Health Board's Corporate Library to locate document retention and destruction policies of relevance. That search produced no additional documentation beyond the documents attached as Exhibits.
25. A search of the Glamorgan Archives has also been undertaken by the Health Board's Corporate Governance Team. Glamorgan Archives are in possession of documents that span 1822 – 1997 that were archived between 1975 and 2018. A comprehensive List of all archived documents provided by Glamorgan Archives has previously been shared with the Inquiry and are shared again for completeness as Exhibits L and M (WITN4665020 and WITN4665021).
26. A further electronic search of the Glamorgan Archives was undertaken in June 2022 with the detail of those searches and outputs detailed below.

Date	Location of search	Search Terms	Results	Type of Document
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16/06/2022	Glamorgan Archives	Health Board	South Glamorgan Health Board Bro Health Board	Committee Minutes Committee Agendas
16/06/2022	Glamorgan Archives	Health Records	No relevant result found	
16/06/2022	Glamorgan Archives	Health	No relevant result found	
16/06/2022	Glamorgan Archives	Medical Records	No relevant result found	
16/06/2022	Glamorgan Archives	Record retention	No relevant result found	
16/06/2022	Glamorgan Archives	Record destruction	No relevant result found	
16/06/2022	Glamorgan Archives	Document policy	No relevant result found	
16/06/2022	Glamorgan Archives	Record policy	No relevant result found	

27. The Health Board is unable to give full assurance that information that would have been relevant to the Inquiry's Terms of reference in relation to document retention and destruction policies of relevance for the period 1980s to present have not been destroyed in the past decades.
28. Whilst the Health Board seeks to comply fully with the requirements of the inquiry, providing a record of all of the information sources that exist within the Health Board brings with it significant risks from a cyber-security perspective. The Health Board therefore asks the Inquiry to consider maintaining confidentiality around the information relating to the list of repositories and asks that the Inquiry does not make this information available publicly.
29. Every effort has been made to provide the Inquiry with a full record of Health Board information assets and to describe current and historical record retention processes. It is not possible to give full assurance that what has been provided is a complete record of all policies and

documentation but the Health Board will continue to search for all relevant information and will make the Inquiry aware of new evidence as it is identified.

Statement of Truth

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

Signed

GRO-C

Dated 12.9.2022

Table of exhibits:

Date	Notes/ Description	Exhibit number
February 2022	Records Management Code of Practice for Health and Social Care 2022	WITN4665009
08/08/2017	Records Management Retention and Destruction Protocol and Schedule	WITN4665010
07/09/2016	Records Management Procedure	WITN4665011
08/08/2017	Records Management Policy	WITN4665012
15/11/2019	Cardiff and Vale UHB Information Governance Policy, version 0.4	WITN4665013
15/11/2019	Cardiff and Vale UHB Information Governance Policy, version 0.6	WITN4665014
01/09/2021	Cardiff and Vale UHB Information Governance Policy, version 0.7	WITN4665015

06/04/2016	Information Asset Management Procedure	WITN4665016
17/05/2016	Information Governance Operational Management and Responsibilities Procedure	WITN4665017
18/08/1999	Letter from Glenys Turner to all consultants, re: Policy for the Retention and Destruction of Personal Health Records	WITN4665018
10/09/1999	Letter from Dr P. W. Collins to Glenys Turner, re: Medical Records of Patients with Inherited Bleeding Disorders	WITN4665019
Undated	Glamorgan Archives Search Results	WITN4665020
Undated	Glamorgan Archives Search Results	WITN4665021