Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust

Requesting, Locating and Tracking Patient Records Policy

This procedural document supersedes: Policy for the Requesting, Locating and Tracking Patient Records – CORP/REC 4 v.7

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Executive Sponsor	Denise Smith – Chief Operating Officer
Author/reviewer:	Judy Lane – Medical Records Manager
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Approved by:	Information Governance and Cyber Group
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Target audience:	Trust-wide

Amendment Form

Version	Date Issued	Brief Summary of Changes	Author
Version 8		• Minor changes only	Judy Lane
Version 7	28 October 2021	• Minor changes only	Judy Lane Lucy Clark
Version 6	11 December 2017	• Changed to reflect introduction of iFIT system replacing CRT module of CaMIS PAS	Judy Lane
Version 5	1 April 2015	• Change in process point 4.1v)-paragraph 2 • 4.3-to read manager at the end of the paragraph • 4.4 and 4.5 amalgamated and service delivery times changed • 4.7 Tracking codes added • 6.2 Weekly spot check reduced to 10 case notes as agreed at CRC-please refer to CORP/REC 1 Order of Filing Hospital Case notes Policy • Appendix 3-RMP10 Searching for Misfiles Creating Temporary Folders • Appendix 4-Equality Impact Assessment	Julie Robinson Clinical Records Committee
Version 4	February 2012	**Major changes throughout – PLEASE READ IN FULL** • Introduction updated • Purpose identified • Guidance on requesting patient records updated • Guidance on confidentiality of patient records during transfer added • Tracker location maintenance and sub location guidance added • Case note retrieval contact details updated. • Contact details for Maternity case note retrieval added • Instructions for returning case notes to case note libraries added; use of in transit codes • Tracking of case notes received in medical records libraries added • Education and training guidance added • Processes for monitoring compliance added • Links to other associated procedural documents added • Reference to local procedural document for checking for missing patient records added	Christine Coates

Version 3	March 2009	• Amendment form added • Contents added • Minor changes made throughout • Contact numbers updated	Christine Coates/ Clinical Records Sub-committee
Version 2	November 2006	• Section 1, paragraph 4 has been amended to include guidance on miscellaneous filing • Section 4, additional section to cover location of case notes at Tickhill Road Hospital	Christine Coates/ June Hines

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1. INTRODUCTION

The movement of all patient records must be recorded to provide an effective case note location and retrieval service.

The iFIT System recognises the patient's NHS, district numbers and treatment numbers with which patients are registered on CaMIS PAS. All relevant PAS users have access to iFIT. It is essential that staff across the Trust update iFIT whenever they move case notes.

The system entirely replaces manual procedures for tracing case notes both in and out of filing locations and between other locations. It supports real-time case note requests, enquiries and movements. The use of iFIT increases efficiency by reducing the need for telephone calls; it improves the flow of case notes around the organisation.

All staff who receive or transfer case notes must be trained on iFIT (please see section 5)

If users have difficulty tracking case notes they should contact a medical records department or the PAS training department for further advice.

2. PURPOSE

To ensure that patient records are available at the right place at the right time.

3. DEFINITIONS

iFIT	Intelligent file inventory tracking
KPI's	Key performance indicators
IDOX	Name of company providing tracking system
RFID	Radio Frequency Identification
PAS	Patient Administration System provided by EMIS also known as CaMIS

4. DUTIES AND RESPONSIBILITIES

4.1 Requesting Patient Records

- Search iFIT to establish the current location of the patient's records.
- Records located in the Medical Records Libraries should be requested via the iFIT system. A telephone answer phone service is available for urgent case note requests on ext. 572795 for Bassetlaw Hospital (BH), 644320 for Doncaster Royal Infirmary (DRI) and 649121 for Mexborough Montagu Hospital (MMH). Urgent requests will be given priority e.g. urgent admissions.
- At Doncaster Royal Infirmary it is the responsibility of staff to locate and retrieve the case notes themselves from the Medical Records Libraries as this is an 'open' library

4.2 Transferring Patient Records to another Location

- The transfer of patient records in and out of a location **must** be recorded on iFIT; this is **mandatory**.

- Individual users must track records into their own sub-locations.
- All case notes leaving any medical records libraries will be labelled with an active RFID tag
- Clinic notes should be tracked to the appropriate clinic code and will then be the responsibility of the relevant secretary or care group admin team member to track at the point of receipt.
- Individual users are responsible for tracking and locating records which are booked into their own locations.
- To ensure and maintain patient confidentiality, envelopes containing case notes must be securely sealed and clearly addressed to the recipient and transferred as locally agreed.
- Tote boxes carrying case notes must be clearly addressed and sealed with a tie wrap to ensure confidentiality.

4.3 Tracker Location Maintenance

Specific location tracking is available on the iFIT system which enables a set of case notes to be recorded precisely to a parent location. For any new or additional locations this can be requested from the iFIT super-users via Medical Records.

4.4 Patient Record Enquiries, Requests and Transfers by non-iFIT Users and iFIT users

All enquiries, requests and transfers of patient records by non-iFIT users, advice and support must be sought from any Medical Records Department.

Requests for case notes for emergency retrieval are as follows:

Health Records, DRI (Including General, Fracture, Maternity)	
Resus requests for case notes tracked to General Records between the hours of 8am-5pm Monday to Friday	Via Alertive system
Monday-Friday 8am-5pm	Via Alertive system
Saturday/Sunday 9am-5pm	Via Alertive system
Monday-Sunday 5pm-8am	Via Alertive system
Bank Holiday	Via Alertive system
Saturday/Sunday 8am-9am	Via Alertive system
Bassetlaw Records	
Monday-Friday 8am-5pm	572795
Montagu Records	
Monday-Friday 8am-5pm	649121

When the case notes have been located, they will be tracked to the required destination. For out-of-hours requests the out-of-hours staff will contact the requester and advise if the case notes are available.

If the staff cannot find the case notes in their current location, using the iFIT system and supporting devices the staff can undertake additional searches within the last known location on the iFIT system.

If a temporary set of case notes is required, due to a missing set of case notes, this must be reported by raising an incident on the Datix incident system. It is the responsibility of the staff member requiring the case notes to raise the incident form.

4.5 Users Returning Patient Records to Case note Libraries

Track all case note folders to the relevant 'In Transit to File' tracker location Code.

- BFILE - In transit to file - Bassetlaw Records Department
- DGFILE - In transit to file - DRI General Records Department
- DOFILE - In transit to file - DRI Orthopaedic Records Department
- DAFILE - In transit to file - DRI Antenatal Records Department
- PFILE - In transit to file - DRI Maternity Records Department (Post Natal Store)
- MFILE - In transit to file - Montagu Records Department

All Individual volumes of case notes must be tracked.

4.6 Case notes Received by Medical Records Libraries

All incoming case notes will be labelled and associated with an active RFID tag. Medical records libraries will file (track) case notes using location-based filing into the receiving library. Maternity Records returned to the ante natal library are labelled with an active RFID tag, tracked on IFIT and filed alphabetically by surname.

The structure of filing is based on library, rack, column and shelf

- DL1 – Main General File DRI
- DL2 – Small General File DRI
- ML – Montagu File
- BN – Bassetlaw New File
- BM – Bassetlaw Main File
- BPGS – Bassetlaw Post Grad
- BNSR – Bassetlaw New Side Room
- BMHR – Bassetlaw Manual Handling Room
- BLA/B/C - Bassetlaw Library – old pay services
- DFM – Fracture DRI File
- ACOM – Maternity Office DRI

5. EDUCATION AND TRAINING

iFIT access is restricted to trained staff. Training is available for all iFIT users; new staff in areas that use iFIT must attend formal training delivered by the PAS training team or complete the eLearning module on ESR.

Individual line managers are responsible for arranging training by completing a computer services online training request form.

iFIT Training Documents are given to all attendees, copies can also be downloaded from the intranet.

6. MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT

6.1 Key Performance Indicators (KPI's)

Medical Records department performance is measured on key performance indicators. The KPI's include accurate tracking of clinic case notes and returned case notes to medical records libraries in location-based filing.

The iFIT system allows reports to be generated on the following:

- Invalid track logs
- Invalid tag logs
- File audit
- Number of missing case notes – this is run monthly
- Number of temporary sets created – this is run monthly
- Number of notes filed
- Number of notes destroyed

6.2 Case note Structure, Filing and Tracking Audit

According to Trust policy 'Order of Filing in Hospital Case Notes' (CORP/REC 1) each medical records department must monitor compliance with this policy by undertaking a weekly spot check of 10 sets of case notes using the audit form attached (Appendix 1) to the policy. Audit action reports are submitted to the Patient Safety Review Group.

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where Reported to
Tracking quality	Medical records Supervisor	Daily	Responsible Medical records clerk/Medical Records Manager
Tagging quality	Medical records Supervisor	Daily	Responsible Medical records clerk/Medical Records Manager
Filing Audit	Medical records Supervisor	Monthly	Responsible Medical records clerk/Medical Records Manager
Missing case notes Audit	Medical records Supervisor	Monthly	Responsible Medical records clerk/Medical Records Manager
Temporary case notes Audit	Medical records Supervisor	Monthly	Responsible Medical records clerk/Medical Records Manager
Case note Preparation Audit	Medical Records Supervisor	Monthly	Responsible Medical records clerk/Medical Records Manager

7. EQUALITY IMPACT ASSESSMENT

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are disadvantaged over others. Our objectives and responsibilities relating to equality and diversity are outlined within our equality schemes. When considering the needs and assessing the impact of a procedural document any discriminatory factors must be identified.

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27) and the Fair Treatment for All Policy (CORP/EMP 4).

The purpose of the EIA is to minimise and if possible, remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. (See Appendix 2).

8. DATA PROTECTION

Any personal data processing associated with this policy will be carried out under 'Current data protection legislation' as in the Data Protection Act 2018 and the UK General Data Protection Regulation (GDPR) 2021.

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website: https://www.dbth.nhs.uk/about-us/our-publications/information-governance/

9. ASSOCIATED TRUST PROCEDURAL DOCUMENTS

- CORP/REC 1 - Order of Filing in Hospital Case notes Policy
- CORP/REC 2 - Safeguarding Patient Records held Separately from Medical Records Libraries and in Transit Policy
- CORP/REC 5 – Clinical Records Policy
- CORP/REC 6 - Record Keeping Standards
- CORP/EMP 58 – Civility, Respect and Resolution Policy
- CORP/EMP 59 – Equality Diversity and Inclusion Policy
- CORP/EMP 27 – Equality Analysis Policy

APPENDIX 1 – CLINIC PREPERATION AUDIT FORM

NHS
Doncaster and Bassetlaw
Teaching Hospitals
NHS Foundation Trust

Clinic Preparation Audit Form - INSERT DATE/CLINIC HERE/INITIALS

Clinic Date	Patient Number	Clinic	F/Sheet & Labels	Section	Recon Slip	Merging/Amalgamating	Relevant Volume	Tagged/ Tracked	Specialty	Temp	Comments
01/01/1900	B123456	ABC123	✓	✓	✓	✓	✓	✓	✓	X	N/A
01/01/1900	D1234567	ABC123	✓	✓	✓	X	✓	✓	✓	X	Didn't merge all sets - Folder Tatty

APPENDIX 2 – EQUALITY IMPACT ASSESSMENT – PART 1 INITIAL SCREENING

Service/Function/Policy/Project/Strategy	Care Group/Executive Directorate and Department	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
CORP / REC 4	Performance - PASS	Judy Lane	Existing	June 2028

1) Who is responsible for this policy? Performance

2) Describe the purpose of the service / function / policy / project/ strategy? To provide guidance on the tracking and requesting of patient records

3) Are there any associated objectives? National casenote standards – Records Code of Practice

4) What factors contribute or detract from achieving intended outcomes? Non-compliance

5) Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief? No

- **If yes, please describe current or planned activities to address the impact**

6) Is there any scope for new measures which would promote equality? No

7) Are any of the following groups adversely affected by the policy? No

Protected Characteristics	Affected?	Impact
a) Age	No	
b) Disability	No	
c) Gender	No	
d) Gender Reassignment	No	
e) Marriage/Civil Partnership	No	
f) Maternity/Pregnancy	No	
g) Race	No	
h) Religion/Belief	No	
i) Sexual Orientation	No	

8) Provide the Equality Rating of the service / function /policy / project / strategy – tick (✓) outcome box

Outcome 1 √	Outcome 2	Outcome 3	Outcome 4

If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a* **Detailed Equality Analysis form in Appendix 1

Date for next review: June 2028

Checked by: Sonya Granby **Date**: June 2025