For decision

Retention of Fitness to Practise incident location information

Issue

1 For the majority of Fitness to Practise case or enquiry records, we have the location of the incident stored in Siebel in a specific ‘Incident Location’ field from January 2007 onwards. We have the option to undertake additional work to retrospectively go through our files, to find and add this information to this field in Siebel for our records pre January 2007 or the source file which might contain this data will be disposed of in due course in line with our Records Retention Policy.

2 Finding the incident location within our files is possible but it is quite complex and time consuming. From the sample of 51 files we tested, we could only find reliable information for 45% of them and it took an average of 3.5 minutes per file.

Options

3 We have the following options available:

a Option A: Go through our files and add the incident location to our Siebel records for Fitness to Practise cases and enquiries pre January 2007. This will require additional resource provision of £45,000 for 2016.

b Option B: Dispose of the files which may or may not contain incident location data for Fitness to Practise cases and enquiries pre January 2007 in line with our Records Retention Policy.

Recommendation

4 The Strategy and Policy Board is asked to choose between the two options above.
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5 At its meeting on 22 May 2014, the Strategy and Policy Board considered a paper on the specific data fields that we proposed to retain as part of our skeleton record in relation to the disposal of material for Fitness to Practise (FtP) enquiries closed at the triage stage. Incident location was one of the fields the board agreed we should retain.

6 The idea behind the skeleton record is that, after all other information has been disposed of in line with our Records Retention Policy, it provides us with a summary of: what a complaint was about, who it was from, where the incident occurred, which doctor(s) it concerned, what action we took and the outcome.

7 Since 2011, the incident location has been added to each FtP case or enquiry as a business-as-usual activity. Before 2011, we did not ask for the incident location as part of our processes.

8 In 2011, we carried out a project to go back through previous FtP cases and enquiries and retrospectively add the incident location to Siebel. We went back to the start of 2007, the first full year of Siebel usage; Siebel was implemented in March 2006. The primary purpose was for aggregate data analysis so we were only interested in full years’ of data.

9 We now have eight full years’ worth of incident location data available in Siebel.

10 As part of the Retention and Disposal Project, we currently have a team of four temporary staff creating a summary for each enquiry closed at the triage stage. They have almost finished this work for our electronic records held in Siebel and they will then continue to create skeleton records, in Siebel, for our paper records prior to March 2006. This work is currently due to finish at the end of January 2016.

11 Once we have submitted material to the Gosport Inquiry we will start the process of disposing of ‘triage’ material in line with the Records Retention and Disposal Policy.

Options

Option A: Go through our files and add the incident location to our Siebel records for Fitness to Practise cases and enquiries pre January 2007. This will require additional resource provision of £45,000 for 2016.

12 At its meeting in May the Records Retention Review Project Board formed the view that having data available from January 2007 is sufficient for the following reasons:
a  The main purpose for using the data is aggregate analysis and eight years’ worth of data is sufficient for this purpose.

b  Finding the incident location is often difficult and sometimes not possible. From our sample of 51 paper files, we could only identify the incident location 45% of the time.

c  If we need to review a particular historic case we would likely be able to identify the incident location using the data held in the skeleton record as the basis for research.

13  If we wanted to carry out this work, we could extend the work of the temporary staff beyond January 2016. We have estimated that the costs of retaining this team together with quality assurance activity would cost in the region of £45,000.

Option B: Dispose of the files which may or may not contain incident location data for Fitness to Practise cases and enquiries pre January 2007 in line with our Records Retention Policy.

14  Each case and enquiry would still have a summary of what happened, who the complaint was about, who the complainant was, what action we took and the case or enquiry outcome and it may also include the incident location as part of the description.

15  There is no additional cost involved with this option.
Supporting information

How this issue relates to the corporate strategy and business plan

16 Strategic aim 5: to work better together to improve our overall effectiveness, our responsiveness and the delivery of our regulatory functions.

If you have any questions about this paper please contact: Dave Anson, Assistant Director - Information Systems; danson@gmc-uk.org; 0161 923 6240.