

Information Governance

DIGITAL CALL RECORDING POLICY

Policy Number:	IGP010
Version:	1.2
Purpose:	The purpose of this policy is to enable Trust staff to record and store incoming and outgoing telephone calls to specified and Executive Team approved phone numbers.
Consultation:	IT team, Crisis Team, SPCA, IG Group, IG & Records
Approved by:	IG Group, Director of Finance & Deputy Chief Executive
Date approved:	9 th June 2023
Author:	Paul Griffith-Williams
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Review date:	9th June 2026
Executive Lead:	Sandra Betney, Director of Finance
Audience:	All staff utilising or administering digital call recording systems.
Dissemination:	Trust intranet and through the Trust's Governance Team
Impact assessments:	This policy has been equality impact assessed using the Trust's agreed process, and the assessment has not identified any significant adverse impact on people with one or more protected characteristic.

Version History

Version	Date	Reason for Change
1.1	11/19	Initial version, for transfer to Gloucestershire Health and Care NHS Foundation Trust
1.2	06/23	Update policy

PART 1

SUMMARY

Gloucestershire Health and Care NHS Foundation Trust (GHC referred to herein as the Trust) has digital call recording system(s) (for recording incoming and outgoing telephone calls) to specified approved Crisis & SPCA telephone numbers within the Trust. This policy aims to ensure that staff from these teams are aware of their duties and responsibilities when using or administering the digital call recording system.

The digital call recordings will be made within the context of supporting safer Trust business delivery as indicated by:

- the Mental Health Act Code of practice;
- service delivery; and,
- for the purposes of investigation.

The IG principle of Informed processing with a consideration of capacity to understand being informed are the guiding principles that underpin this policy on call recording. There is an emphasis on the need for service users to be informed of the intention to record the call and to be able to object to the recording, while not impacting their care.

TABLE OF CONTENTS

Digital Call Recording Policy	1
Part 1	2
Summary	2
Table of Contents	3
Part 2	
1 Introduction	4
2 Purpose	4
3 Scope	4
4 Duties	5
5 Telephone Recordings – Operational Matters	5
6 Telephone Recordings – Storage of Data	6
7 Telephone Recordings – Access to Data	6
8 Telephone Recordings – Audit	7
Part 3	
9 Definitions	8
10 Process for Monitoring Compliance	8
11 Training	8
12 References	8
13 Associated Documents	9
Appendix 1 – Procedures	11
Appendix 2 - Internal Request to Access a Recorded Telephone Conversation	15

PART 2

1. INTRODUCTION

- 1.1 Telephone calls can form an important element of claims made against the Trust and may result in costly and time-consuming investigations and possibly subsequent litigation. During dispute resolution, it is vital that the Trust are able to provide accurate records that are admissible as evidence and are able to clarify the context in which conversations were conducted. Digital Call Management solutions provide the capability to review recorded conversations to help resolve problems, simply and efficiently as well as providing an ability to monitor quality of patient/service user engagement.
- 1.2 Digital Call Recording has been installed for the Trust's Crisis Teams, the SPCA teams, numbers. Historically, there has been no formal means of recording calls to or from specific telephone numbers to enable a clear record of the telephone conversation, should queries arise. The Trust has invested in a digital call recording system with enhanced functionality and reporting capability that will support the work of the Trust. This may include conducting investigations which involve issues associated with the telephone contact(s) with Crisis & SPCA staff and services.

2. PURPOSE

- 2.1 The purpose of this policy is to enable Trust staff to record and store incoming and outgoing telephone calls to specified and Executive Team approved phone numbers and provide service users and other individuals' access to the digital recordings, in line with the Trust's legal obligations. The recordings may also be used for quality control purposes.
- 2.2 Related procedures and guidance are provided by the Trust to comply with relevant legislative and a best practice framework by:
 - Setting standards for staff in the use of digital call recordings made to and from service users;
 - Ensuring that an Information Asset Owner (IAO) is identified;
 - Ensuring the digital call recordings are used in a way that will not breach legislation or this policy;
 - Ensuring that the digital call recordings are stored and retained in a secure way and for an appropriate period;
 - Ensuring that access to the digital call recordings are only granted to authorised persons only;
 - Ensuring that copies of the digital call recordings are able to be extracted from the server and provided to a service user/carer/authorised service user representatives as part of Subject Access Requests (SAR); and,
 - Setting standards for staff within the IT Department who will administer and maintain the digital call recording software, files and servers.

3. SCOPE

This policy applies to the Information Asset Owner(s), IT staff, Managers and staff within the Trust.

4. DUTIES

- 4.1 **Medical Director** - is the Trust's Caldicott Guardian as such has an advisory role in order to ensure the optimum confidentiality of service user information, and to enable appropriate information sharing custodian of patient information and is ultimately responsible for this policy and agreeing appropriate access to clinical team recordings.
- 4.2 **Director of Finance** - is the Trust's executive lead for Information Management & Technology, and the Senior Information Risk Owner (SIRO) and Chief Information Officer (CIO). As such they have responsibility for technical a digital systems along with agreeing appropriate access to corporate confidential data.
- 4.3 **Associate Director of Patient Safety, Quality & Clinical Compliance** – are responsible for reviewing audits of recordings and ensuring the dissemination of learning and best practice.
- 4.4 **The Information Asset Owner(s) (IAO)** - are responsible for ensuring that this policy is implemented, and associated procedures are developed for their call recording asset, to include access control, recording access, monitoring of access and line with this policy and the need to monitor access. The asset owner is responsible for ensuring there are appropriate access control processes for access to their system and the recordings.
- 4.5 **Locality Directors/Service Managers** – are responsible for ensuring their staff use the call recording system in line with this policy and the procedures. Where access is require access to recordings, the Locality Director/Service Manager should confirm the lawfulness with the Head of IG and Records, then seek authority from the appropriate director (Caldicott Guardian). For requests by external bodies/service users/carers/authorised service user representatives, this will be managed by the SAR team, service managers will review the file provided by the Subject Access Team to approve the file for release.
- 4.6 **Call Handling staff** - within the Teams utilisng digital call recoding will be responsible for following this policy and local procedures for the use of digital call recording.
- 4.7 **IT Operations Team** - within the Trust's IT Department will be responsible for following local guidelines on the technical set-up, backups of call recordings, administration and storage of the digital call recordings. Additionally, they are responsible for supporting the provision of copies of recordings for manager's or for SARs.
- 4.8 **All Staff** – within the Trust who may receive a request for access to a recorded call should inform their manager and the Trust's records team of the request. The staff member should obtain sufficient detail to identify the person making the request, the call being requested and pass this on to the records team to process.
- 4.9 **The records/subject access team** – within the Trust is responsible for managing all external requests for access to recordings, with the exception of the Police, including subject access requests.
- 4.10 **Legal Team** - Police requests for access will be managed by the legal team.
- 4.11 **The Head of IG and Records** - within the Trust is responsible for providing guidance on the lawfulness of access by service managers. They are also responsible for ensuring there are systems within the IG & Records team to deal with access requests. They are also responsible for providing advice and guidance on the appropriateness of other access requests.

5. TELEPHONE RECORDINGS – OPERATIONAL MATTERS

- 5.1 **NOTIFICATION PROCESS** - informing service callers that their call(s) will be recorded will be undertaken at the start of a call. This will also be promoted on the Trust's web site through the privacy notice and the relevant team(s) page.
- 5.2 For all incoming calls to specific and approved telephone numbers, the caller will hear a recorded message thanking them for calling the Trust and notifying them that their call *may* be recorded. They are informed to notify the clinician/call handler if they object to their call being recorded.
- 5.3 Service users/callers will be able to opt out of having their telephone call recorded. In such cases, the clinician will call back the service user/caller from a mobile or a telephone that is not linked to the digital call recording system. The clinician/call handler, answering a call using a telephone linked to the digital call recording system, will be notified by the caller if they object to their telephone call being recorded.
- 5.4 For all outgoing calls, the clinician/call handler will first decide if the call they are about to make is in response to a caller objecting to a call being recorded. If it is, the clinician/call handler will call the service user/caller on a mobile telephone (a non-recorded device) or a non-digital call recording system phone. For all other outgoing calls, the clinician/call handler will make the call using a telephone linked to the digital call recording system. The clinician/call handler, having established that they are talking to the 'correct' person (the person the clinician/call handler intended to speak to), will confirm with the person that their call *may* be recorded. Service users/people receiving a call from the Crisis Team will be able to opt out of having their telephone call recorded. In such cases, the clinician/call handler will call the service user/person from a mobile telephone or a telephone that is not linked to the digital call recording system.
- 5.5 It is the SPCA/Crisis Team manager's responsibility to ensure that their staff who receive or make calls to and from service users are aware that telephone calls *may* be recorded and the reasons why and are trained in the associated procedures where a call is not to be recorded. For all new starters, this will form part of their local induction process.
- 5.6 Should a landline, associated with the call recording system, be forwarded to a mobile then the recording system will not record the call. Additionally, a recorded call cannot be initiated from a mobile where the landline has been forwarded to it.

6. TELEPHONE RECORDING – STORAGE OF DATA

- 6.1 It should be noted in the patient's clinical record that a recording may have been made and a note of the date and time of the call recording will be referenced within the 'progress notes' section of the record.
- 6.2 All recordings will be stored on a central Trust or suppliers' server(s) that are securely located within appropriately secured server locations. The IT Department will manage technical access and ensure access is only granted to relevant authorised IT staff.
- 6.3 The call recordings will not normally form part of the patient clinical record and will therefore be stored on the server for a minimum period of 6 years. There may be an occasion where it would be appropriate for the recording to form part of a patient record, normal clinical record retentions apply. (This is supported by the 'Records Management Code of Practice for Health and Social Care 2021'). Following this period of retention, they should be reviewed and, if no longer needed, destroyed.

- 6.4 The server will, on a daily basis, automatically backup (take a copy of) all data recordings residing on the server. The IT Department's 'Data Storage and Backup' Policy describes in more detail the processes related to this section that need to be followed to implement this Policy.

7. TELEPHONE RECORDING – ACCESS TO DATA

- 7.1 Non-technical access to the telephone records will be restricted to the SPCA/Crisis managers, when requiring access, they will need to seek guidance on the lawfulness of access from the Head of IG & Records, and then appropriate director. They should maintain a record of access requests. The managers should review, when requested by the records team, the content of a call record for appropriateness of the content for release of the record to the requester.
- 7.2 Every time authorised access to a recording is made, a log must be made by the person accessing the recording, detailing the date of access, the name of the person accessing the information, the reason for access, the lawfulness and who authorised access.
- 7.3 The Trust's Head of Records, Patient Safety Manager, Legal Team, Complaints manager and Associate Director of Patient Safety, Quality & Clinical Compliance may also require access to a recording in relation to any relevant complaint, investigation or data subject right being reviewed. The request must be approved by the appropriate director and a log of the access recorded on the appropriate file.
- 7.4 Any requests for access to a recording by all other Trust staff must be made in writing to the Locality Director or Team/Service Managers providing an explanation as to why access is needed. The Locality Director/Manager will subsequently seek guidance on the lawfulness from IG and authority from the appropriate director (Caldicott Guardian).
- 7.5 Requests for access to recordings from service users/carers/authorised service user representatives should be treated as a subject access request (SAR) and the subject access process followed.
- 7.6 All information and requests for access to recordings will be processed in accordance with the Data Protection Act; and the UK General Data Protection Regulation, no staff will be allowed access without due process and approval, and service users' requests to hear other service users' calls will similarly not be approved without an appropriate lawfulness.
- 7.7 The authorisation of access and method of providing the recording to the service user/carer/authorised service user representative will be managed by the SARs team supported by relevant IT support.

8. TELEPHONE RECORDING – AUDIT

- 8.1 Periodic auditing (at least annually) of telephone calls within the Team will be undertaken by senior team managers to ensure that the quality of the responses to calls is of an acceptable standard. The outcome of the audits will help determine future training requirements for call-handling staff. The lawfulness, authority and access will subsequently be recorded in the audit files.
- 8.2 The results of these audits will be passed to Associate Director of Patient Safety, Quality & Clinical Compliance to provide assurance of best practice, learning and the quality of clinical engagement.

PART 3 – Explanatory information

9. DEFINITIONS

Information Governance Group (IGG) – is the group tasked, by the executives, to monitor all arrangements within the Trust for managing, controlling and processing all information in line with all relevant guidance and legislation.

Digital Call Recording - refers to the system utilised for recording of telephone conversations in a digital audio file format. The actual voice recording takes place on a recording system with software for the management of calls and security of recordings.

Team - refers to the relevant clinical and non-clinical group within the Trust that has and utilises the digital call recording system(s) in The Trust.

IT Department - refers to the Trust's Information Technology Department.

10. PROCESS FOR MONITORING COMPLIANCE

The relevant IAO(s) are responsible for monitoring use of the system in line with this policy and will ensure the necessary reviews and updates take place in accordance with changes in national policy of legislation. Any issues or anomalies should be reported through datix, by the service or It where it is technical, a report may need to be taken to the Trust's IG Group.

The Policy and its effectiveness will be monitored by the IAO and SAR team.

11. TRAINING

All Trust staff must complete Information Governance Data Security and awareness training on an annual basis.

All call-handling staff currently employed in relevant Teams must complete 'Call-Handling' training prior to the commencement of utilising the digital call recording system. For all new starters, the 'Call-Handling' training will form part of their local induction process.

All staff currently employed in the IT Department and who will be administering the system must undertake 'Digital Call Recording System Administration' training before being permitted to access the digital call recording system. For all new starters, this training will form part of their local induction process, if they are to be involved in the technical administration of the system.

12. REFERENCES

Access to Health Records Act 1990

Data Protection Act 2018

Health and Social Care Act 2016

Mental Health Act Code of Practice

NHS Code of Practice on Confidentiality

Records Management Code of Practice 2021

UK General Data Protection Regulations 2021

13. ASSOCIATED DOCUMENTS

Clinical Records Policy

Information Governance Management System Policy

IT Backup and Recovery Policy

IT Information Security Policy

Police Requests for Personal Information Policy

APPENDIX 1 - PROCEDURES

This procedure applies to all staff utilising the Trust's Digital Call Recording System(s). The Trust's IT Department has detailed procedures covering relevant technical parts of the digital call recording process.

This procedure is established to safeguard call handling staff in relevant Teams by providing a clear process for the recording of incoming and outgoing telephone calls. It protects staff from false accusations from service users/carers or from misinterpretation of guidance/advice offered by them for treatment.

This procedure ensures that any ambiguity or misinterpretation of the telephone call can be removed as it provides a digital recording of the telephone conversation between service users/carers/authorised service user representatives and the call handler, which can be used to establish clarity during any dispute resolution.

Failure to comply with the procedure could lead to disciplinary action.

Digital Call Recording - Incoming Telephone Recordings – Operational Matters

The digital call recording software is installed on a number of Crisis & SPCA telephones within the Trust.

A notification process - informing service users that their call to the Team may be recorded – will be undertaken at each call. This will be promoted on the Trust's web site's Privacy Notice and each Team's page.

When service users/carers/representatives call the relevant Team telephone number, they will hear a recorded message thanking them for calling the Trust and notifying them that their call *may* be recorded. It will also tell them to inform the clinician/call handler if they do not want the call to be recorded.

If the person calling the Trust objects to the call being recorded, they must notify the clinician/call handler as soon as the telephone call is connected to the Team.

Caller objects to call being recorded

If the caller has objected to having their telephone call recorded, the clinician/call handler will obtain the caller's contact details and will call the caller from a mobile telephone or other telephone that is not linked to the digital call recording system. (The caller's telephone number may be displayed on the clinician's/call handler's Mitel telephone.)

From this point, the caller enters into the Team's model of service delivery and local procedures for this service must be followed.

Caller does not object to call being recorded

If the caller does not object to having their telephone call recorded, the caller will enter into the Team's model of service delivery and local procedures for this service must be followed.

It is important for clinicians/call handlers to establish, as early on in the telephone conversation as possible, the service user's contact details and to record them. This includes: name, address, RIO/NHS/Hospital number and caller's telephone number (this may be displayed on the Mitel telephone if the telephone number has not been withheld by the caller). Clinicians/call handlers must also record in the 'Progress Notes' section of the service user's patient record

the following details (in the correct formats) relating to the call to assist with possible future requests to access the recordings:

- Date of call (dd/mm/yy);
- Time of call start (hh:mm) using the 24 hr clock timings; and,
- Time of call finish (hh:mm) using the 24 hr clock timings **OR** approximate duration of call.

Digital Call Recording - Outgoing Telephone Recordings – Operational Matters

Before an outgoing call can be made, the clinician/call handler must decide if the call is an 'initial call' (or in response to a caller who has objected to a telephone call being recorded.)

Outgoing call being made in response to a caller objecting to a call being recorded

If the person has objected to having their telephone call recorded, the clinician/call handler will ensure they have their up-to-date contact details and will call the person from a mobile telephone or other telephone that is not linked to the digital call recording system.

From this point, the person enters into the Team's model of service delivery and local procedures for this service must be followed.

All other outgoing calls

The clinician/call handler will make any other outgoing call from a telephone linked to the digital call recording system and will first establish that they are talking to the 'correct' person on the telephone. The clinician/call handler will ask the person they are speaking to on the telephone to confirm their contact details to verify they are the person they intended to call.

The clinician/call handler is talking to the 'correct' person on the telephone

If the person answering the telephone call verifies they are the 'correct' person (the person the clinician/call handler intended to speak with), the clinician will first notify them that 'the call *may* be recorded' and ask them if they object to their call being recorded.

The clinician/call handler is not talking to the 'correct' person on the telephone

If the person answering the telephone call cannot verify, they are the 'correct' person (the person the clinician/call handler intended to speak with), the clinician will ask to speak to the 'correct' person or end the telephone conversation and make the call at another time.

Once the clinician has established that they are speaking to the 'correct' person on the telephone, they will inform that person that the 'call *may* be recorded' and ask them if they object to their call being recorded. The person can either object, or not object, to the call being recorded.

Objection to call being recorded

If the person has objected to having their telephone call recorded, the clinician/call handler will ensure they have that person's up-to-date contact details and will call the person from a mobile telephone or another telephone that is not linked to the digital call recording system.

From this point, the person enters into the Team's model of service delivery and local procedures for this service must be followed.

No objection to call being recorded

If the person does not object to having their telephone call recorded, the clinician/call handler will ensure they have up-to-date contact details and the person will enter into the Crisis model of service delivery and local procedures for this service must be followed.

Digital Telephone Recording – Storage of Data

The Data Storage and Backup Procedure document, maintained by, and applicable to, staff within the IT Department, describes in more detail the processes related to this section.

Digital Telephone Recording – Access to Data

The digital call recordings will be retained for a period of at least 6 years.

Access to the digital call recordings will be via 2 routes:

- External Access; or,
- Internal Access.

External Access Request

There are typically two types of external access requests, external or data subject.

External organisation, the records team will record the request and seek authority from the relevant director for access. Once authority has been received the team will request a copy of the call.

External Police, the legal team will record the request and review the request for lawfulness and seek authority from the relevant director for access. Once the authority has been received the team will request a copy of the call.

Data Subject Access Request: the subject access team will record the request and treat it as any other subject access request. Once the authority has been received the team will request a copy of the call.

An external request to access a digital call recording of a clinical recording will be treated as an access to health records request if not made by the data subject or authority of the data subject. In this case, a written request from an external organisation will be received by the Records Team who will then record the request and request the copy. When the record is available confirm with the Caldicott Guardian this can be released.

The Authorisation of Access

The request will be formally recorded and advice sought from the Head of IG and Records on the lawfulness of the request. Authorisation will then be sought from the relevant director (Caldicott Guardian) disclosing the lawfulness advice received. All advice and authority are to be recorded on file.

If a request is not approved, a formal explanation of the reason for not approving the request will be sent to the requester.

Internal Access Request

A request to access a digital call recording will be treated as an 'internal access request' if it is made by a stakeholder internal to the Trust, e.g. clinician, manager, internal investigator. In this case, the request will be made on the request form at Appendix 2 and formally recorded by the relevant team manager and advice on the lawfulness of access sought. Authority for access will then be requested from the relevant director (Caldicott Guardian).

The Authorisation of Access

The request will be formally recorded and advice sought from the Head of IG and Records on the lawfulness of the request. Authorisation will then be sought from the relevant director (Caldicott Guardian) disclosing the lawfulness advice received. All advice and authority are to be recorded on file.

If a request is not approved, a formal explanation of the reason for not approving the request will be sent to the requester.

Obtaining the recording

The nominated person accessing the digital call recordings will search the software, using the 'conversation details' provided by the Trust requester. On no account must any other digital call recording be listened to or downloaded, other than to establish the correct call is being accessed as detailed on the request.

Once located, the digital call recording will be downloaded and distributed to the Trust requester.

Method of transporting the recording

The transporting of the digital call recordings will be made in line with the Trust's policies and procedures.

Appendix 2

Internal Request to Access a Recorded Telephone Conversation

From:	
Date:	

Conversation Details:

Clinician:			
Telephone Number of Clinician:			
Service User:			
Telephone Number of Service User:			
Date:			
Call Commencement Time:			
Approximate Duration:			

Recorded Details Required:

- ☐ Full typed transcript of telephone recording
- ☐ Audio copy of telephone recording
- ☐ Specific details as follows:

Note: Once details have been extracted from the call recording system they must be stored with the patient record or on an investigation or audit file.

Locality Director/Service Manager review and recommendation

IG Advice on Lawfulness
Lawfulness Identified: Yes/No
Detail Lawfulness:

I have reviewed the application and:

- ☐ I do not approve;
- ☐ I recommend the Director authorises access; or
- ☐ I recommend the Director does not authorise access as detailed above.

Name:			
Position:			
Signed:		Date:	

Director approval

Name:			
Position:			
Signed:		Date:	

I have reviewed the application and:

- ☐ I approve without conditions;
- ☐ I approve with conditions (see conditions below); or,
- ☐ I do not approve.

Conditions:
