



## Cognitive and Neuropsychological Test Document Management Policy

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Printed copies must not be considered the definitive version

<b>DOCUMENT CONTROL</b>		<b>POLICY NO.</b>	158
<b>Policy Group:</b>	Information Governance		
<b>Lead Author:</b>	Head of Information Governance		
<b>Lead Executive:</b>	Medical Director		
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<b>Approved by:</b>	Board Management Team	<b>Approval date:</b>	October 2025
<b>Equality Impact Assessed:</b>	Yes	<b>Equality Impact Assessment date:</b>	June 2025
<b>Data Protection Impact Assessed:</b>	Screening Questionnaire completed– DPIA not required	<b>Data Protection Impact Assessment Date:</b>	April 2025

# Policy on a page

Summary & Aim	Key Requirements
<p>To promote the safekeeping of Cognitive and Neuropsychological tests documentation by NHS Dumfries &amp; Galloway to ensure compliance with records management and data protection legislation and in accordance with supplier/publisher requirements. This policy is also relevant for the management of standardised Paediatric developmental assessments.</p>	<ul style="list-style-type: none"> <li>To ensure compliance with test publisher requirements in respect of the use and storage of these tests.</li> </ul>
Target Audience	Previous Names
<ul style="list-style-type: none"> <li>All employees, bank workers, agency staff, contractors, students, volunteers etc who are involved with the management of these documents – hereafter referred to as staff.</li> </ul>	<ul style="list-style-type: none"> <li>Not applicable – new policy</li> </ul>

Equality and Diversity Statement
<p>NHS Dumfries and Galloway recognise that some communities within society are more likely than others to experience discrimination, prejudice and inequalities. The Equality Act 2010 specifically recognises the protected characteristics of <b>age, disability, sex, race, religion or belief, sexual orientation, gender reassignment, pregnancy and maternity, and marriage and civil partnership</b>. The Fairer Scotland Duty, also requires NHS Dumfries and Galloway to actively consider how socio-economic disadvantage can be reduced when making strategic decisions.</p> <p>The New Armed Forces Covenant Statutory Duty places an expectation on NHS Dumfries and Galloway to consciously consider the Armed forces Covenant when developing, delivering and reviewing policies and decisions which may impact the Armed Forces community and help improve their access to public services.</p> <p>Consideration on all of the protected characteristics, the Fairer Scotland Duty and the Armed Forces Covenant are included within the Equality Impact Assessment process and documentation, which must be completed as part of the Policy Development Process.</p> <p>NHS Dumfries and Galloway is committed to promoting and advancing equality, removing and reducing discrimination and harassment and fostering good relations between people that hold a protected characteristic and those who do not. This applies both in the provision of services and as our role as a major employer. NHS Dumfries and Galloway believe that all people have the right to be treated with dignity and respect and is committed to the elimination of unfair and unlawful discrimination practice.</p>

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## 1. PURPOSE AND RATIONALE

**1.1** Cognitive/neuropsychological tests are used to assess cognitive function associated with brain structures and pathways. They are used in clinical settings to identify strengths and deficits in cognitive functioning, to contribute to differential diagnosis, and to inform rehabilitation and medical treatment. Clinical Psychologists are one of only a few professions trained in the use of cognitive/neuropsychological tests as part of core training. Some Clinical Psychologists complete further specialist training to become Clinical Neuropsychologists. Occupational Therapists also administer and interpret cognitive tests in the context of NHS employment.

**1.2** There are several test publishers who publish cognitive/neuropsychological tests. A common supplier to NHS Scotland is the publisher Pearson Clinical Assessment UK. Pearson test publishers have strict guidance about the use and storage of their tests, listed below.

- Only to be used by professionals with appropriate qualifications.
- Storage that ensures tests are not made available to the public, as this would compromise the validity of the tests.

**1.3** Standardised Paediatric Developmental assessments measure children and young people's developmental milestones including speech, language, motor skills and play. Assessments also include developmental performance and assessment for Autism Spectrum Disorder. These are administered by HCPC registered clinicians in line with Test requirements.

## 2. POLICY AIMS

**2.1** The purpose of this policy is to ensure NHS Dumfries & Galloway services are aware and adhere to professional guidelines, the appropriate storage security guidance set by Pearson Clinical Assessment and in compliance with the Public Records (Scotland) Act 2011, Data Protection law and other legislative directives.

## 3. POLICY SCOPE

**3.1** This policy is applicable to all staff, services and directorates who use tests provided by the supplier Pearson Clinical Assessment UK.

## 4. STORAGE

**4.1** Test manuals, stimuli and incomplete / unused Pearson test forms in paper format must be kept in a secure, locked, storage area with appropriate role based access controls (RBAC) in place.

Once completed test forms must be securely stored in a secure, board approved repository.

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This can be either a) Electronically  
b) Physically

**4.2 Electronic Storage** Completed tests should be stored in an appropriate electronic document management system that has RBAC in place. There must be a full audit trail available that can be used to evidence all access. An example of a suitable repository would be SCI Store.

**4.3 Physical Storage when completed** Completed test forms should be stored within the appropriate clinical record.

## 5. ACCESS

**5.1** Access to Pearson documents and test forms (used and unused) should be restricted to those qualified to do so or those with a legitimate business interest in doing so i.e. administrative staff retrieving for clinical use or subject access request.

## 6. PROCUREMENT

**6.1** Pearson Clinical Assessment (and other publishers) require that test materials are sold only to those holding the necessary qualifications for each test type. These credentials will have to be demonstrated by the consumer to the supplier.

However, it is permissible for administrative staff (secretary, procurement officer etc) to purchase on behalf of a qualified user. To do so, the clinician is required to register online with Pearson Assessment linked to the organisation they belong to i.e. NHS Dumfries and Galloway. The administrator can then select the relevant qualified user who asked for the order. This would usually be a service manager or Psychology Director, with responsibility for promoting staff training, knowledge and compliance with appropriate test use and storage.

For more information please see Pearson's website:

[Purchasing on behalf of a qualified user \(pearsonclinical.co.uk\)](https://www.pearsonclinical.co.uk/purchasing-on-behalf-of-a-qualified-user)

To facilitate efficient procurement it is recommended that organisational accounts are setup as described: [Organisational accounts \(pearsonclinical.co.uk\)](https://www.pearsonclinical.co.uk/organisational-accounts)

## 7 Release of Test Materials to Third Parties/Data Subjects

**7.1** The release of full Pearson test materials is forbidden under their Terms and Conditions. Any release must redact all text except that which directly relates to

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the data subject i.e. their answers and demographics OR if fuller release is required a court order supplied and protection order in place as appropriate.

**7.2** If in any doubt clinicians and health records professionals must consult their local Data Protection Officer, Clinical Governance Lead. Complex or contentious requests may require consultation with the Central Legal Office (CLO)

### **7.3 Subject Access Requests**

A Subject Access Request (SAR) gives an individual (data subject) or someone authorised to act on their behalf (i.e. solicitor) the right under the terms of the Data Protection Act 2018 to request all personal information held about them by an organisation. It is a statutory obligation and includes completed Pearson Tests.

Information / documents relating to the patient or provided by the patient transcribed onto Pearson tests should be released in response to a SAR (providing the Harm and 3<sup>rd</sup> Party DPA stipulations are met).

Whilst the Copyright Act 1988, Chapter 3, Section 50(1) states that copyright does not apply to statutory obligations, article 15(4) Recital 63 of GDPR states that the processing of a SAR should not infringe on another's rights – this includes Trade Secrets.

Pearson also cite the Exam Script Exclusion within the Data Protection Act 2018 as rationale for not releasing the test material questions, scripts and guidance.

Additionally the Freedom of Information Scotland Act Section 33(1)(a)(b) provides an exemption to information release in relation to trade secrets and commercial interests.

With this in mind and in order to balance the rights of all parties – **if a SAR encompasses Pearson documentation then the documentation should have ALL set text (questions, guidance notes etc) redacted and only that which directly relates to the patient (their responses, demographics etc) provided to the subject.**

### **7.4 Access to Deceased Records**

Requests to access / obtain copies of a deceased individuals information do not fall under the terms of the Data Protection Act 2018, however, these requests should be handled similarly for ethical reasons and as such the guidance in section 5.1 relating to Subject Access Requests should be applied when processing ATD requests.

### **7.5 Court Order**

If requested under court order then the information must be released. Pearson request that should test materials be requested as part of or directly via Court Order that the court issue a Protective Order that prohibits any party from making copies of the materials.

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### 7.6 Police / Fiscal request

If the records are requested by the Police or by the Fiscal then this should be done using the appropriate request forms and citing the relevant legislative rationale for reason i.e. law enforcement purposes. Disclosure should not be made without consulting the appropriate clinical professional and consideration given to redaction as per section 5.1 before release.

### 7.7 Social Security Scotland (SSS)

Requests made under the auspices of SSS should be referred to the appropriate clinical professional and consideration given to redaction of test materials as per section 5.1 before release.

### 7.8 Complaints

Copies of completed tests can be provided to NHS complaints teams for the purposes of processing and evaluating the complaint but must not be disclosed outside the health board.

**If in doubt consult your board Records Lead or Data Protection Officer.**

## 8 Other

### 8.1 Second Opinion

Where a second opinion is requested it is acceptable for a completed tests to be provided directly by the first qualified professional to a second qualified professional.

### 8.2 Audio / Video Taping of Test Administration

This should never occur without explicit written permission from Pearson or relevant legal basis i.e. under court order.

## 9. Legislation and Guidance

British Psychological Society (BPS): Electronic Records Guidance, March 2019

British Psychological Society (BPS): Professional Practice Guidelines, 2017

Pearson Guidance: [Legal policies \(pearsonclinical.co.uk\)](https://www.pearsonclinical.co.uk/legal-policies)

Trade Secrets Legislation: [The Trade Secrets \(Enforcement, etc.\) Regulations 2018 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2018/56/section-1)

ICO exemptions: [A guide to the data protection exemptions | ICO](https://ico.org.uk/for-the-public/exemptions/)

DPA 18 Exam Test Exemption: [Data Protection Act 2018 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2018/12/section-10)

Copyright: [Copyright, Designs and Patents Act 1988 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/1988/42/section-17)

Freedom of Info Scotland:  
[BriefingSection33CommercialInterestsandtheEconomy.pdf \(itspublicknowledge.info\)](https://www.itspublicknowledge.info/BriefingSection33CommercialInterestsandtheEconomy.pdf)

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### 10. TRAINING AND SUPPORT

- 10.1 Directors/General Managers/Clinical Leads/Service managers should ensure that staff are aware of their record-keeping responsibilities and that adequate training provision is available to support staff with the lawful and efficient management of records within their area of responsibility. Processes and procedures should be developed and implemented within each directorate/service/department. Area key contacts are first point of contact for support and guidance.
- 10.2 All staff are required to complete mandatory training module NHS Dumfries & Galloway: Information Governance and Cyber Security, available on LearnPro, on induction to NHS Dumfries & Galloway and every year thereafter for the duration of their employment. This training includes elements of records management.
- 10.3 Further information, including minimum recommended retention periods for health records can be found in the [Records Management Code of Practice for Health and Social Care v4.0 \(digihealthcare.scot\)](https://www.digihealthcare.scot/Records-Management-Code-of-Practice-for-Health-and-Social-Care-v4.0)
- 10.4 Further support and guidance on health records management can be obtained by contacting NHS Dumfries & Galloway Health Records at [dg.healthrecords@nhs.scot](mailto:dg.healthrecords@nhs.scot) or Information Governance Team at [dg.dataprotection@nhs.scot](mailto:dg.dataprotection@nhs.scot)

### 11 MONITORING

11.1 The monitoring arrangements for this Policy are set out in the table below.

Element to be monitored	Monitoring Methodology	Reporting		
		Presented by	Committee	Frequency
Compliance with records management legislation	Review of any Datix incidents re. data availability, loss of records etc	Head of Information Governance	Information Assurance Committee	Quarterly
Compliance with PRSA 2011	Records Management Plan submissions to the Keeper	Head of Information Governance	Information Assurance Committee	Quarterly
			RMP	Annual PUR 5 yrly RMP submission
Appropriate access to records	Review of Datix reports (monthly)	Head of Information Governance	Information Assurance Committee	Quarterly

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### **12 EQUALITY IMPACT ASSESSMENT**

12.1 An Equality Impact Assessment was completed on 06/06/2025. The completion of an EIA will be considered during each subsequent review of this policy.

### **13 DATA PROTECTION AND CONFIDENTIALITY IMPACT ASSESSMENT**

13.1 A Data Protection Impact Assessment screening questionnaire was completed on 08/04/2025 and indicated that a full assessment is not a legal requirement for the development of this policy. The completion of a DPIA will be considered during each subsequent review of this policy.

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### 14. DOCUMENT CONTROL SHEET

#### 14.1 Document Amendment History

Version	Section(s)	Reason for update
0.1	ALL	To include NHSDG training/monitoring sections as per local Policy Management Policy

#### 14.2 Distribution

Name	Responsibility	Version number
Corporate Business Manager	Update policy register	
Information Assurance Committee	For consultation and comment	
Staff side representative	For consultation and comment	
Health & Social care leadership team	For consultation and comment	
BMT	For approval	

#### 14.3 Associated documents

NHS Dumfries & Galloway Confidentiality and Data Protection Policy
NHS Dumfries & Galloway Safe Information Handling Policy
Scottish Government Records Management Health & Social Care Code of Practice (Scotland) 2024
NHS Dumfries & Galloway Personal Data Breach Recording Procedure
NHS Dumfries & Galloway Confidential Waste Procedure