Scottish autism

Records Management Policy

Director Responsible Chief Executive Officer

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Approved by SMT

DOCUMENT HISTORY

Date	Author/Editor	Summary of Changes	Version No.
May 2010	Mandi Turner	New Policy	1
July-Sep 2013	Mandi Turner	Policy revision due. Updates around standardisation of approach; updates to retention schedule	2
July 2016	Mandi Turner	Interim review – full policy review will be undertaken in 2016/17 pending new regulatory requirements	3
Dec 2017	Mandi Turner	Review for compliance with GDPR. Update on storage supplier information	4

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CONSULTATION AND RATIFICATION SCHEDULE

Name of Consultative Body	Date of Approval
Board of Trustees	Aug 2016 (review not submitted for approval)
Senior Management Team	Feb 2018
Policy Subgroup	Jan 2018
Regional Managers Forum	Jan 2018
Struan Leadership Team	Jan 2018

CROSS REFERENCE TO OTHER POLICIES/STRATEGIES

This policy should be read in conjunction with:	Detail
Data Protection & Freedom of Information Policy	
Confidentiality Statement	
Attached guidelines and appendices	

EQUALITY & PRIVACY IMPACT ASSESSMENTS

KEYWORDS: archive, records, retention period, document storage, schedule

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1. POLICY STATEMENT

This policy outlines the policy and principles relating to management of all records across Scottish Autism (the organisation). This policy applies to paper and electronic records, including both original documents and reproductions.

All staff are required to ensure that necessary records and documents are adequately protected and maintained and to ensure that records that are no longer needed or are of no value are discarded at the proper time.

This policy has been drawn up taking into account legislative requirements, guidance from regulatory bodies, common practice and requirements as stipulated by our insurers.

2. KEY PRINCIPLES

The International Council on Archives (ICA) Committee on Electronic Records defines a **record** as, "recorded information produced or received in the initiation, conduct or completion of an institutional or individual activity and that comprises content, context and structure sufficient to provide evidence of the activity". ¹

All records have a life cycle:

Creation/ Use and Maintenance/ Storage/ Disposal or Permanent Storage

As a charity as well as a company limited by guarantee, Scottish Autism falls under regulation of both Companies House and the Office of the Scottish Charity Regulator (OSCR). We are also subject to the regulatory requirements of bodies such as Education Scotland, Scottish Social Services Council and the Care Inspectorate. Retention of specific records may be necessary to fulfil statutory or other regulatory requirements as well as requirements of our insurance providers. Records also provide evidence of events or agreements, meet operational needs and ensure preservation of events and items of historic value.

The records the organisation holds on service users are vital to support and enable them and their families. Staff have a duty to ensure that records are current, accurate and meet the requirements of our regulatory bodies.

Standardisation of approach is desirable and the organisation will work towards implementing a single range of recording formats (e.g. for service user records) as well as refining document storage methods/ archiving. Central guidelines on document format and content should be observed where applicable.

There are statutory requirements that cover the way many of the records of the organisation are handled, stored and disposed of. Some of the applicable legislation is as follows:

Limitations Act 1980
Employment Rights Act 1996
General Data Protection Regulation 2018 (GDPR)
Charities and Trustee Investment (Scotland) Act 2005
The Arrangements to Look After Children (Scotland) regulations 1996
Regulation of Care (Scotland) Act 2001

¹ www.ica.org

Companies Act 2006 Freedom of Information Act (Scotland) 2002

The list above is not exhaustive.

In the event of any possible or actual litigation, records likely to be affected must be protected from amendment or disposal until litigation or the threat of litigation has passed. Where a request for information has been received, relevant records must be protected from amendment or disposal until after the request has been met.

In some instances insurance requirements may exceed statutory or recommended retention times. An example of this is training records relating to protection of vulnerable adults and children. In Scottish Autism this would include CALM records, records relating to induction and Child and Adult Protection. Training records in general are subject to a retention period of termination of service + 6 years; however records specifically relating to protection of vulnerable groups training require to be kept for termination of service + 50 years by our insurers. This is to adequately protect the organisation in the unlikely event of future investigations.

Regular review of filing and archiving should be carried out in all areas to ensure that data is not stored for longer than necessary. Any records placed in archive or storage must have a 'destroy by' date. At or around that date, records should be reviewed and a decision made on whether to destroy or archive.

3. SCOPE

This policy applies to all staff of the organisation, as well as casual staff, agency staff, volunteers and consultants. All these groups need to be aware of confidentiality issues surrounding retention, access to and disposal of records. Anyone working with the organisation who records, handles, stores or otherwise comes across information requires to understand and apply the principles outlined in this and other relevant policies and is responsible for the safe-keeping of all records which they handle.

This policy applies to all records made in the day-to-day operational functioning of the organisation, whether electronic or paper.

The GDPR places statutory restriction on the use of personal information. Staff need to be aware of specific issues relating to retention of personal data, as outlined in the Data Protection and Freedom of Information Policy.

The Freedom of Information Act (Scotland) 2002) applies to educational activities at New Struan School, giving the public a right to access information held or published by the school. The legislation does not currently extend to the residences or the wider organisation.

4. RESPONSIBILITIES

Responsibilities of the Board

The Board is responsible for records management within the organisation and must ensure provision is made for any statutory or other requirements to be met. The Board must understand how records are managed across the organisation. Clear lines of accountability

must exist at Board level and throughout the organisation. Records management issues that could pose a risk should be reported to the Board, e.g. loss or misuse of data, serious non-compliance that has been escalated through Disciplinary process and has led to suspension or dismissal. Specific guidance is available in the Security Incident Procedures, which outline how data breaches are managed.

Responsibilities of the Relevant Director

Directors must ensure that staff in their area of responsibility understand and are compliant with records management policy and practice.

Responsibilities of Managers

Managers are required to ensure that all staff are aware of records management principles as it relates to their day-to-day workload. This includes:

- how to create records
- how to store records securely as appropriate
- how long to hold various records
- confidentiality and who may and may not have access to various records
- how records are transferred or shared
- when to dispose of records
- how to dispose of records appropriately

Responsibilities of staff

Staff are required to understand the types of records they manage and the appropriate usage, storage and disposal of these, as above. An element of records management should be included in the induction programme for new staff.

Appropriate training should be sought where required to assist staff and managers in fulfilling their duties under this policy.

5. POLICY REVIEW

This policy will be reviewed every three years or sooner if required.