

Archiving and Disposal of Records Procedure

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Procedure Details			
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Purpose

A variety of paper and other documents (i.e. records) are retained by Active Prospects relating to the organisation's activities and following the conclusion of support, employment relationships to comply with statutory and regulatory requirements, and recommended retention periods.

This procedure outlines procedures for the archiving and disposal of records and aims to ensure consistent and good practice in the management of records.

Records will be stored in a variety of formats, including:

- Paper
- Electronic folders/files/pages
- Emails
- Notebooks/Diaries
- Intranet pages
- Social media content

Related legislation

This includes:

- Data Protection Act 1988
- Health and Safety at Work Act 1974 and subordinate legislation
- Companies Act 1985, 1989, 2006
- Human Rights Act 1998
- Freedom of Information Act 2000
- Health and Social Care act 2009 (Regulated Activities)
- Care Homes Regulations 2001
- GDPR Regulations 2016

Procedure

1. Archiving

1.1 In line with good practice, managers are responsible for ensuring that records are audited at least on an annual basis to ensure these are up to date and in line with the principles of the Data Protection Act 1988. This applies to all records (i.e. paper and e records), including those stored on mobile communication devices or notebooks/diaries. All records must be archived and disposed of in line with agreed retention periods (see 3. Retention Periods).

1.2 No paper records over 2 years old should be stored in services. Service Managers are responsible for ensuring that paper records are archived in line with agreed retention periods, and stored and labelled correctly electronically.

1.3 Managers are also responsible for ensuring that records are audited on closure of a service or department and archived or disposed of in line with procedures.

2. Disposal of Paper Records not Requiring Retention

2.1 Confidential paper records not requiring retention, for example records containing personal or sensitive information must be placed in a confidential waste bag, which are available from Head Office. This includes confidential information stored in notebooks. Disposal of confidential waste bags is arranged on a regular basis by Head Office.

2.2 Non-confidential paper records should be recycled wherever possible.

3. 3. Retention periods)/Retention Periods

i. People We Support

Record	Retention Periods	Person Responsible
Medication Administration Records	8 years after last contact	Service Manager
Daily Diary Notes	8 years after last contact	Service Manager
Support Plans	8 years after last contact	Service Manager
Documentation, correspondence from other agencies.	While care delivery continues. Destroy on end of contract.	Service Manager
Records relating to offenders, ex-offenders, people subject to caution.	While care delivery continues. Destroy on end of contract.	
Risk Assessments	8 years after last contact	Service Manager
PEEPs (Personal Emergency Evacuation Plans)	8 years after last contact	Service Manager
Use of restraint or Deprivation of Liberty Safeguards (DoLS)	8 years after last contact	Service Manager
Tenancy agreements and records	6 years after termination of agreement	Director of Care
Benefit applications and records	2 years after application	Director of Care
Referral forms for individuals who were not supported by Active Prospects	6 months after closure of referral	QA and Referrals Manager
Residential care home inspection reports and registration certificates	6 years following end of management	Director of Care

NB: Exceptions:

- i. Records relating to children and young people (under 18) must be retained until the individual's 21st birthday, or for 8 years after the last contact
- ii. Records relating to individual's detained under the Mental Health Act must be retained for 20 years after no further treatment is considered necessary, or 8 years following their death.

ii. Health and Safety, Safeguarding and Risk Management Records

Record	Retention Periods	Person Responsible
Incident / Accident Reports and accident books and related investigation records	10 years after closure	QA and Referrals Manager
Formal complaints and related investigation records	8 years after resolution	QA and Referrals Manager
Informal Complaints	1 year after resolution	QA and Referrals Manager
Claims/Litigation and related records	10 years after resolution	Director of Care SHR BP
Risk Assessments (General)	3 years after event	SMT Lead/ Service Manager
Maintenance of premises, vehicles or other equipment	3 years	Director of Care, IT Manager, Service Managers, as relevant
Inspection/tests (e.g. Health and Safety, electrical, fire, water and other equipment, PPE, COSHH)	5 years after inspection/test	Director of Care
Storage and transport of medical gas	3 years	Service Manager

Asbestos/COSHH – exposure related health records, surveys, reports and plans	40 years from last action	Director of Care
Consultation with safety reps/committees	Permanently	Director of Care

iii. Employee Records

Record	Retention Periods	Person Responsible
Employee files and training records i. Managers and staff ii. Senior Management Team	6 years after termination employment Permanently	SHR BP
DBS (Disclosure and Barring Service) Certificates	HR only - Maximum 6 months where the information contained may impact on recruitment decision. Otherwise secure disposal on sight. Number only kept on Cascade.	SHR BP
Driving Licence, vehicle insurance, MOT certificate	Only year after expiry.	SHR BP
Medical assessments required under Health and Safety regulations	Permanently	SHR BP
Health and Safety training records	6 years after termination of employment	SHR BP
Unsuccessful applicants	Six months.	SHR BP

NB: Any Employee Records held by the Service Manager must be sent to HR on termination of employment.

iv. Financial Records

Record	Retention Period	Person Responsible
Audited Financial Statements	Permanently	Head of Finance
HMRC confirmation of charitable status	Permanently	Head of Finance
Customer (People we support) money records	6 years	Head of Finance
Loan agreements	12 years after last payment	Head of Finance
Bank records	6 years	Head of Finance
Purchase records, including i. Successful tenders/quotes ii. Unsuccessful tenders/quotes iii. Delivery notes iv. Purchase orders/credit and debit notes	6 years	i ii iii SMT Lead/Service Manager Head of Finance
Payroll records, including Expense Claims, Statutory Maternity Pay records, Sickness payments, National Minimum Wage records and time sheets, redundancy details and notifications, notices to employees.	6 years	Head of Finance
Cash records	6 years	Head of Finance/Service Manager

Tax , NI and VAT records	6 years	Head of Finance
Gift Aid records	6 years	Head of Finance
Accounting records	6 years	Head of Finance
Internal financial reports	2 years	Head of Finance
Pension Fund contributions, and scheme details	Permanently	Head of Finance
Vehicles – mileage records, MOT tests, registrations	2 years after disposal	Head of Finance
Rental and Hire Purchase agreements	6 years after expiry	Head of Finance

v. Corporate Records

Record	Retention Periods	Person Responsible
Policies and procedures		SMT Lead
Contracts, Licences and Agreements i. Contracts under seal ii. Other documents	12 years after completion 6 years	SMT Lead
Property i. Leases ii. planning permission and related records, disposal records` iii. surveys iv. title reports including searches etc. v. wayleaves, licences and easements vi. Grant agreements	Whilst owned 12 years after settlement 6 years Whilst owned Permanently	CEO
Service contracts	6 years after they cease.	SMT
Property Maintenance i. maintenance records ii. new development documentation	6 years. 12 years	Director of Care
Statutory Returns i. Declarations of interest ii. Other statutory returns	6 years Permanently	CEO
Governance records – Registration documentation Rules (original and current) Seal register Share Certificate Records Share register Annual returns Minutes Name change Board papers (not statutory but contains key information such as strategic plans, budgets, summary reports on key matters which are highly useful evidence) Declaration of interest (6 years) Board member application, DBS number and declarations (6 years after cease)	Permanently	CEO

4 Equality & Diversity Impact Assessment Summary

	AGE	DISABILITY	GENDER Reassignment	MARITAL STATUS	PREGNANCY & MATERNITY	RACE	RELIGION or BELIEF	SEX	SEXUAL ORIENTATION
Which of the following protected characteristics may be affected by this policy or procedure? <i>(please mark the relevant box)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other concerns (e.g. protected groups such as carers, young parents, women during pregnancy, young people living independently)	None								
Does this policy impact on: <i>(please mark the relevant box)</i>	Staff <input checked="" type="checkbox"/>	PWSs <input checked="" type="checkbox"/>	Relatives or Advocates <input checked="" type="checkbox"/>	Members of the Public <input type="checkbox"/>	External providers of services <input type="checkbox"/>				
Does your assessment show that this policy/procedure is affecting relations between different protected characteristics? <i>(please mark the relevant box)</i>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>			
If yes, can the adverse impact be justified on the grounds of promoting equality of opportunity for one group, or as part of a wider strategy of positive action in relation to particular groups?)	Not applicable								
Consultation What steps have been taken to ensure that the different protected groups have been consulted during the development of this policy/procedure?	Consultation with SMT, Information Governance Group and Service Managers								
Staff Development and Training Please list any staff development or training issues arising from this assessment.	All staff sign to confirm, they have read and understood the procedure on an annual basis.								
Change/Modification As a result of the Equality Impact Assessment, have any changes/modifications to this policy/procedure been made?	No								
Recommended Monitoring	3 yearly								