Scottish autistic PEOPLE

Records Management Policy

ARE VALUED

Director Responsible Chief Executive

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1. POLICY STATEMENT

This policy outlines the policy and principles relating to management of all records across Scottish Autism. 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 Scottish Autism retains on autistic people 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 Scottish Autism will work towards implementing a single range of recording formats (eg, Supported Individuals 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 Scottish Autism are handled, stored and disposed of.

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

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¹ www.ica.org

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 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 Scottish Autism in the unlikely event of future investigations.

Electronic records held on Microsoft Teams will be kept for the duration the Teams' Retention Policy states (Teams Retention Policy is held within Teams).

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 Scottish Autism, 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 Scottish Autism 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 Scottish Autism, whether electronic or paper.

The General Data Protection Regulation (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**

4.1 Responsibilities of the Scottish Autism Board of Trustees

The Board is responsible for records management within Scottish Autism and must ensure provision is made for any statutory or other requirements to be met. The Board must understand how records are managed across Scottish Autism. Clear lines of accountability must exist at Board level and throughout Scottish Autism.

Records management issues that could pose a risk should be reported to the Board, eg, 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.

4.2 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.

4.3 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

4.4 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.

DOCUMENT HISTORY

Date	Author/Editor	Summary of Changes	Version No.
May 2010	Mandi Turner	New Policy	1
Sep 2013	Mandi Turner	Furner Policy revision due. Updates around standardisation of approach; updates to retention schedule	
Jul 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
Aug 2019	Mandi Turner/ Helen Calley	Updates to archiving	5
Jul 2020	David Harkins/ Helen Calley	Updated wording within policy document, Records retention schedule updated	6

Please note that the only valid version of the policy is the most recent one. Whilst this document may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of this document are not controlled. As a controlled document, this document should not be saved onto local or network drives but should always be accessed from the intranet.

CONSULTATION AND RATIFICATION SCHEDULE

Name of Consultative Body	Date of Approval
Board of Trustees	8 th December 2020
Senior Leadership Team	27 th November 2020
Policy Group	31 st July 2020

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	
Risk Management Policy	

EQUALITY & PRIVACY IMPACT ASSESSMENTS

Log Number: 2020/29	Date completed: 28 th August 2020
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KEYWORDS

Archive, records, retention period, document storage, schedule