



Corporate Records Retention and Disposal Policy

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Corporate Records Retention and Disposal Policy

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1.0 Introduction

NHS Ayrshire & Arran (NHS A&A) is committed to having an organised and planned approach to the way it manages its data, information and records. This includes the efficient storage and retrieval of records, and the appropriate and effective disposal of redundant records, in all formats.

This policy outlines the retention schedules for corporate records and the process for the appraisal and disposal of these records once they reach the end of their business use. It is important that records are managed in accordance with this policy to ensure business needs are met and compliance with legislative/ regulatory requirements.

This policy does not address health records. Instructions on retention and disposal of health records can be found in NHS Ayrshire & Arran's Operational Procedure for the Destruction of Personal Health Records.

2.0 Purpose

The purpose of this policy is to:

- ensure NHS Ayrshire & Arran complies with its statutory obligations under the Public Records (Scotland) Act 2011, Freedom of Information (Scotland) Act 2002, Environmental Information (Scotland) Regulations 2004, Inquiries Act 2005 and Data Protection Act 2018.
- provide staff with a clear and precise framework outlining the minimum retention periods of corporate records and the process for disposal of these records at the end of their business use / retention period.
- provide a practical step-by-step guide on how to appraise and dispose of records, both electronic and paper.
- ensure that the organisation retains the information which it is required to for accountability, legal or reference purposes.
- detail issues which must be considered when deciding whether to dispose of records.
- prevent unnecessary retention of documents, to help reduce costs associated with the physical and electronic storage of information.

3.0 Scope

This policy applies to all staff (management, clinical and administrative) who create, use and receive corporate records in any format, including, but not limited to

- paper/manual records;
- electronic records;
- scanned records;
- emails;
- removable media.

4.0 Definition of Terms

Appraisal

Appraisal is the examination of records to determine whether they should be destroyed, retained for a further period, or transferred to an archive. Where it is not possible to determine whether the records can be disposed, they can be scheduled for review at a later date.

Corporate Record

A corporate record is data and information created, received, and maintained as evidence and as an asset by an organisation or person, in pursuit of legal obligations or in the transaction of business.

Data Cleansing

Data cleansing is a process to review documents and records to determine whether they are still required for business operational reasons or whether they can be disposed.

Destruction

Destruction is the process of deleting or destroying records beyond any possible reconstruction.

Disposal

Disposal is the process of implementing appraisal decisions and undertaking the destruction of a document(s) or moving a document(s) to long term storage.

Redundant Information

Redundant information is information which is no longer required to be kept by the organisation for business or legislative requirements and may include for example, duplicate records, draft versions or documents of minor importance.

Retention

Retention is the continued storage of a record(s).

Retention Period

Retention period is the amount of time that records must be stored for before their disposal.

5.0 Roles & Responsibilities

Under the Public Records (Scotland) Act 2011 (PRSA) all NHS employees are responsible for any records that they create, receive or use in the course of their duties. Any corporate records created by an employee of the NHS are public records and may be subject to both legal and professional obligations.

The Chief Executive: has overall responsibility for records management in NHS Ayrshire & Arran. As accountable officer, they are responsible for the management of the organisation and for ensuring appropriate mechanisms are in place to support service delivery and continuity. Records Management is key to this as it will ensure appropriate, accurate information is available when required.

Directors and Senior/Departmental Managers: have overall responsibility for the management of records generated under their remit of responsibility in compliance with NHS Ayrshire & Arran's records management policy. They are responsible for ensuring that they are aware of their personal responsibilities for records management and for ensuring that their staff are aware of this policy and their individual responsibilities. This includes covering records management in local induction programmes, personal development plans and identifying and meeting training needs.

Corporate Records Manager: has responsibility to provide advice and support to all service or functional areas throughout NHS Ayrshire & Arran, on all matters relating to corporate records management to ensure measures are in place to support organisational functions and compliance with the legislation which the organisation is subject to.

Records Management Champions: are responsible for promoting good records management within their Directorate, raising awareness of policies, procedures and guidelines in relation to corporate records management and encouraging staff within the Directorate to participate in corporate records management training. They will monitor the implementation of this policy and will retain the master copy of the Directorates Retention & Disposal Register.

All Staff: have responsibility for managing records, ensuring records are retained and disposed in line with this policy and that good practice is maintained throughout the organisation. Staff should have a clear understanding of what information is stored within their business area and regularly review this policy and related documents, to ensure they are aware of their individual responsibilities.

6.0 Retention and Disposal of Records

6.1 Retention Periods

NHS Ayrshire & Arran staff must implement effective appraisal of corporate records to ensure that they are retained only for as long as they are required. The retention periods for corporate records have been outlined in the Scottish Government's Records Management Code of Practice for Health and Social Care 2024 and can be found in Appendix 1 of this policy. Retention schedules are an essential component of efficient and effective records management and must be consistently applied by NHS Ayrshire & Arran staff.

Poor management of records affects efficiency, uses up valuable storage space and incurs unnecessary costs. It also imposes a risk when it comes to the organisation's compliance with legislation, specifically the following acts:

- Public Records (Scotland) Act 2011
- Freedom of Information (Scotland) Act 2002 / Environmental Information (Scotland) Regulations 2004
- Data Protection Act 2018
- Inquiries Act 2005

Retaining personal data within records for longer than is necessary eg longer than the organisation has a justifiable purpose for does not comply with principle e) of Data Protection legislation.

Deleting records prior to their retention date or when investigations/public inquiries have been established could breach the organisation's statutory or regulatory requirements e.g. Inquiries Act 2005.

In cases where a record is held jointly by health professionals and by social care professionals, the record should be retained for the longest period for that type of record, i.e. if social care has a longer retention period than health, then the record should be kept for the longer period.

6.1.1 Duplicate Records

Retention periods apply to the official/master copy of the records. Copies of records are not usually required to be retained in line with the original retention period. They may be able to be held for a short period of time and disposed of once the business purpose for the record has ended e.g. copies of meeting papers, copies of organisation wide communications. They are not usually required to be retained in line with the original retention period. Retention of duplicate copies of records should be avoided, unless they fall into the category of legitimate duplication as described below.

There are some circumstances where it would be appropriate to hold a copy of a record within another record collection and this is known as **legitimate duplication**. Legitimate duplication tends to occur where a record requires to be held in a file as evidence (generally for an investigation or action plan). The record should then be retained for the retention period of the record collection it forms part of as evidence.

For example:

As part of a significant adverse event review the following documentation may be collected by the review team:

- Cleaning schedules from week of incident (retention period: three years)
- Duty roster from week of incident (retention period: six years)
- Clinical protocols in place at time of incident (retention period: 25 years)

These documents will be copies of the original and all have their own retention period. However as they now form part of another record, this is legitimate duplication and they should be stored for the retention period of the significant adverse event review, which is permanent.

Where duplicate copies of records are held they should be marked as a duplicate and should identify the original owning department to prevent being used as a master record in error.

6.2 Appraisal & Disposal

The decision to retain or dispose of a corporate record takes place in a document's life cycle, once the document has fulfilled its business requirements and is no longer maintained and used. The purpose of the appraisal process is to ensure the records are examined at the appropriate time by the appropriate person to determine whether or not they require to be:

- retained for a longer period;
- transferred to archive;
- destroyed

In order for staff to be clear on what time periods records require to be held for, organisations should have a records retention schedule outlining the time period which each record should be retained for – see appendix 1 for NHS Ayrshire & Arran's.

All disposal decisions must be recorded in NHS Ayrshire & Arran's Retention & Disposal Register, Appendix 2 showing:

- a list of the records disposed/destroyed, including dates;
- reference to the disposal decision to destroy the record(s);
- the name and designation of the senior manager authorising the disposal/destruction;
- evidence of destruction e.g. a certificate of destruction from an external contractor where applicable, or details of method and place of destruction together with name, designation and signature of staff carrying out the destruction.

Disposal registers are an important part of accounting for the legitimate absence of records/information under FOISA. Demonstrating to requesters, the Information Commissioner or the Information Tribunal that disposal decisions have been made and implemented following due process will defend legitimate public sector records management activity from undue criticism under the FOISA legislation. Retention & Disposal Registers must be kept by the organisation permanently.

6.2.1 Retain

Records may require to be retained beyond their business use for legislative, regulatory and/or accountability reasons in line with the retention periods listed in Appendix 1. In some cases information/records may even need to be retained beyond the record retention date. For example information/records may need to be retained for longer than the retention period if:

- it is subject to a request for information under the FOISA;
- it is subject to a Subject Access Request under Data Protection Legislation;
- it forms part of a litigation case;
- it forms part of an incident investigation;
- it forms part of a staff investigation case;
- it forms part of a national enquiry*
- changes are made to the regulatory or legislative framework.

However decisions to keep records beyond the stated periods must be justified and where this involves personal or patient information, full cognisance must be taken of Principle e) of Data Protection legislation which states that 'personal data should be kept in a form which permits identification of data subjects for no longer than is necessary for the purposes for which those data are processed'. When assessing whether records or information is required to be retained for a longer period than the minimum stated retention period, consideration should be given to extra storage costs, risks of theft, misuse, disclosure, legal discovery, and non-compliance fines.

Staff should notify the Corporate Records Management Champion if they have been notified of or have reasonable foresight of a future litigation, investigation, request for information under legislation as this could require records to be held beyond the minimum identified retention period. The Records Management Champion will use this information and log details of the records which have been selected for extended retention.

*** Due to the establishment of a UK and a Scottish Covid Inquiry, staff must retain records which could be considered as evidence of the organisation's response to the pandemic. Records created, received or updated after 1 January 2020 which relate to operations, processes or procedures which were put in place in response to the pandemic must be retained and protected from alteration. It is an offence under Section 35 of the Public Inquiries Act 2005 to destroy or alter any information relating to the Inquiry.**

Some records, for example stationery invoices, will be able to be disposed of via normal processes however any piece of information which would be deemed the master copy and could be required as evidence must be retained. Example of records which may require to be changed is follows:

- **Minutes of Meetings**
- **Staff/patient/public Communications**
- **Policies/Procedures/Guidelines**
- **Risk Assessments for staff, social distancing, physical areas, PPE**
- **Infection Control Procedures**
- **Health & Safety Procedures**
- **PPE ordering, distribution and contract records**
- **Vaccination programme records**
- **Track and Trace records**
- **Frontline services staff rotas**
- **Cleaning schedules**
- **Incident management files**
- **Complaint files**

***A Scottish Government letter dated 17 December 2025 from Director General Education and Justices advised that due to significant parliamentary interest in the issue of child sexual exploitation, including grooming gangs both historically and currently. Parliament has been updated on actions being undertaken in response too concerns about child sexual exploitation. A national review of evidence on the operation of grooming gangs in Scotland is**

to be undertaken by independent inspection bodies (Care Inspectorate; Inspectorate of Constabulary; Inspectorate of Education; and Healthcare Improvement Scotland).

In addition, Police Scotland are undertaking an audit of cases of alleged sexual exploitation since 2013, which involved one or more victims aged under 18 and two or more suspects. The Scottish child Abuse Inquiry has also begun Phase 10 of its investigations which is considering ‘the provision of residential care for Children and young people in establishments run by local authorities and establishments run by voluntary providers used by local authorities to place children in Care’.

The letter asks that Health Boards ensure that documentation that may be relevant to the national review by the Inspection bodies into the previous handling of allegations of actions by grooming gangs in Scotland are retained, Examples that are included in the letter are:

- **Operational records**
- **records containing complaints**
- **records regarding misconduct matters against staff**

6.2.2 Transfer to External Archive (Ayrshire Archives)

If the records are no longer required for business purposes however are recognised as having historical value or require to be retained permanently, they should be transferred to an archive for permanent preservation.

NHS Ayrshire & Arran has a Memorandum of Understanding with Ayrshire Archives which details the agreement to transfer significant and historical records from NHS Ayrshire & Arran to Ayrshire Archives for cataloguing and permanent storage. Records agreed for transfer to Ayrshire Archives should be transferred in a secure and confidential manner and must be recorded on the Corporate Records Retention & Disposal Register. Staff must contact the Information Governance Manager (Corporate Records) to facilitate this transfer.

Documentation on records transferred to the archive must be completed, showing:

- a list of the records transferred, including transfer dates;
- reference to the Retention & Disposal Register setting out the disposal decision to transfer to the archives;
- the name, designation and signature of the senior manager authorising the transfer;
- evidence of receipt by the archive.

Documentation of transferred records must be kept by NHS Ayrshire & Arran permanently. Records which have been transferred to the archive must be recorded as such.

6.2.3 Destroy

Records should only be destroyed if they are no longer required for business purposes and have reached the retention period which is in line with any legislative or statutory obligations**.

Records should only be destroyed as per this policy and in accordance with the retention periods listed at Appendix 1. It can be a criminal offence to destroy information which has been requested under data protection, freedom of information or public inquiries legislation. Therefore NHS Ayrshire & Arran needs to be able to demonstrate clearly that records destruction has taken place in accordance with proper retention procedures.

Many NHS records contain sensitive and/or confidential personal or business sensitive information and their destruction must be undertaken in a secure and confidential manner to ensure there are safeguards against accidental loss or disclosure and this is maintained at all times. The method of transfer of records containing personal information for destruction must comply with the "NHS Ayrshire & Arran Secure Storage Communication and Transportation of Personal Information Policy".

A decision for destruction of records must be made by a senior manager who has knowledge of the relevant business area to which the records relate, in conjunction with the Records Management Champion.

**** As noted in section 6.2.1, a UK and a Scottish Covid Inquiries have been established. It is an offence under Section 35 of the Public Inquiries Act 2005 to destroy or alter any information relating to the Inquiry. Therefore staff must not destroy records which could be considered as evidence of the organisation's response to the Public Inquiries. Records created, received or updated after 1 January 2020 which relate to operations, processes or procedures which were put in place in response to the pandemic must be retained and protected from alteration.**

**** As also noted at 6.2.1 at present it is unknown what documentation will be required as part of the Protecting Children from Harm Review and further clarification will be provided by the independent inspectorates as they develop the scope and focus of their work therefore if your area potentially has records that could contain information in relation to this please do not destroy them until further notice.**

6.3 Appraisal & Disposal Process (Data Cleanse)

The aim of data cleansing is to identify records which are still required for business operational reasons and to remove records that are redundant.

Before starting any data cleansing exercise, the first step is a discussion with the Records Management Champion on how data cleansing will be completed in a business area. Each business area will need to identify who is responsible for authorising the disposal of corporate records from departmental filing systems, both electronic and paper.

It is important to remember that the initial data cleansing exercise is likely to be time consuming, and it may be difficult to review each document in a folder. To make this easier, data cleansing can be undertaken at folder level rather than by individual

documents. If data cleansing is completed on a regular basis, the process should become less time consuming and therefore manageable as a routine administrative task.

The process map in Appendix 4 provides a step-by-step guide on how to complete a data cleansing exercise on a folder, some key points to remember:

1. Do not dispose of any information without the authorisation of your Line Manager/Records Management Champion;
2. Ensure that you are familiar with this policy and corporate record retention periods prior to carrying out a data cleanse;
3. Ensure you are familiar with the records within the folder/folder collection;
4. Review the folder for duplicate documents e.g. you may hold a copy of minutes for a meeting that you attend, but you do not hold the official/master record; the master record is held by the meeting secretary/chair. In some cases, business areas may decide to keep a duplicate set for a short period of time, for reasons of convenience however this does not need to be kept for the retention period. Copies of organisational policies should not be retained within your business area, unless your business area owns and maintains that policy. It is important to remember that there is only a business requirement to hold one official record set; therefore all duplicate copies can be disposed of.
5. If **unapproved** draft documents e.g. reports have been superseded then they can be destroyed. Always clarify with your Line Manager if you are unsure whether these documents can be removed from the filing system. NB previously **approved** versions of policies, guidelines, training etc must be kept in line with their retention period.
6. Identify documents which are of short term value or of minor importance that are no longer required to be kept. These are documents that are used for a short period of time to assist with day-to-day business, but are not classed as a corporate record, and not listed in Appendix 1, for example
 - Duplicate copies of meeting minutes;
 - Duplicate copies of reports;
 - Draft documents;
 - Meeting arrangements;
 - Room bookings;
 - Car parking requirements;
 - Catering arrangements for meetings;
 - Reference notes;
 - Newsletters;
 - Check lists;
 - Workload plans;
 - Registers compiled for temporary purposes;
 - Distribution lists.
7. Records Management Champions will provide advice on additional documents specific to a department that may be classed as short term value or of minor importance. If these documents are no longer required they can be disposed.

8. It is important to identify if documents contained within the folder have an expired retention period. Appendix 1 provides the retention periods for specific records that NHS Ayrshire & Arran must retain for statutory and regulatory purposes. Decisions to keep records beyond the stated periods must be justified due to a clear business need and in accordance with Data Protection Legislation (see section 6.2.1). Consideration should also be given as to whether the document has historical value.
9. It is a requirement under the Freedom of Information (Scotland) Act 2002 that organisational records listed within a retention schedule (Appendix 1) must be registered when disposed. Therefore, records that are to be disposed of in accordance with the policy must be recorded on the NHS Ayrshire & Arran Corporate Record Retention and Disposal Register. Once you have completed the register this should be forwarded to your Records Management Champion, who will collate these on a departmental basis.
10. Data cleansing should be an ongoing process, and should become part of your day-to-day management of your working records. It is best practice to remove duplicate, short term value or records of minor importance as soon as they are no longer required. This will assist in minimising the length of time spent on a full data cleansing exercise in the future.
11. It is recommended that a full data cleansing exercise is undertaken within your business area annually. This will help to ensure that you only hold records in accordance with this policy.

6.4 Storage

The transfer of records to long term storage should only be considered for records which have long retention periods and are not suitable for transfer to a designated place of deposit.

6.4.1 Paper Records

Where paper records are retained, they should be boxed and clearly labelled (Appendix 3) showing the type of record stored, the date of storage and the review/destruction date, where appropriate.

Paper corporate records should be stored in a secure central location for each department/directorate which should allow for the timeous retrieval of records at any given time and is safe from unauthorised access. This will enable the original record to be easily traced and located if required and will help to maintain its authenticity and integrity. The storage area should be a clearly defined area allocated to the storage of records for that particular department or directorate which senior managers have an awareness of. Paper corporate records shouldn't be stored disparately across the organisation as this increases the risk of them not being managed under the appropriate corporate records policies and procedures. The storage conditions should take account of the nature of the media, the retention period and importance of the records to the organisation. The accommodation should comply with health and safety requirements and have proper environmental controls and adequate protection against fire, flood and theft.

Documents of historical importance must not be destroyed and should be annotated clearly to that effect. Consideration should be given as to whether these documents should be transferred to Ayrshire Archives.

For reasons such as business efficiency and/or to address problems with storage space, staff may consider the option of scanning paper records into electronic format.

6.4.2 Electronic Records within network Drives

Electronic records should be stored in a suitable location in corporate systems or Shared Drive on one of NHS Ayrshire & Arran's servers. Electronic master copies of the NHS Ayrshire & Arran's corporate records must not be stored on PC/laptop (C:\ drives) or within staff's personal drives (H:\drives).

They should be clearly named in line with NHS Ayrshire & Arran's Corporate Records Naming Convention and Version Control Guideline to ensure that a consistent approach to naming is undertaken within all areas of the organisation to aid in the management of records.

6.4.3 Electronic Records within Systems

The design and configuration of information architecture within any electronic systems managing NHS Ayrshire & Arran data and information should ensure that the information within them can be efficiently retrieved by those with a legitimate right of access. The information and data held on these systems will form records and therefore these systems should also be managed in line with this policy and the organisation's retention schedule.

Where records in digital systems require to be retained long term, this could require moving the records from a legacy system into a supported platform. When moving digital records, there can be a greater risk to the integrity of the records than leaving it in situ. This should be considered and file fixity checks carried out for integrity and authenticity of records.

6.5 Orphan Data:

In the case of records that appear to have no owner, e.g. on a shared drive, and the person who created the records has since left; the responsibility for the management of these records reverts back to the business area Department Manager or Director.

Also it is the responsibility of the Department Manager to identify, as part of an employee's exit procedure, whether there are any records which were stored in the employee's email account, personal drive (H:\ drive) or filing cabinet/drawer which require to be appraised and transferred securely to the requisite drive and any non-work related records disposed of.

7.0 Related Documents

- Corporate Records Management Policy
- Corporate Records Naming Convention and Version Control Guideline
- Corporate Records Electronic Storage Guideline

- Corporate Records File Plan Guidance
- Email Management Policy and Best Practice Guidance
- Secure Storage Communication and Transportation of Personal Information Policy

8.0 References & Bibliography

- Records Management Code of Practice for Health and Social Care (Scotland) 2024
- NHS National Services Scotland Data Cleansing Guidelines v1.1

9.0 Appendices

- Appendix 1 – Corporate Records Retention Schedule
- Appendix 2 – Corporate Records Management Retention & Disposal Register
- Appendix 3 – Corporate Records Storage Label
- Appendix 4 – Data Cleansing Process Flowchart
- Appendix 5 – Consideration Checklist for Records without Retention Periods

Appendix 1 - Corporate Records Retention Schedule

This retention schedule has been primarily adopted from the Records Management Code of Practice for Health and Social 2024 however the retention periods have been adapted in order to suit local department needs.

This schedule sets out recommended periods for which the various corporate records created within NHS Ayrshire & Arran or predecessor bodies should be retained (in line with the principles of the Data Protection Act 2018), either due to their ongoing administrative value or as a result of statutory requirement. Records are listed alphabetically within each record category, e.g. financial, human resources. The retention schedules apply to all the records concerned, irrespective of the format (e.g. paper, databases, emails, photographs, removable media) in which they are created or held.

NHS Ayrshire & Arran employee's must review their corporate records, in line with this retention schedule to determine whether the records require to be retained for longer due to for example, business purpose, investigative purposes etc, whether records are to be selected for permanent preservation or whether destroyed or retained for research or litigation purposes.

Whenever the schedule is used, the guidelines listed below should be followed:

- The retention periods in this schedule must be adopted. However, departmental business requirements or risk analysis may require some types of record to be kept for longer.
- Retention periods should be calculated from the trigger period. Where this is noted as the end of a year, it should be calculated from the end of the calendar or accounting year following the last entry on the document.
- The provisions of the Data Protection Act 2018 and the Freedom of Information (Scotland) Act 2002 and Inquiries Act 2005 must be observed.
- Decisions should be considered in the light of the need to preserve records that may be in the substantial public interest or in relation to research purposes. This applies to records whose use cannot be anticipated fully at the present time, but which may be of value to future generations.
- Where the type of corporate record is not specifically listed within the Corporate Record Retention Schedule, departments will have to assess and consider how long it is necessary to retain that record, considering the retention period for the “best fit” record within the retention schedule, business need to retain and an assessment of risk or seek advice by emailing aa.corporaterecords@aapct.scot.nhs.uk

The retention schedule is detailed in a table which is split into five columns. In order to further support staff to use the retention schedule within NHS Ayrshire & Arran, three additional columns were added to provide further information. The purpose of the columns is as follows:

Column Header	Explanation
Ref	This is the reference number given to each record type in order to make it easier to direct staff to the appropriate record type and retention period.
Record Type	This column outlines the majority of the corporate record types used within NHS Boards in Scotland. The schedule has been split into NHS corporate business functions and the record types are listed alphabetically within these sections.
Retention Trigger	This is the event which triggers the start of a retention period. For example if the retention period is two years this column provides the indicator as to when the two year period starts, for example after the closure of an investigation or at the end of the financial year which the record relates to. In few instances is the trigger the date the document was created or modified, therefore attention must be paid to this column.
Retention Period	This column specifies the recommended/minimum period of time for which the particular type of record is required to be kept following the event trigger. This period of time is usually set either because of statutory requirement or because the record may be needed for administrative purposes during this time.
Citation/Notes	This column provides further information regarding the record type, trigger or retention period, for example: Whether there is associated legislation regarding the record type or whether the record type is likely to have long-term research or historical value.
Change from 2020	This column has been added within NHS A&A's schedule to make it easier for staff to identify where a change has been made from the previous schedule. This can also be cross reference from the table included in page 29-35.
Master Copy Holder	This columns outlines the department who should retain the master copy of the document for the full retention period.
Duplicate Retention Period	This column states how long it would be deemed appropriate for a department not listed in the master copy holder column to hold a duplicate. If there is uncertainty around whether a copy of the record is held by the department(s) listed in the 'master copy holder' column – advice should be sought from the department(s) or the Information Governance Manager (Corporate Records) prior to deleting a record before the specified retention period. NB staff should refer to section 6.1.1 for information on legitimate duplication.

NHS Ayrshire & Arran Corporate Records Retention Schedule 2024

taken from Section 7 Administrative Records Retention Schedule

[Scottish Government Records Management Code of Practice for Health & Social Care 2024](#)



Section Directory:

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- 6.4 Payroll
- 6.5 Procurement
- 6.6 Taxation

7.0 Workforce Management Records

- 7.1 Learning & Development
- 7.2 Management of Employees
- 7.3 Occupational Health
- 7.4 Recruitment

8.0 Digital System Records

- 8.1 System Development
- 8.2 System Management
- 8.3 System Security

The following sections can be found in the : [005 Operational Procedure for the Destruction of Personal Health Records](#)

1.0 Patient Health Records

- 1.1 Digital Patient Health Records
- 1.2 Core Records in Paper Format
- 1.3 Specialty Records in Paper Format

2.0 Clinical Records

- 2.1 Births, Deaths, and Adoption
- 2.2 Clinical Trials and Research
- 2.3 Prevention
- 2.4 Pathology
- 2.5 Patient / Clinical Management
- 2.6 Public Protection

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
3	Communications Records						
3.1	Engagement						
3.1.1	Campaign	End of campaign	3 years	- Relates to campaign workings i.e., adverts / documents / artwork / final outputs. - Consider transfer to the designated place of deposit. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 1.1.1	• Communications Department	12 months
3.1.2	Consultation Response	End of consultation	3 years	- Responses to external consultations.	Retention unchanged Moved from 1.3.1	• Chief Executive Office	12 months
3.1.3	Customer Engagement data	Date of publication	5 years	- Including statistics, trends, staff surveys and customer satisfaction data. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Trigger changed from completion of survey Moved from 1.4.1	• Department who collated the data (mainly (Nurse/HR/Public Health (Directorates)	12 months
3.2	Media						
3.2.1	Internal communications (significant)	Release date	6 years	- This refers to information circulated to all employees which is deemed by the author as significant. This does not cover all internal emails. Retention should be by the author / sender. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Press release and important internal communications now separated between 3.2.1 and 3.2.5 Moved from 1.5.3	• Communications Department	12 months
3.2.2	Media relations record	Date of publication / release date	5 years	- Final outputs. - Consider for transfer to the designated place of deposit. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 1.5.1	• Communications Department	12 months
3.2.3	Photograph, Video and Film (Corporate and Publicity)	Date of publication or last use	Minor - 10 years Significant - Permanent	- Consideration should be given to not retaining 'media related' personally identifiable photographs for significant periods of time. - Photograph, video and film which would be considered of historical significance should be kept permanently. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 1.1.5	• Communications Department • Medical Photography	12 months
3.2.4	Press cutting	Date of publication	Minor - 5 years Significant - Permanent	- Press cuttings which would be considered of significance would be considered for transfer to the designated place of deposit. If utilise a commercial electronic cuttings service, this record type will not need to be retained. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 1.5.2	• Communications Department	12 months
3.2.5	Press release	Release date	6 years	- Press releases may form a significant part of the public record of an organisation which may need to be retained. - Consider for transfer to the designated place of deposit. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Press release and important internal communications now separated between 3.2.1 and 3.2.5 Moved from 1.5.3	• Communications Department	12 months
3.2.6	Publication – major	Date published	Permanent	- Covers both paper and digital publications. Retain one set of records only – copies to be destroyed once business use concluded. - Consider for transfer to the designated place of deposit. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 1.1.6	• Communications Department • Library Services • Department who wrote the publication	12 months
3.2.7	Website/s, Intranet, Social Media	Date of creation	6 years	- See section 5.35.3 within the RM CoP for further information. - Consider for web-archiving (for example the web-archiving service provided by NRS).	Retention unchanged Now includes Intranet and Social Media Moved from 1.6.1	• Communications Department	12 months

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
3.3	Services						
3.3.1	Conference / Event Administration	End of Conference	1 year	- Includes proceedings, routine paperwork, attendance and presentations. - Organisations may wish to retain for longer for its own business purposes. - Significant national conference papers should be considered transfer to the designated place of deposit.	Retention unchanged Trigger changed from Destroy after conference if no longer required Moved from 1.2.1	• Conference organiser	N/A
3.3.2	Corporate Identity and Branding	Superseded	Permanent	- Consider transfer to the designated place of deposit.	Retention unchanged Moved from 1.1.2	• Communications Department	12 months
4	Governance Records						
4.1	Clinical						
4.1.1	Admission, transfer and treatment of patients – policy file	Superseded	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.5.1	• Department who owns/is responsible for document	12 months (unless not accessible elsewhere e.g. intranet/internet)
4.1.2	Clinical audit	Completion of audit	5 years	***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 7.2.3	• Department undertaking quality assurance audit • Department being audited	N/A
4.1.3	Clinical protocol	Once superseded	25 years		Retention unchanged Moved from 7.2.5	• Department who owns/is responsible for document	12 months (unless not accessible elsewhere e.g. Intranet/internet)
4.1.4	Clinical quality improvement project file	End of year which it relates to	10 years		New	• Department who owns/is responsible for document	12 months
4.2	Corporate						
4.2.1	Board and Sub-Committees Meeting minutes and papers	Date of creation	Permanent	- See 5.21 within the RM CoP for further information. - Main committees and sub-committees of NHS Boards and special Health Boards and other meetings of significance for legal, administrative or historical reasons. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.2.1	• Chief Executive Office	12 months
4.2.2	Board Arrangements	Date of creation	Permanent	- Documents describing terms of foundation / establishment and winding-up. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.7.1	• Chief Executive Office	N/A
4.2.3	Board Arrangements legally administered by NHS organisations – other documents	End of financial year	6 years		Retention unchanged Moved from 2.7.2	• Chief Executive Office	N/A
4.2.4	Board History or their predecessor organisations	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.2.6	• Chief Executive Office	N/A
4.2.5	Board Meeting (closed sessions)	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.2.2	• Chief Executive Office	12 months
4.2.6	Chief Executive record	Date of creation	20 years	- Review based on content. Emails and correspondence containing significant information / decisions should be retained and transferred to an appropriate archival facility if they are considered of archival interest. - Ephemeral communication saying "thanks" etc which should not be retained for 20 years. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 2.2.4	• Chief Executive Office	N/A
4.2.7	CNORIS Investigation File	Closure of file	10 years	- CNORIS - Clinical Negligence and Other Risk Scheme Risk Management and Insurance - the activity associated with the management of clinical negligence scheme.	New	• Finance Directorate • Litigation Manager	12 months
4.2.8	Complaint case file without litigation (adult)	Closure of complaint	7 years	- The complaint is not closed until all subsequent process have ceased. The file must not be kept on the patient file. A separate file must always be maintained.	Retention unchanged Moved from 2.3.1	• Complaints Department	12 months after closure of complaint

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
4.2.9	Complaint case file without litigation (child)	Closure of complaint	Until child is 19 or 7 years after closure of complaint whichever is later	- The complaint is not closed until all subsequent process have ceased. The file must not be kept on the patient file. A separate file must always be maintained.	Retention unchanged Record Type changed from Children and Young Adults Moved from 2.3.2	• Complaints Department	12 months after closure of complaint
4.2.10	Diaries – non-clinical	End of diary year	2 years	- Paper & electronic. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 1.1.3	• Diary owner	N/A
4.2.11	History of hospitals	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.2.7	• Chief Executive Office	N/A
4.2.12	Hospital service file	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.2.8	• Chief Executive Office	N/A
4.2.13	Insurance policy documentation / certificate of insurance	Date all obligations and entitlements concluded	Permanent	- Employers' liability insurance (CNORIS). - Prescription and Limitations (Scotland) Act 1973 and 1984. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.10.2 and 2.10.3	• Finance Directorate	N/A
4.2.14	Legal Case File (CLO)	Closure of file	10 years	- Covers property, contracts and employment legal advice files. - For contracts the retention is 6 years after expiry of the contract or 10 years after closure of file whichever is the latest.	New	• Litigation Manager	N/A
4.2.15	Legal Enquiry	Closure of file	5 years	- The Law Society of Scotland	New	• Litigation Manager	N/A
4.2.16	Litigation file / record (adult)	Date case settled or dropped	10 years		Retention changed from 7 years Moved from 2.7.3	• Litigation Services	N/A
4.2.17	Litigation file / record (child)	Date case settled or dropped	Until child is 19 or 10 years after case settled or dropped, whichever is later	- The Prescription and Limitation (Scotland) Act 1973 s17(3) and Aged of Legal Capacity (Scotland) Act 1991 s1 provide that in the case of injury suffered by a child time does not begin to run until they attain legal capacity which is 16. 16 years + 3 years limitation.	Retention changed from 7 years after case settled Moved from 2.7.4	• Litigation Services	N/A
4.2.18	Medico-Legal Request	Date of production of copy or provision of access	6 years	- Relates to legal requests for gaining access to or a copy of health records via: ▪ Court Requests ▪ Procurator Fiscal requests ▪ Solicitor requests under mandate. - For Data Subject Access Requests see 4.5.7 and 4.5.8.	New	• Health Records Services • Litigation Manager	N/A
4.2.19	Meeting papers and minutes	Date of meeting or end of programme / project which the meeting relates to	6 years	- See 5.21 within the RM CoP for further information. - Non board & board sub-committees (those not listed in the scheme of delegation). Covers departmental / team business meetings. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 2.2.5	• Department who owns the meeting (usually stored/saved by chair/meeting secretary)	12 months
4.2.20	NHS Circulars – Master Set	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.2.9	• Chief Executive Office	12 months
4.2.21	Public Inquiry record	When included as being relevant to Inquiry	Permanent	- Records collated to support Public Inquiry proceedings that include reports, (the final published version, draft / preliminary report), correspondence, legal guidance / instruction, restriction notices and rulings, all documents submitted to the Inquiry, establishment of Inquiry and litigation records. - National Archives guidance on retention schedule for the records of inquiries.	New	• Public Inquiry Team • Litigation Manager	12 months
4.2.22	Register of interests	Register entry date	6 years		Retention unchanged Moved from 2.2.3	• Chief Executive Office	12 months
4.2.23	Register of Seals	Date of creation	Permanent	- Register of documents to which the Board's seal has been affixed, in accordance with the decisions made by CEO / Directors. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.2.10	• Chief Executive Office	N/A
4.2.24	Whistleblowing record	Closure of investigation	7 years	- Review and investigation of Whistleblowing Concerns, in line with National Whistleblowing Standards.	New	• Chief Executive Office	N/A

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
4.3	Equality & Diversity						
4.3.1	Equality & Diversity Action Plan	Superseded	4 years	- Including for example British Sign Language action plan. - Equality Act 2010	New	• Patient Experience Team	N/A
4.3.2	Equality & Diversity Investigation File	Date of termination	6 years	- Investigation concludes, and actions is spent/retain current information throughout employment	Employment term removed from retention period Moved from 5.5.2	• O&HRD Directorate	12 months after closure of investigation
4.3.3	Equality & Diversity Monitoring Report	Superseded	4 years	- Including protected characteristic report, from employee and patient perspective. - Equality Act 2010	New	• Patient Experience Team	N/A
4.3.4	Language translation service record	End of year	3 years	***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 1.1.4	• Patient Experience Team	N/A
4.4	Incident, Risk, Health & Safety						
4.4.1	Accident / Incident / Adverse Event Report (Category II & III)	Closure of investigation	10 years - Adult 19 th Birthday - Child	- Includes final report, action plan and investigation documentation. - It may also include information in relation to the organisational duty of candour where this process has been triggered. - Prescription and Limitation (Scotland) Act 1973 - See 4.4.4, 4.4.8 and 4.4.9 for incidents concerning RIDDOR and / or COSHH. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention period for child changed from 25 th birthday Moved from 2.1.1	• Risk Management Team	12 months after closure of investigation
4.4.2	Accident / Incident / Significant Adverse Event Report (Category I) (Adult & Child)	Closure of investigation	Permanent	- Includes final report, action plan and investigation documentation. - It may also include information in relation to the organisational duty of candour where this process has been triggered. - Consider for transfer to the designated place of deposit.	Retention unchanged Adult & Child added to Record Type Moved from 2.1.2	• Risk Management Team	12 months after closure of investigation
4.4.3	Asbestos	Completion of monitoring or test	Permanent	- Includes: Asbestos Register, Equipment Monitoring, Testing and Record of Maintenance. - Where there are ongoing investigations and claims, the Health Board should retain the information until these are concluded. - Control of Asbestos at Work Regulations 2012.	Retention unchanged Moved from 3.1.1	• Estates Department	N/A
4.4.4	Control of Substances Hazardous to Health Regulation (COSHH) record	Date of last action	40 years	- Includes audit form, COSHH Documentation, Safety Risk Data, Risk Assessment, Control Measures. - Control of Substances Hazardous to Health Regulations 2002	Retention unchanged Moved from 3.3.3	• Health & Safety Department	N/A
4.4.5	HAV (hand, arm, vibration) logs	Date of termination	6 years	- Relates to ground maintenance machinery, for Health & Safety requirements. - Should be stored within individual's employee record.	New	• Clinical Support Services	N/A
4.4.6	Health & Safety record	Date of last action	10 years	- For documentation not related to COSHH. - Includes audit forms, safety risk data sheets, risk assessments and control measures. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	New	• Department undertaking health and safety checks/audits • Health & Safety Department	N/A
4.4.7	National Safety Alert	Date of creation	Permanent	- Covers Drug Alerts, Estates & Facilities Alerts, Safety Action Notices etc. Includes Alert and record of department response.	Retention unchanged Moved from 3.3.5	• Risk Management Team • Responsible Managers within departments	N/A
4.4.8	Reporting of Injuries, Disease and Dangerous Occurrences Regulations 2013 (RIDDOR) including Accident Register - Adult	Closure of incident / Date of last entry on register	10 years	- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013	Retention unchanged Moved from 3.3.6	• Health & Safety Department	N/A
4.4.9	Reporting of Injuries, Disease and Dangerous Occurrences Regulations 2013 (RIDDOR) including Accident Register - Child	Date of birth of child	19 years	- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013	New	• Health & Safety Department	N/A
4.4.10	Risk Register	Date risk removed from register	5 years	- Consider for transfer to the designated place of deposit. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 2.10.4	• Risk Management Team	N/A

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
4.5	Information						
4.5.1	Copyright / Patent / trademarks / intellectual property	Lifetime of patent or licence	6 years	- Records pertaining to the property of the NHS Board or a staff member employed by them at the point of creating the property.	Retention unchanged Moved from 2.4.1	<ul style="list-style-type: none"> Communications Department 	N/A
4.5.2	Data Breach Investigation Case Files	Closure of investigation	5 years	- If the files are part of an adverse event record, they should be retained based on their category rating (I, II or III). See 4.4.1 and 4.4.2	Retention unchanged Moved from 2.6.1	<ul style="list-style-type: none"> Information Governance Team Risk Management Team Where required within associated HR record 	12 months after closure of investigation
4.5.3	Data Processing Agreement	End of contract	5 years		Retention unchanged Moved from 2.6.2	<ul style="list-style-type: none"> Department who owns/is responsible for process/system Information Governance Team 	N/A
4.5.4	Data Protection Impact Assessments	End of lifetime of the system / process / procedure	5 years	***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 2.6.3	<ul style="list-style-type: none"> Department who owns/is responsible for process/system Information Governance Team 	N/A
4.5.5	Data Protection Privacy Notice	Superseded	5 years		Retention unchanged Moved from 2.6.4	<ul style="list-style-type: none"> Corporate – Information Governance Team Local – Department who owns/is responsible for process/system 	N/A
4.5.6	Data Sharing Agreements	Date sharing ceases	5 years	***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 2.6.5	<ul style="list-style-type: none"> Department sharing the information Information Governance Team 	N/A
4.5.7	Data Subject Access Request	Closure of request	3 years	<ul style="list-style-type: none"> Includes disclosure correspondence. Where redactions have been made it is important to keep a copy of the redacted disclosed documents or if that is not practical to keep a summary of the redactions. 	Retention unchanged Moved from 2.6.6	<ul style="list-style-type: none"> Lead department as follows: Corporate – Information Governance Team Health – Health Records Services Staff – O&HRD Directorate 	12 months
4.5.8	Data Subject Access Request appeal	Closure of appeal	6 years	- This file should include the original request file.	Retention unchanged Moved from 2.6.7	<ul style="list-style-type: none"> Lead department as follows: Corporate – Information Governance Team Health – Health Records Services Staff – O&HRD Directorate 	12 months
4.5.9	Freedom of Information (FOI) / Environmental Information Regulations (EIR) requests and responses files	End of calendar year	3 years	- Where redactions have been made it is important to keep a copy of the redacted disclosed documents or if that is not practical to keep a summary of the redactions.	Retention unchanged Moved from 2.6.9	<ul style="list-style-type: none"> Information Governance Team 	12 months
4.5.10	Freedom of Information (FOI) / Environmental Information Regulations (EIR) requests appeal file	Closure of appeal	6 years	- This file should include the original request file.	Retention unchanged Moved from 2.6.8	<ul style="list-style-type: none"> Information Governance Team 	N/A
4.5.11	Freedom of Information (FOI) Publication Scheme	Superseded	5 years		Retention unchanged Moved from 2.6.10	<ul style="list-style-type: none"> Information Governance Team 	N/A
4.5.12	Information Asset Register	Date of creation	Permanent		New	<ul style="list-style-type: none"> Information Governance Team 	N/A
4.5.13	Record Retention Schedule	Superseded	Permanent	<ul style="list-style-type: none"> UK National Archives guidance on Information Management Records. Consider for transfer to the designated place of deposit. 	Retention unchanged Moved from 2.6.13	<ul style="list-style-type: none"> Information Governance Team Health Records Services 	12 months (unless not accessible elsewhere e.g. intranet/internet)

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
4.5.14	Record Destruction Register / Disposal Certificate	Creation of register entry / certificate	Permanent	- UK National Archives guidance on Information Management Records. - Records of destruction of corporate and health records contained in this retention schedule, including digital records, Metadata, destruction stubs, records of clinical information held on destroyed physical media. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.6.11	• Each Directorate	N/A
4.5.15	Record Management Plan	Superseded	5 years	- This should include the plan, supporting evidence and progress update review reports.	Retention unchanged Moved from 2.6.12	• Information Governance Team	N/A
4.5.16	Record of Processing Activity	Date of creation	Permanent		New	• Information Governance Team	N/A
4.6	Quality Assurance						
4.6.1	Audit record (non-clinical)	End of statutory audit	3 years	- Original documents, management letters, reports. - A longer period may be required for investigate purposes.	New	• Department undertaking audit • Department being audited	N/A
4.6.2	Internal Audit Report (non-clinical)	End of statutory audit	3 years		New	• Department undertaking audit • Department being audited	N/A
4.6.3	Quality Assurance record (non-clinical)	End of year which it relates to	10 years	- Also see 4.1.2 for Clinical Audits.	Retention changed from 12 years Moved from 2.8.1	• Department undertaking quality assurance audit • Department being audited	N/A
4.6.4	Quality Improvement record (non-clinical)	End of year which it relates to	10 years	- Also see 4.1.2 for Clinical Audits.	New	• Department undertaking quality improvement works • Department supporting quality improvements	N/A
4.6.5	Quality Management System & Accreditation	Date of accreditation	8 years	- Includes for example QMS within Decontamination, Pharmacy, Laboratories. - ISO 13485, ISO 9001	New	• Department awarded accreditation	N/A
4.7	Strategy and Planning						
4.7.1	Activity Monitoring report	Date agreement ended	6 years		Retention unchanged Moved from 2.12.1	• Department who owns the report	12 months
4.7.2	Business Continuity Plan	Date superseded	5 years		Retention unchanged Moved from 2.10.1	• Resilience Team • Each department with a plan	12 months
4.7.3	Business Plan	Superseded	10 years	- Consider for transfer to the designated place of deposit depending on significance.	New	• Department who owns the plan	12 months
4.7.4	Strategic Plan	Superseded	Permanent	- Includes: Corporate Plans, Area Health Plans, Area Operational Plans, Local Development Plans, Mobilisation and Remobilisation Plan, Winter Plans. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.11.1	• Strategic Plans - Transformation & Sustainability Directorate • Other Plans – department who owns the plan.	12 months
4.7.5	Demographic and epidemiological database	Date superseded	20 years	- In accordance with general policies of NHS National Services Scotland Information Services, and any specific terms and conditions imposed by them in relation to particular data sets. - Anonymised survey data may be retained indefinitely if data quality and potential for future reuse justifies cost of migration / regeneration to new formats and platforms.	Retention unchanged Moved from 2.12.3 and 2.12.4	• Public Health Directorate • Department who owns the database	N/A
4.7.6	Epidemiological survey	Completion of survey	30 years		Moved from health records retention schedule. No previous ref number	• Department who carried out the survey	N/A
4.7.7	Nursing homes regulation record	Date of creation	Permanent	- Pre 1 April 2002: registration documents and building plans. The regulation of care services was taken over by the Care Commission on 1 April 2002. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.12.5	• Chief Executive Office	N/A
4.7.8	Policy, guidance and operating procedure	Superseded	Permanent	- This would cover all Board policies, regardless of the originating department. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 2.5.2	• Department who owns/is responsible for document	12 months (unless not accessible on intranet/internet)

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
4.7.9	Service development report	End of financial year	6 years		Retention unchanged Moved from 2.12.7	<ul style="list-style-type: none"> Department undertaking service development 	12 months
4.7.10	Service Planning (projects under £400,000)	Completion / abandonment of project	6 years	- For property / building projects – see 5 Estates and Facilities.	New	<ul style="list-style-type: none"> Department leading on service planning 	12 months
4.7.11	Service Planning (projects over £400,000)	Completion / abandonment of project	Permanent	- For property / building projects – see 5 Estates and Facilities.	New	<ul style="list-style-type: none"> Department leading on service planning 	12 months
5	Estates and Facilities Records						
5.1	Facilities Management						
5.1.1	Catering - Dietary requirements	Date of creation	2 years	- Including allergies, cultural and religious requirements, special diets (documentation specific to patients, will be held as part of patient record).	New	<ul style="list-style-type: none"> N/A 	N/A
5.1.2	Catering - Food Safety and food hygiene record	Date of creation	3 months	- Record that task has been completed. - Includes all temperature sheets. - Deviates from national retention guidance due to guidance from local Environmental Health Officers	New	<ul style="list-style-type: none"> Clinical Support Services 	N/A
5.1.3	Room Booking record	Date of check-out	1 year	- Includes meeting room booking, desk bookings and overnight accommodation booking.	New	<ul style="list-style-type: none"> Department who manages the rooms 	N/A
5.2	Maintenance & Equipment						
5.2.1	Cleaning schedule (clinical areas)	End of financial year	3 years	- Wards, A&E Trolleys, Rapid Response, Renal Chairs, Ward & Sanitary Areas. Held as evidence during audit / inspection. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 3.2.1	<ul style="list-style-type: none"> Clinical Support Services Clinical areas who have staff undertaking cleaning duties 	N/A
5.2.2	Cleaning schedule (non-clinical areas)	Date of creation	6 months	- Additional Touch Surfaces, Public Toilets, DSR - Windows Held as evidence during audit / inspection. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	New	<ul style="list-style-type: none"> Clinical Support Services 	N/A
5.2.3	Equipment – decontamination record	Date of decontamination	25 years		Retention unchanged Moved from 3.2.6	<ul style="list-style-type: none"> Clinical Decontamination Unit Departments carrying out decontamination process 	N/A
5.2.4	Equipment Inventories (non-current) of items having an operational lifetime of less than 5 years	End of financial year	2 years		Retention unchanged Moved from 3.2.3	<ul style="list-style-type: none"> Estates Department Medical Physics Department 	N/A
5.2.5	Equipment Manuals – operating policy and procedure	End of lifetime of equipment	2 years	***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 3.2.5	<ul style="list-style-type: none"> Department owning equipment 	N/A
5.2.6	Equipment monitoring / testing and maintenance record	End of lifetime of installation	2 years	- Monitoring, Testing, Inventory, Operating Procedure / Policy. Manual - lifetime of equipment / machinery the manual refers to. - Should be retained permanently if there is any measurable risk of a liability. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 3.2.2	<ul style="list-style-type: none"> Building maintenance – Estates Department Equipment – departments using equipment 	N/A
5.2.7	Flushing record (Legionella and other pathogens)	End of financial year	5 years	- Flushing of all outlets in unoccupied areas and little-used outlets and high risk areas including NNU, ITU, Oncology and Renal Dialysis Unit. - Legionnaire' disease: the control of legionella bacteria in water systems. Approved Code of Practice L8. 4th ed. 2013.	New	<ul style="list-style-type: none"> Clinical Support Services Departments carrying out flushing procedures 	N/A
5.2.8	Gritting Log	End of financial year	2 years		New	<ul style="list-style-type: none"> Clinical Support Services 	N/A
5.2.9	Maintenance request record	End of financial year referred to	2 years	- Covers paper log books and digital systems / databases.	Retention unchanged Moved from 3.2.4	<ul style="list-style-type: none"> Estates Department Medical Physics 	N/A
5.2.10	Pest Control record	End of contract	5 years	- Records of call outs and activity, evidence during audit / inspection / investigation.	New	<ul style="list-style-type: none"> Clinical Support Services 	N/A

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
5.3	Property and Land Management						
5.3.1	Building Project File (£400,000 and over)	Date of creation	Permanent	- Including abandoned or deferred projects. - Consider for transfer to the designated place of deposit.	Retention unchanged Amount changed from £250,000 Moved from 3.4.2	• Capital Planning Department	N/A
5.3.2	Building Project File (under £400,000)	Completion / abandonment of project	11 years	- NHS A&A increased retention from 6 years to 11 years as product warranties would extend to 11 years.	Retention unchanged Amount changed from £250,000 Moved from 3.4.3	• Estates Department • Capital Planning Department • Medical Physics	N/A
5.3.3	Building record	Lifetime of the building or disposal of asset	6 years	- Papers relating to occupation, plans and records of major building works. - Building plans and records of work are potentially of historical interest. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 3.4.1	• Property Services • Capital Planning Department • Estates Department	N/A
5.3.4	Capital charges data	End of 5 year evaluation term	3 years		Retention unchanged Moved from 3.4.4	• Property Services	N/A
5.3.5	Contaminated Land record	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 3.4.6	• Property Services	N/A
5.3.6	Custody and transfer of keys record	Date key returned	2 years		Retention unchanged Moved from 3.4.12	• Capital Planning Department	N/A
5.3.7	Environmental Information (e.g., Environmental reports)	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 3.4.8	• Estates Department • Property Services	N/A
5.3.8	Green Code	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 3.4.9	• Estates Department	N/A
5.3.9	Property performance record	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 3.4.10	• Estates Department • Property Services	N/A
5.3.10	Property strategy	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 3.4.11	• Property Services	N/A
5.3.11	Site Maps	Date of creation	Permanent	- Duplicate site maps are not covered by the requirement to be retained permanently e.g. copies held by CLO. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 3.4.13	• Property Services	N/A
5.3.12	Sustainability record	End of financial year	6 years		Retention unchanged Moved from 3.4.14	• Estates Department • Public Health Directorate	N/A
5.4	Property Transactions						
5.4.1	Property and Land lease contract / agreement	Date contract ended	6 years	- Including non-sealed (property) on termination.	Retention unchanged Moved from 3.5.7	• Property Services	N/A
5.4.2	Property and Land purchase and sale record —completed	Date of creation	Permanent	- Dossiers which include maps, surveys, registers etc. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 3.5.4	• Property Services	N/A
5.4.3	Property and Land purchase and sale record – negotiations not completed	Date negotiations concluded or abandoned	6 years		Retention unchanged Property added to Record Type Moved from 3.5.5	• Property Services	N/A
5.4.4	Property and Land terrier	Date of creation	Permanent	- NHS premises site information. - Consider for transfer to the designated place of deposit.	Retention unchanged Land added to Record Type Moved from 3.5.12	• Property Services	N/A
5.4.5	Property decommissioning record	Date of decommissioning	6 years	- Evidential record, including clearance checklist and images.	Retention unchanged Moved from 3.4.7	• Capital Planning Department • Property Services	N/A
5.4.6	Property development record	Date of creation	Permanent	- Inclusive of major projects abandoned or deferred. Includes land, building and engineering construction key records (including final accounts, surveys, site plans, bills of quantities, PFI / PPP records) planning permission and all formal contract documents (including executed agreements, conditions of contract, specification, "as built" record drawings and documents on the appointment and conditions of engagement of private buildings and engineering consultants). - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 3.5.3	• Property Services	N/A
5.4.7	Property management system	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Unchanged Moved from 3.5.9	• Property Services	N/A

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
5.4.8	Property title deed	Date of ownership of property	Date of disposal of property	<ul style="list-style-type: none"> - Title deeds are retained while the property is under the ownership of the NHS but on disposal, the relevant title deeds are required to be transferred to the purchaser. - Where property is not disposed of but title deeds become of no continuing legal relevance (e.g. the building is demolished but the land is retained by the Boards and used for another purpose). These records should be considered for transfer to the designated place of deposit. - Of note that all documents which are recorded in the Register of Sasines or registered in the Land Register are also held in the permanent records of Registers of Scotland. 	Retention changed from permanent Moved from 3.5.11	<ul style="list-style-type: none"> • Property Services 	N/A
5.5	Security						
5.5.1	Building Security record	Date of creation	Permanent	- Papers relating to security management of site.	New	<ul style="list-style-type: none"> • N/A 	N/A
5.5.2	ID Request Form	Date of creation	3 months		New	<ul style="list-style-type: none"> • Line Managers as part of Employee Record 7.2.9 • Clinical Support Services 	N/A
5.5.3	Lost Property Form & Receipt	Closure of investigation	6 months		New	<ul style="list-style-type: none"> • Department responsible for managing lost property (e.g. Clinical Area, Cash Office) 	N/A
5.5.4	Patient Property Record	Date of discharge	1 years	- For any incidents / investigations.	New	<ul style="list-style-type: none"> • Clinical Service • Finance Directorate 	N/A
5.5.5	Pharmacy Alarm Log		Permanent	- For any incidents / investigations.	New	<ul style="list-style-type: none"> • Pharmacy Directorate 	N/A
5.5.6	Security Cash Seal	Date of creation	3 months		New	<ul style="list-style-type: none"> • Clinical Support Services 	
5.5.7	Security Tag for new equipment	Lifetime of equipment	2 years		New	<ul style="list-style-type: none"> • Department who owns equipment 	N/A
5.5.8	Surveillance Investigation Record	Closure of investigation	5 years		New	<ul style="list-style-type: none"> • Department undertaking investigation 	12 months
5.5.9	Surveillance record	Date of creation	Minimum of 3 months	<ul style="list-style-type: none"> - ICO Code of Practice for CCTV - Includes CCTV, body worn cameras, vehicle dash cams. The length of the retention must be determined by the purposes for which the video Surveillance has been deployed. The recorded images will only be retained long enough for any incident to come to light (e.g. for a theft to be noticed) and the incident to be investigated. 	Retention unchanged Moved from 3.4.5	<ul style="list-style-type: none"> • Clinical Support Services 	N/A
5.5.10	Visitor Information	Date of visit	2 years	<ul style="list-style-type: none"> - Covers sign in / out books. - Required for Fire Regulations. 	New	<ul style="list-style-type: none"> • Department who manages the area 	N/A
5.6	Waste Management						
5.6.1	Duty of Care Inspection Reports	Date of creation	Permanent, or for life of external contract	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 3.6.1	<ul style="list-style-type: none"> • Clinical Support Services 	N/A
5.6.2	SEPA Registration, Licence and Consent	Date of receipt	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 3.6.2	<ul style="list-style-type: none"> • Clinical Support Services 	N/A
5.6.3	Waste Consignment Note – Controlled wastes such as-clinical / healthcare and household / domestic	End of financial year	2 years		Retention unchanged Moved from 3.6.3	<ul style="list-style-type: none"> • Clinical Support Services 	N/A
5.6.4	Waste Consignment Note – Special / Hazardous / Radioactive Wastes	End of financial year	3 years		Retention unchanged Moved from 3.6.4	<ul style="list-style-type: none"> • Clinical Support Services 	N/A
6	Financial Management Records						
6.1	Financial Provisions						
6.1.1	Accounts – final annual master copies	End of financial year	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 4.1.1	<ul style="list-style-type: none"> • Finance Directorate 	12 months
6.1.2	Accounts – working papers	Completion of statutory audit	3 years	- Cost Books, working records, minor records, advice notes.	Retention unchanged Moved from 4.1.2	<ul style="list-style-type: none"> • Finance Directorate 	12 months
6.1.3	Benefactions	End of financial year	8 years	<ul style="list-style-type: none"> - Endowments, legacies gifts etc. received by the health board. - Consider for transfer to the designated place of deposit. 	Retention unchanged Moved from 4.1.4	<ul style="list-style-type: none"> • Finance Directorate 	12 months

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6.1.4	Budgeting – including budget monitoring report	End of financial year	3 years	***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.1.5	• Finance Directorate	12 months
6.1.5	Contract sealed or unsealed	End of contract	7 years		Retention unchanged Moved from 4.5.4	• Procurement Department	Period of contract
6.1.6	Financial Audit (external)	Completion of statutory audit	3 years	- Records relating to external audits including original documents, management letters, value for money (VFM) reports and system / final accounts memorandum). - A longer period may be required for investigate purposes.	Retention unchanged Moved from 4.1.3	• Finance Directorate	12 months
6.1.7	Financial plan, estimates recovery plan	End of financial year	6 years	***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.1.6	• Finance Directorate	12 months
6.1.8	Funding data	End of financial year	6 years	***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.1.7	• Finance Directorate	12 months
6.1.9	Indemnity Form	End of financial year after the indemnity has lapsed	6 years		Retention unchanged Moved from 4.1.8	• Finance Directorate	12 months
6.1.10	Ledger Balances	End of financial year	6 years		Retention unchanged Moved from 4.1.9	• Finance Directorate	12 months
6.1.11	Mortgage document	Date of creation	Permanent	- Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 4.1.10	• Finance Directorate	12 months
6.1.12	Register of gifts and hospitality	Register entry date	6 years	- Gifts received by individual members of staff.	Retention unchanged Moved from 4.1.11	• Finance Directorate	12 months
6.2	Financial Transactions						
6.2.1	Asset register and lease register	Date of creation	Permanent		New	• Finance Directorate	12 months
6.2.2	Audit report for shared services provided by other NHS Boards	Completion of audit	3 years		New	• Finance Directorate	12 months
6.2.3	Bank Statement	End of financial year	3 years		Retention unchanged Moved from 4.2.1	• Finance Directorate	12 months
6.2.4	Cash book / sheet	End of financial year	6 years		Retention unchanged Moved from 4.2.2	• Finance Directorate	12 months
6.2.5	Claim for losses record	Date claim settled / resolved	6 years		New	• Finance Directorate	12 months
6.2.6	Creditor payment record	End of financial year	6 years	***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.2.3	• Finance Directorate	12 months
6.2.7	Debtor's record	Date debt discharged	6 years	- Covers cleared and un-cleared. - Prescription and Limitation (Scotland) Act 1973 - CLO Debt Recovery cases is 5 years after closure of file.	Retention unchanged Moved from 4.2.4	• Finance Directorate	12 months
6.2.8	Demand Note	End of financial year	6 years		Retention unchanged Moved from 4.2.5	• Finance Directorate	12 months
6.2.9	Expense Claim record	End of financial year	6 years	- Includes relocation expenses. - Taxes Management Act 1970 - Keeping VAT Records HMRC Reference Notice 700/21 (October 2013)	Retention unchanged Moved from 4.2.6	• Finance Directorate	12 months
6.2.10	GP loan applications & other related paperwork	Date of application	Permanent		New	• Finance Directorate • Primary Care Services	12 months
6.2.11	Income and expenditure sheets and journals	End of financial year	3 years		Retention unchanged Moved from 4.2.7	• Finance Directorate	12 months
6.2.12	Invoices	End of financial year	6 years	- Covers invoices payable (creditors), invoices receivable (debtors) and capital paid invoices. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.2.8	• Finance Directorate	12 months
6.2.13	IR35 declarations & assessments	End of financial year	6 years		New	• Finance Directorate	12 months
6.2.14	Non-exchequer funds	End of financial year	6 years		Retention unchanged Moved from 4.2.9	• Finance Directorate	12 months
6.2.15	Overseas Visitor Form	Date debt discharged	6 years	- Includes information gathered by Health Records Services, letters and invoices.	New	• Finance Directorate	12 months

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
6.2.16	Patient's funds record	End of financial year	6 years		New	• Finance Directorate	12 months
6.2.17	Payments to FHS contractors sent to NHS National Services Scotland by NHS Boards to process on their behalf	End of financial year	3 years		New	• Finance Directorate	12 months
6.2.18	Purchasing authorisation limits	Superseded	1 year		Retention unchanged Moved from 4.2.11	• Finance Directorate	12 months
6.2.19	Receipt	End of financial year	3 years	- Includes cheques bearing printed receipts.	Retention unchanged Moved from 4.2.10	• Finance Directorate	12 months
6.3	Fraud Prevention and Management						
6.3.1	Fraud Case File	Completion of court proceedings / disciplinary process	6 years	- Includes, inquiries involving fraud / other irregularities. Where action is in prospect or has been commenced, consult with legal representatives and NHS Counter Fraud Services and keep in accordance with advice provided. - Taxes Management Act 1970 - Prescription and Limitation (Scotland) Act 1973	Retention unchanged Moved from 4.3.2	• Finance Directorate	12 months
6.3.2	Fraud Report	End of financial year	6 years	- Includes both internal reporting and reporting to Counter Fraud Services.	Retention unchanged Moved from 4.3.1 and 4.3.3	• Finance Directorate	12 months
6.4	Payroll						
6.4.1	Pay as You Earn (PAYE) record	End of financial year	3 years		Retention changed from 6 years Moved from 4.4.1	• Finance Directorate	12 months
6.4.2	Salary / Wage Record	End of current tax year	10 years	- For superannuation purposes organisations should retain such records until the subject reaches pensionable age.	Retention unchanged Moved from 4.4.2	• Finance Directorate	12 months
6.4.3	Statutory Pay Scheme record	End of current tax year	3 years	- Covers maternity, paternity and sick pay schemes. - The Statutory Maternity Pay (General) Regulations S.I 1986/1960 as amended by SI 2005 No.989. - Statutory Sick Pay (General) Regulations S.I 1982/894	Maternity and Sick Pay amalgamated into one Record Type Retention unchanged Moved from 4.4.3 and 4.4.4	• Finance Directorate	12 months
6.4.4	Substitute for Return (SFR)	End of financial year	6 years		Retention unchanged Moved from 4.4.5	• Finance Directorate	12 months
6.4.5	Superannuation record	Termination of employment	75th Birthday of Employee	- Includes accounts – registers and forms.	Retention changed from 10 years Moved from 4.4.6	• Finance Directorate	12 months
6.5	Procurement						
6.5.1	Approved suppliers list	Superseded	11 years		Retention unchanged Moved from 4.5.1	• Procurement Department • Estates Department	N/A
6.5.2	Contract management file	End of contract	5 years	- Includes: contract award letters and agreements, post- tender negotiations, service level agreements, compliance reports, performance reports, variations to contracts (revisions, extensions). - Where these records were obtained as part of a Capital Planning programme these would be held within the Project Files as a combined file and the retention period would be dependent on the over or under value of £400,000 as above in 5.3.1 and 5.3.2. - Prescription and Limitations (Scotland) Act 1973 c.52 and 1984 c.45 ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.5.2	• Biochemistry Laboratory • Medical Physics • Dental Services • Primary Care Services • Capital Planning Department • Central Decontamination Unit • Clinical Support Services • Digital Services • Estates Department • Procurement Department • HSCP - Community Equipment • HSCP - Voluntary Contracts • Medical Staffing Team • Pharmacy • Public Health • Transformation & Sustainability - Contract Management Team	Duration of contract plus 5 years

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
6.5.3	Contract to deliver core NHS services	Date of contract	Permanent	- Consider for transfer to the designated place of deposit. - Core NHS services = GP / Dentist / Optometry / Community Pharmacy.	Retention unchanged Moved from 4.5.3	• Primary Care Services	N/A
6.5.4	Indents	End of financial year	2 years		Retention unchanged Moved from 4.5.5	• Procurement Department	N/A
6.5.5	Medical equipment specification record	Date of purchase	Permanent	- For major items purchased. - Consider for transfer to the designated place of deposit.	Retention unchanged Moved from 4.5.6	• Medical Physics Department	N/A
6.5.6	Products liability record	Lifetime of Product	11 years	- Where these records were obtained as part of a Capital Planning programme these would be held within the Project Files as a combined file and the retention period would be dependent on the over or under value of £400,000 as above in 5.3.1 and 5.3.2.	Retention unchanged Moved from 4.5.7	• Procurement Department • Medical Physics Department • Capital Planning Department • Digital Services	N/A
6.5.7	Purchase order	End of financial year	6 years	- Includes goods received notes. - Keeping VAT records HMRC Reference: Notice 700/21 (October 2013) ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.5.8	• All departments	N/A
6.5.8	Register of contracts	Expiration / conclusion of contract	Remove	- Procurement Reform (Scotland) Act 2014. Section 35. - The statutory requirement is that register entries for contracts cannot be deleted until contract expires or is terminated. The authority may choose to keep the entries for a longer period for historical purposes.	Retention unchanged Moved from 4.5.9	• Procurement Department	N/A
6.5.9	Stock control report	Date of creation	2 years	***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.5.10	• Any department which requires to monitor stores	N/A
6.5.10	Stores record – major	Date of creation	6 years	- Ledgers etc. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.5.11	• Any department which requires to monitor stores	N/A
6.5.11	Stores record – minor	Date of creation	2 years	- Requisitions, issue notes, transfer vouchers, goods received books etc. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.5.12	• Procurement Department	N/A
6.5.12	Supplier details change record	Date change requested.	3 years	- Records regarding change of bank details & associated supporting evidence.	New	• Finance Directorate	N/A
6.5.13	Supplies record – minor (invitations to tender and inadmissible tenders, routine papers relating to catering and demands for furniture, equipment, stationery and other supplies)	Date of creation	2 years	- Where these records were obtained as part of a Capital Planning programme these would be held within the Project Files as a combined file and the retention period would be dependent on the over or under value of £400,000 as above in 5.3.1 and 5.3.2. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.5.13	• Biochemistry Laboratory • Medical Physics • Dental Services • Primary Care Services • Capital Planning Department • Central Decontamination Unit • Clinical Support Services • Digital Services • Estates Department • Procurement Department • HSCP - Community Equipment • HSCP - Voluntary Contracts • Medical Staffing Team • Pharmacy • Public Health • Transformation & Sustainability - Contract Management Team	N/A
6.5.14	Tender evaluation, negotiation and notification record (successful)	End of contract	5 years	- Where these records were obtained as part of a Capital Planning programme these would be held within the Project Files as a combined file and the retention period would be dependent on the over or under value of £400,000 as above in 5.3.1 and 5.3.2. - Prescription and Limitations (Scotland) Act 1973 c.52 and 1984 c.45 ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 4.5.14	• Biochemistry Laboratory • Medical Physics • Dental Services • Primary Care Services • Capital Planning Department • Central Decontamination Unit • Clinical Support Services • Digital Services • Estates Department • Procurement Department • HSCP - Community Equipment • HSCP - Voluntary Contracts • Medical Staffing Team • Pharmacy	N/A

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						<ul style="list-style-type: none"> Public Health Transformation & Sustainability - Contract Management Team 	
6.5.15	Tender evaluation, negotiation and notification record (unsuccessful)	Award of tender	5 years	- Where these records were obtained as part of a Capital Planning programme these would be held within the Project Files as a combined file and the retention period would be dependent on the over or under value of £400,000 as above in 5.3.1 and 5.3.2.	Retention unchanged Moved from 4.5.15	<ul style="list-style-type: none"> Biochemistry Laboratory Medical Physics Dental Services Primary Care Services Capital Planning Department Central Decontamination Unit Clinical Support Services Digital Services Estates Department Procurement Department HSCP - Community Equipment HSCP - Voluntary Contracts Medical Staffing Team Pharmacy Public Health Transformation & Sustainability - Contract Management Team 	N/A
6.6	Taxation						
6.6.1	Tax Form	End of financial year	6 years		Retention unchanged Moved from 4.6.1	<ul style="list-style-type: none"> Finance Directorate 	N/A
6.6.2	VAT record	End of financial year	6 years	- In some instances, a shorter period may be allowed, but agreement must be obtained from HM Revenue and Customs.	Retention unchanged Moved from 4.6.2	<ul style="list-style-type: none"> Finance Directorate 	N/A
7	Workforce Management Records						
7.1	Learning & Development						
7.1.1	Appraisal record	Date of termination	6 years	- Personal development appraisal and development reviewed (PDRs).	New	<ul style="list-style-type: none"> Line Managers as part of Employee Record 7.2.9 Appraisers 	N/A
7.1.2	Training Course attendance record	Date of course	5 years	- Individual's attendance at courses should be noted within employee records. - Applies to lists of all employees who attended. - This is not applicable to mandatory and statutory training.	New	<ul style="list-style-type: none"> Department delivering the training 	N/A
7.1.3	Training Course evaluation	Date of course	3 years		New	<ul style="list-style-type: none"> Department delivering the training 	N/A
7.1.4	Employee Training record	Date of termination	6 years	- See section 5.11 within the RM CoP for further information.	Retention unchanged Moved from 5.1.8	<ul style="list-style-type: none"> Line Managers as part of Employee Record 7.2.9 	N/A
7.1.5	Employee Training record – Nurses	Completion of training	30 years	- Applies only to Nurse Training carried out in hospital-based nurse training schools.	Retention unchanged Moved from 5.1.9	<ul style="list-style-type: none"> Line Managers as part of Employee Record 7.2.9 	N/A
7.1.6	Training programmes materials and resources	Superseded	3 years	- Includes: description of course, dates training held, publicity, presentations, handouts, user guides.	New	<ul style="list-style-type: none"> Department delivering the training Employees 	N/A
7.2	Management of Employees						
7.2.1	Disciplinary – first and final written warning	Date of termination	6 years	- Although the sanction is spent after 12 months, the information relating to the written warning requires to be kept. It forms part of the employee's record which is held for the duration of employment and 6 years after.	Retention unchanged Moved from 5.1.1	<ul style="list-style-type: none"> O&HRD Directorate Line Managers as part of Employee Record 7.2.9 	12 months after closure of investigation
7.2.2	Disciplinary – letter of dismissal	Date of dismissal	10 years	- Where action is in prospect or has been commenced, consult with legal representatives and keep in accordance with advice provided.	Retention unchanged Moved from 5.1.2	<ul style="list-style-type: none"> O&HRD Directorate Line Managers as part of Employee Record 7.2.9 	N/A
7.2.3	Disciplinary – record of action taken	Date of termination	6 years	- Includes: Details of rules breached; Employee's defence or mitigation; Action taken and reasons for it; Details of appeal and any subsequent developments The Employment Act 2002 deals with dispute resolution but does not give time limits for record retention. - Where action is in prospect or has been commenced, consult with legal representatives and keep in accordance with advice provided.	Retention unchanged Moved from 5.1.3	<ul style="list-style-type: none"> O&HRD Directorate 	12 months after closure of investigation

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
7.2.4	Duty Roster / timesheet	End of financial year	6 years	***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Retention unchanged Moved from 5.1.4	<ul style="list-style-type: none"> SSTS – Payroll Department Local Sheets – Line Managers 	N/A
7.2.5	GP Fit Note	Date of termination	6 years	- Suggest copy is held in employee record however staff member retains the original.	New	<ul style="list-style-type: none"> Line Managers as part of Employee Record 7.2.9 	N/A
7.2.6	Grievance record	Date of termination	6 years		Retention unchanged Moved from 5.1.5	<ul style="list-style-type: none"> O&HRD Directorate 	12 months after closure of investigation
7.2.7	Industrial relation record	Closure of investigation	Permanent	<ul style="list-style-type: none"> Not routine – including tribunal case records. Consider for transfer to the designated place of deposit. 	Retention unchanged Moved from 5.2.1	<ul style="list-style-type: none"> O&HRD Directorate (Staff Partnership representative will also hold copies within their partnership organisation) 	12 months after closure of investigation
7.2.8	Referral to Professional Body	Date of termination	6 years	<ul style="list-style-type: none"> Covers all professional bodies including GMC / NMC / AHPF. Consider retaining records for longer if investigation has not yet been concluded by professional body. 	Retention unchanged Moved from 5.1.6	<ul style="list-style-type: none"> GMC – Medical Staffing Team and Revalidation Administrator NMC – Nurse Directorate AHPF – Nurse Directorate 	12 months
7.2.9	Employee record	Date of termination	6 years	<ul style="list-style-type: none"> See section 5.11 within the RM CoP for further information.. Includes: personnel files, letters of application and appointment, confirmation of qualifications, contracts, joining forms, references and related correspondence, termination forms, leave cards / information. 	Retention unchanged Renamed Moved from 5.1.7	<ul style="list-style-type: none"> O&HRD Directorate Line Managers (NB Line Manager held record passed to O&HRD once staff member terminates) 	N/A
7.2.10	Supervision record – line management	Date of termination	6 years	- These should be stored within the employee record.	New	<ul style="list-style-type: none"> Line Managers as part of Employee Record 7.2.9 	N/A
7.2.11	Supervision record – practice / clinical / educational	End of supervision contract	3 years	<ul style="list-style-type: none"> See section 5.11.2 within the RM CoP for further information.. The organisation's record should be stored by the supervisor, a copy can be held by the employee for as long as they feel is required. 	New	<ul style="list-style-type: none"> Supervisor 	N/A
7.2.12	Volunteer / Contractor / Agency / Bank Staff record	Date of termination	6 years	<ul style="list-style-type: none"> See section 5.11 within the RM CoP for further information.. Treat as employee record. Includes: personnel files, letters of application and appointment, confirmation of qualifications, contracts, joining forms, references and related correspondence, termination forms. 	Contractor/Agency and Bank Staff added to Record Type Retention unchanged Moved from 5.1.10	<ul style="list-style-type: none"> Volunteer Coordinator Departments recruiting volunteers 	N/A
7.2.13	Work force placement record	Date of termination	6 years	- Includes students, school work experience, government placement initiatives.	Retention unchanged Moved from 5.1.11	<ul style="list-style-type: none"> Employability Services 	N/A
7.2.14	Work Schedule Report (routine & adhoc)	Date of creation	1 year		New	<ul style="list-style-type: none"> Line Managers as part of Employee Record 7.2.9 	N/A
7.3	Occupational Health						
7.3.1	Health promotion record –(staff)	End of promotion	10 years	<ul style="list-style-type: none"> Core papers and visual materials relating to major initiatives. Consider for transfer to the designated place of deposit. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry. 	Retention unchanged Moved from 5.3.1	<ul style="list-style-type: none"> Public Health Directorate 	12 months
7.3.2	Occupational Health Report	Date of termination	6 years	<ul style="list-style-type: none"> See section 5.24 within the RM CoP for further information. Occupational Health Records must be kept separate from the main employee record. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry. 	Retention unchanged Moved from 5.3.2	<ul style="list-style-type: none"> Occupational Health Team 	N/A
7.3.3	Personal exposure of an identifiable employee monitoring record	Date of exposure	40 years	- The Ionising Radiations Regulations 2017	Moved from health records retention schedule. No previous ref number	<ul style="list-style-type: none"> Line Managers as part of Employee Record 7.2.9 Occupational Health Team 	N/A
7.3.4	Spiritual Care record	End of year to which they relate	2 years		Retention unchanged Renamed from Chaplaincy records Moved from 7.2.2	<ul style="list-style-type: none"> Spiritual Care Department 	N/A

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
7.4	Recruitment						
7.4.1	Applications for employment – unsuccessful applicants	Date of recruitment	1 year	- This includes paperwork for those who were invited to and participated in an interview.	Retention unchanged Moved from 5.4.1	• O&HRD Directorate	12 months
7.4.2	Disclosure Scotland certificate	Date on which recruitment or other decisions have been taken.	90 days	- 90 days after the date on which recruitment or other relevant decisions have been taken. - Certification number and disclosure level can be retained as a summary record.	Retention unchanged Moved from 5.4.4	• O&HRD Directorate	N/A
7.4.3	Recruitment advert	Date of advert	1 year	- For jobs where unusual patterns of progression are advertised, it is recommended the job advert paperwork is kept for the length of the progression period plus 6 years if a complaint exists. ***do not destroy records created after 1 January 2020 - see guidance note regarding the Covid-19 Inquiry.	Renamed from Job advertisements Retention unchanged Moved from 5.3.2	• O&HRD Directorate	N/A
7.4.4	Right to work checks documentation – successful candidates	Date of termination	6 years	- This includes photocopies of passports, birth or adoption certificates, immigration status documents (visa). - These should be stored securely within the primary employee record stored within the Human Resources department. - Required for duration of employment as per Home Office guidance.	New	• O&HRD Directorate	N/A
7.4.5	Right to work checks documentation – unsuccessful candidates	Date of recruitment	3 months	- This includes photocopies of passports, birth or adoption certificates, immigration status documents (visa). - These should be stored securely for a maximum of three months.	New	• O&HRD Directorate	N/A
7.4.6	Interview pre employment ID checks	Date of interview	3 months	- Photocopies of interviewees identification	New	• Recruiting Manager	N/A
8	Digital System Records						
8.1	System Development						
8.1.1	Digital Development record	Decommissioning of system	5 years	- Development, post-implementation development changes to an ICT system - Consider for transfer to the designated place of deposit	Renamed Retention unchanged Moved from 6.1.2	• Digital Services • Department who owns system	N/A
8.2	System Management						
8.2.1	Data sets for reporting and longitudinal studies	End of data collection	Keep under review	- Includes datasets transferred to data warehouse and used for reporting purposes (to Board, NHSS or SG) and for longitudinal studies. - Keep under review for continued value which can be justified, with consideration of storage costs and carbon footprint. - Fully anonymised datasets may be retained long term. - Data sets containing personal data (including pseudonymised data) must only be retained as long as necessary for the purposes they were collected for, unless they have been selected for permanent preservation in an archive. - For data sets which have enduring value consider transfer to permanent place of deposit or Data Archive (e.g., Data Loch).	New	• Digital Services • Department who owns the data	N/A
8.2.2	Fault Investigation record	Closure of investigation	3 years	- Investigation of faults reported by users of an ICT system, and action taken to rectify problems.	Retention unchanged Moved from 6.3.2	• Digital Services • Department who owns system	N/A
8.2.3	Hardware Asset Register	Return of equipment	5 years	- Register of removal / return of mobile ICT systems hardware and software from / to Board premises.	Retention unchanged Moved from 6.3.6	• Digital Services • Department who owns system • Line Managers as part of Employee Record 7.2.9	N/A
8.2.4	Hardware Disposal log	Disposal of equipment	5 years	- Disposal log of arrangements for the sanitisation and disposal of institutional ICT equipment.	Retention unchanged Moved from 6.3.7	• Digital Services • Department who owns system	N/A
8.2.5	Management of data record	End of current year	1 year	- Management of data in an ICT system, including the operation of routine data backup, archiving and deletion routines.	Retention unchanged Moved from 6.3.3	• Digital Services • Department who owns system	N/A
8.2.6	Routine testing / monitoring record	End of current year	1 year	- Routine monitoring and testing of an ICT system, and action taken to rectify problems and optimise performance.	Retention unchanged Moved from 6.3.1	• Digital Services • Department who owns system	N/A

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Ref	Record Type	Retention Trigger	Retention Period	Citation / Notes	Change from 2020	Master Copy Holder	Duplication Retention Period
8.2.7	Software Licence Maintenance record	Expiry / Termination of licence	5 years	- Maintenance of the software s) for an ICT system. - Prescription and Limitations (Scotland) Act, 1973 and 1984	Retention unchanged Moved from 6.3.4	<ul style="list-style-type: none"> Digital Services Department who owns system 	N/A
8.2.8	System Management record	Decommissioning of system	5 years	- Management of an ICT system – system file (including handover documents, user guides, system support, technical and knowledge base documentation).	Retention unchanged Moved from 6.3.5	<ul style="list-style-type: none"> Digital Services Department who owns system 	N/A
8.2.9	System Audit Log	End of current year	2 years	- Routine audit logs of all activity within the system.	New	<ul style="list-style-type: none"> Digital Services Department who owns system 	N/A
8.2.10	Training and guidance for IT system	Superseded	5 years	- Development of technical and application training and guidance for IT system users.	Retention changed from 1 year Moved from 6.4.1	<ul style="list-style-type: none"> Digital Services Department who owns system 	N/A
8.2.11	User request record	Close of call	1 year	- Logging, investigation and resolution of user requests for technical and application support.	Retention unchanged Moved from 6.4.2	<ul style="list-style-type: none"> Digital Services Department who owns system 	N/A
8.3	System Security						
8.3.1	Access Monitoring record	End of current year	2 years	- Routine monitoring of access to, and use of, an ICT system.	Retention unchanged Moved from 6.2.3	<ul style="list-style-type: none"> Digital Services Department who owns system 	N/A
8.3.2	System security breach record	Last action on incident	5 years	- Records relating to the detection and investigation of security breaches of an ICT system, and action taken. If the files are part of an adverse event record, they should be retained based on their category rating (I, II or III).	Retention changed from 3 years Moved from 6.2.4	<ul style="list-style-type: none"> Digital Services Department who owns system 	N/A
8.3.3	System Security protocol	Decommissioning of system	5 years	- Prescription and Limitations (Scotland) Act, 1973 and 1984	Retention unchanged Moved from 6.2.1	<ul style="list-style-type: none"> Digital Services Department who owns system 	N/A
8.3.4	User Account Management record	Closure of user account	1 year	- Opening, maintenance and closure of a user account for an ICT system.	Retention unchanged Moved from 6.2.2	<ul style="list-style-type: none"> Digital Services Department who owns system 	N/A

Appendix 2 - Corporate Records Management Retention & Disposal Register

Corporate Records Management Retention & Disposal Register



IMPORTANT!

No destruction of a record should take place without assurance that:

- the record is no longer required by any part of the business;
- no work is outstanding by any part of the business;
- no litigation or investigation is current or pending which affects the record;
- there are no current or pending FOSIA or DPA access requests which affect the record.

Directorate:	
Department:	

Record information					Appraisal & disposal information						Destruction information						
Name of Record	Description of Record	Reference Number	Format of Record	Date record created	Date record appraised	Date record disposed	Disposal decision	Reason for disposal	Location record disposed to	Disposal reference number	Date record due for destruction	Date record destroyed;	Number of records destroyed;	Who authorised destruction;	Who carried out the destruction;	Reason for destruction;	Method of destruction;
<i>Title by which the record/ record collection is commonly known.</i>	<i>Brief description of the record/ record collection showing the purpose of the record and what information it contains.</i>	<i>(if applicable) NB this could be a range e.g. 1-100.</i>	<i>e.g.: electronic / paper</i>	<i>(if known)</i>	<i>Date record reviewed for removal from current filing system.</i>	<i>Date record removed from filing system.</i>	<i>e.g. destroy record, move to secondary storage within NHS A&A, move to internal Corporate Records Archive, transfer to external archive.</i>	<i>e.g. no longer required for business use, reached retention period, required to be stored permanently.</i>	<i>Applicable only if moved to secondary storage.</i>	<i>(if applicable e.g. storage box reference number)</i>				<i>Name & job title</i>	<i>Name & job title</i>		<i>Does the record contain personal or confidential information - how was the record destroyed e.g.: Confidential – Shredded.</i>

NB the register is on excel document format – please contact your Corporate Records Management Champion for access to it.

Corporate Records Storage



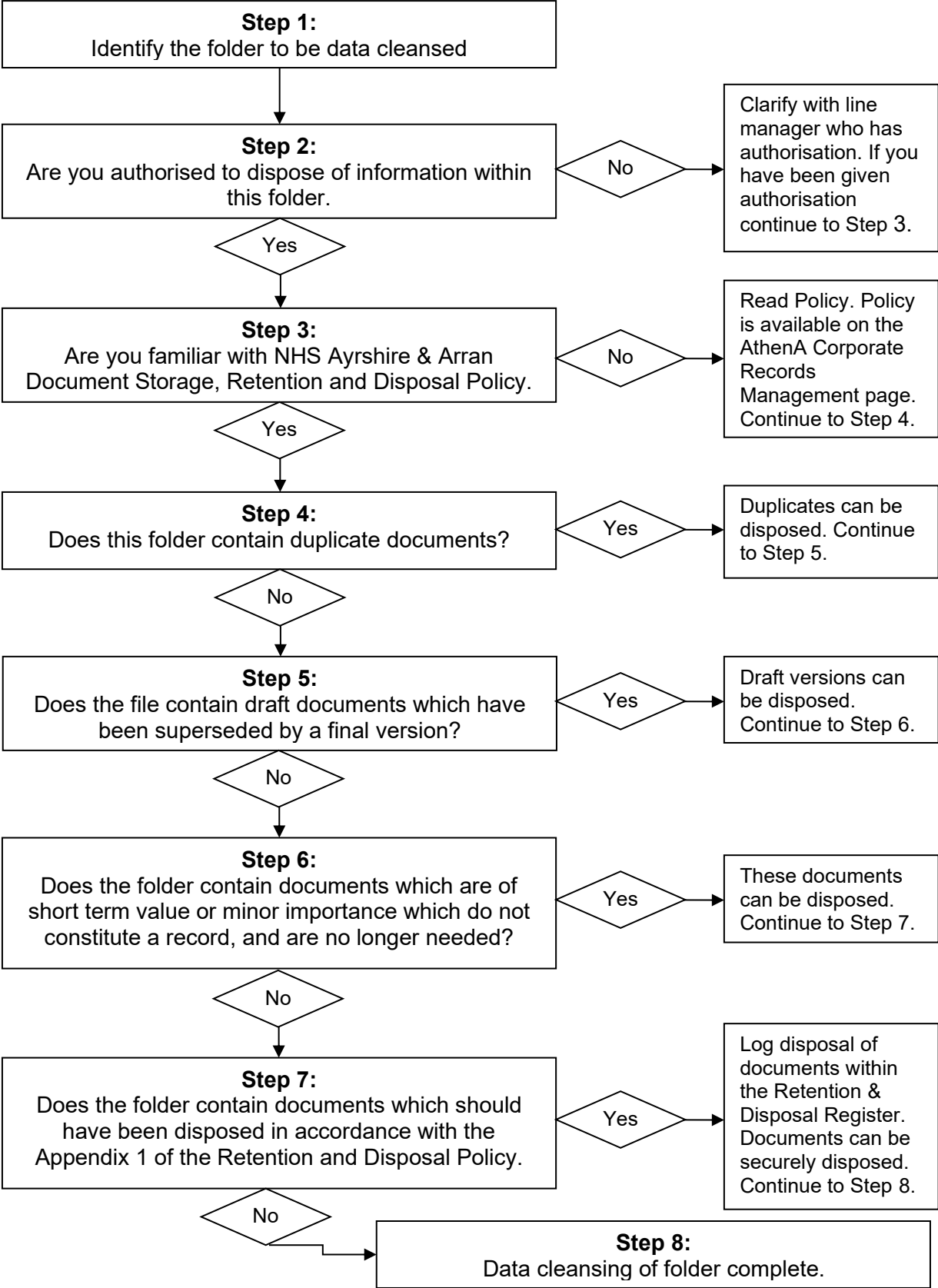
Directorate	
Department	

Box Reference Number			
Description of Records			
Date Records Created	From		
	To		
Date Due for Destruction			
Retain PERMANENTLY	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Date appraised		Signed	

NB This is included for information only, the template for labels can be found on AthenA, on the [Corporate Records Management page](#).

Appendix 4 - Data Cleansing Process Flowchart

Note that if you are unclear of an answer at any stage during this process, seek clarification from your line manager / Records Management Champion.



Appendix 5 – Consideration Checklist for Records without Retention Periods

