



## RECORDS MANAGEMENT POLICY

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## **Introduction**

Maintaining accurate and relevant Records is vital to the effective management of COPE Foundation and provides an invaluable source of evidence of activities and use of resources. In providing for the management of Records, COPE Foundation endeavours to balance its statutory obligations with its duty to maintain confidentiality for personal Records.

## **1. Policy**

### **1.1 Statement**

COPE Foundation endeavours to ensure the implementation of best Record management practices and systems in accordance with ISO-15489. This entails the creation, maintenance and protection of accurate and reliable Records, and that when these Records are no longer required or have no further value, they are appropriately disposed at the proper time. It is intended that practices concerning record management within COPE Foundation are to be in accordance with this Policy, its supporting guidelines and procedures.

### **1.2 Purpose**

The purpose of this Policy is to establish standards and procedures for the management of Records, from their creation to their disposal, within COPE Foundation. COPE Foundation is committed to establishing and endeavouring to maintain Record management practices that concur with best practices and legislative requirements.

### **1.3 Policy Scope**

This Policy applies to all Records, irrespective of format, held by, under the control of, or in the possession of COPE Foundation. It applies to all staff in all disciplines and within all locations in COPE Foundation. It applies to all aspects of Record creation, maintenance, and disposal. It includes all applications used to create Records including, without being limited to, e-mail, database applications and websites. All information, written and electronic, created or received by staff of COPE Foundation, preserved in the form of Records, is covered by this Policy.

### **1.4 Ownership of the Records**

All Records, irrespective of format, created or received by staff, in the course of their work on behalf of COPE Foundation, are the property of COPE Foundation and subject to its overall control. Individual staff do not own Records but have responsibility for managing Records according to this Policy.

## 1.5 Legislation/Regulations/Standards

COPE Foundation acknowledges the existence of laws and regulations that relate to Records and information including, but not limited to:

- Child Care Act, 1991 & Related Regulations
- Comptroller & Auditor General (Amendment) Act, 1993
- Data Protection Acts, 1988 & 2003
- Data Protection (Access Modification) (Social Work) Regulation, 1989
- Disability Act 2005
- EC Directive on Protection of Data 95/46/EC
- Education for Persons with Special Educational Needs Act 2004
- Employees (Provision of Information and Consultation) Act, 2006
- Electronic Commerce Act, 2000
- Freedom of Information Acts 1997 & 2003
- Health Act, 1947
- Health Acts 1953, 1970, 2007 & Related Regulations
- Information Commissioner: Records Handbook, 2004
- ISO 15489 . International Standard on Record Management
- National Archives Act, 1986
- National Federation of Voluntary Bodies: Guidelines on Records Retention, 2000
- National Hospitals Office: Code of Practice for Healthcare Records Management, 2007
- Safety, Health & Welfare Act, 2005 & Related Regulations
- Southern Health Board: Records Management: Guidelines & Best Practice, 2000
- Statute of Limitations, 1957
- Statute of Limitations Amendment Act, 1991
- Terms of Employment (Information) Act, 1994
- The Organization of Working Time Act, 1997
- Worker Protection (Regular Part-Time Employees) Act, 1991
- What you should know about Data Quality - A Guide for health and social care staff (November 2012)
- Guidance on Information Governance for health and social care services in Ireland (September 2012)
- International Review of Information Security (July 2012)
- International Review of Secondary Use of Information (January 2012)
- International Review of Data Quality (September 2011)
- International Review of Information Governance Management (April 2011)
- Guidance on Privacy Impact Assessments in Health and Social Care (December 2010)
- International Review of Privacy Impact Assessments (April 2010)
- An 'As Is' Analysis of Information Governance in Health and Social Care Settings in Ireland (January 2010)
- International Review of Information Governance Structures (December 2009).
- Guidance on information governance for health and social care services in Ireland (October 2012)

## 1.6 Definitions

- **Active File** (i.e. yellow working file) is a file containing all Records considered necessary for current dealings with a person supported by COPE Foundation, and is held in the Unit/Centre where the person is accessing our services;
- **Appraisal** is the process of evaluating which Records need to be retained permanently, and which Records are to be destroyed.
- **Archived Record** is a Record held indefinitely and includes, but is not necessarily limited to, those with legal, medical, operational, administrative, financial, historical, scientific, cultural and/or social significance.
- **Census of Records on an Active File** is a stock take or audit of the Active File of a person accessing our services, in order to extract those Records which are not necessary to the current provision of service to that person, and are therefore, to be transferred to the Master File in the Central Records Office;
- **Central Records Office (CRO)** is the office within COPE Foundation that is responsible for maintaining the Master Files of people we support, archiving them, and retaining an index of Archived Records.
- **Disposal** is any action that changes the circumstances of a Record or removes a Record from its usual setting, including, but without being limited to, its destruction.
- **Draft** is a document that may still be subject to alteration by editing and is not in its final form. For the purposes of Freedom of Information legislation, a draft document *already* constitutes a Record;
- **File** is a container for keeping a collection of Records in order, with reference to a given person or subject;
- **Master File** is a File containing all original Records relating to a particular person supported by COPE Foundation, and is held in the Central Records Office.
- **Policy** is this policy as may be amended, varied, or superseded.
- **Record** is any memorandum, book, plan, map, drawing, diagram, pictorial or graphic work or other document, any photograph, film or recording, anything that is a part, or a copy, or a draft, whether in hard or electronic form.
- **Personal Information** as defined by the *Freedom of Information Acts 1997 to 2003* is information about an identifiable individual which would, in the ordinary course of events be known only to the individual or members of the family, or friends of the individual, or is held by a public body on the understanding that it would be treated by it as confidential.

- **Retention Value of a Record on the Active file of a person supported by COPE Foundation** is the realistic estimate of a Record's current value, its requirement to be readily available, its frequency of use, and therefore, the period of time it is, or is not, required to be maintained on the Active file, before being transferred to the Master file in the Central Records Office.
- **Sensitive Personal Data** as defined by the *Data Protection Acts 1988 to 2003* includes data of an individual's physical and mental health, sexual life, political, religious or philosophical beliefs, racial or ethnic origin, criminal convictions or proceedings, clinical trials.

## 2. Records Management

### 2.1 What is Records Management?

- Records management is the systematic collection, classification, indexing, retention and disposal of Records;
- It is a key factor in the delivery of effective services by COPE Foundation;
- It is concerned with ensuring the integrity of information and its appropriate availability;
- It supports the effective delivery of support to the people accessing the services, and to the Human Resource Division.

### 2.2 Responsibilities for Records Management

- **Board of Directors of COPE Foundation** is responsible for the authorisation of this Policy;
- **Chief Executive** is responsible for ensuring the implementation of this Policy within COPE Foundation;
- **Leadership Team Members** are responsible for the effective operation of this Policy within their respective Divisions;
- **Unit/Centre Managers** are responsible for ensuring staff adherence to this Policy and, monitoring its application at local level;
- **All Staff** are responsible and accountable for their recordkeeping, on the understanding that everyone who creates or receives a Record is responsible for adhering to this Policy in respect of the Record created or received;
- **Central Records Office (CRO)** is responsible for maintaining the Master Files of the people supported by COPE Foundation, archiving of their files, and retaining an index of those Archived Records;
- **Information Systems Staff** are responsible for information technological support for the electronic Records management systems, including maintaining the integrity and authenticity of electronic Records.



## 3. Records Creation

### 3.1 Draft Documents

- Draft documents are by their nature, temporary documents;
- They should have the word “*draft*” written or imprinted on them;
- As soon as they are no longer viable or have no retention value, they should be shredded/deleted/destroyed.

### 3.2 New Formats of Records

- The creation of all new formats of Records must be approved and authorised by the Records Management Working Group (appendix 8);
- Until they are authorised for use, no piloting of any new formats of Records may take place.

### 3.3 Electronic Records

- All staff with access to computers should employ good electronic housekeeping practices in the management of electronic documents, including having a backup schedule, deleting regularly, demonstrating caution when opening non-recognised sources of e-mails, using passwords and producing paper copies, if required to maintain the integrity of manual files.

### 3.4 Photographs/Video/Audio Recordings

- Any photograph, video or audio recording of a person constitutes a Record of their personal information/data and is therefore, subject to the provisions of the Freedom of Information and Data Protection Acts;
- In all instances where a photograph is taken, a video or audio recording is made (*except* where the photograph, video and/or audio recording is created for *medical purposes* as contemplated in appendix 7) the *explicit consent* of the individual and/or their parent/guardian/advocate should be sought for its use or publication in any medium, for example in the local newspaper, annual report or a website;
- Parents/guardians/advocates are permitted to take photographs or make video/audio recordings for their own personal use, for example at concerts or award events etc.;
- Consent forms must be approved by the Head of Division (after consultation with the FOI/ Data Protection Officer) before being used;
- Photographs digitally produced or scanned onto a Unit/Centre computer, should be catalogued and filed, either by burning onto a CD or, placing a printed version on the person's Active file;

- Once catalogued and filed, photographs should then be removed from the electronic version;
- Professional judgement and discretion should always be used regarding the quality and volume of photographs or videos necessary to meet the particular objective.

### **3.5 Photocopying/Duplication of Records**

- The practice of photocopying Records is to be kept to a strict minimum;
- Photocopies no longer required, should be shredded.

### **3.6 Saving Records Electronically**

- Records created by staff should be saved, in the appropriate electronic file or database;
- Records received from outside of COPE Foundation should be scanned or, if applicable, an electronic version should be sought and saved in the appropriate file;
- Where it is not possible or practicable to scan or acquire an electronic version of a Record, the paper copy (hard copy) will be retained on file.

## 4. Records Maintenance

### 4.1 Introduction

- Records should be maintained in a system that will enable staff to obtain maximum benefit from the quick and easy retrieval of information.

### 4.2 Access to Records

- All Records should have controlled access by authorised staff only.

### 4.3 Security of Records

- It is the responsibility of each staff member to maintain the security and confidentiality of Records accessed by them;
- Records, both hard copy and electronic, when not immediately required, are to be secured.

### 4.4 Archiving of Records

- The Active File (i.e. *yellow working file*) of a person accessing our services must only hold Records that have a current retention value for meeting that person's support needs in the Unit/Centre;
- Records more than one year old, unless they have a current retention value for meeting the needs of the person being supported in the Unit/Centre, must be transferred to the Central Records Office for placement on the Master File (see 5.1 below);
- The Central Records Office (CRO) has a key role, not only in the archiving of the Records of people supported by COPE Foundation, but also in maintaining an index of what has been archived.

### 4.5 Retrieval of Archived Records

- Central Records Office (CRO) archives Records in off-site storage; these Records are easily retrievable through the CRO. Once retrieved from the off-site storage facility, these archived Records, may only be viewed/ examined (with the exception of those retrieved under a Court Order for Discovery, a Freedom of Information or Data Protection access request) in a room within the CRO. These Records may not be taken off site;
- Where an archived file needs to be retrieved because it needs to be re-activated in order to provide support to a person accessing the services, it should be regarded as returned to *'Active Record'* status.

## 5. Transfer of Records to Central Records Office (CRO)

### 5.1 Transfer of Records to Central Records Office (CRO)

- A census or audit of the Active files of people accessing the Foundation's services (i.e. Yellow Files) is to be carried out annually, in all Departments providing direct support to them, during the month of January;
- This will require the extraction of those Records that have no current retention value on the Active file, and their transfer to the CRO for placement on the Master file.

### 5.2 Records of Deceased People supported by COPE Foundation

- Records of deceased people held on the Active File in hard copy form are to be transferred from the Unit/Centre to the CRO;
- Electronic Records of deceased people in the Unit/Centre are to be printed out and transferred to CRO;
- Then, all the deceased's electronic Records, *with the exception* of those held within the Electronic Document Management System (ADEST), are to be deleted from all drives.

### 5.3 Transfer of Records to Other Service Provider

- If a person who had accessed our services moves to another service provider, staff responsible for his/her Records will prepare and send a *transfer summary* to the latter, of the facts/current care plan as appropriate at the time of transfer;
- Once the person actually moves, the complete Active file will be sent to the Central Records Office;
- The original file, Active or Master, is *never sent* to the other Service Provider.

## 6. Records Retention & Disposal

### 6.1 Introduction

- A wide variety of Records are held in COPE Foundation in manual, electronic, photographic and audio/visual formats, ranging from the Records of people accessing the services to general administrative, personnel and financial Records. COPE Foundation is obliged to comply with legislation governing the retention and destruction of Records and in particular with the provisions of the Data Protection Acts 1988, the Data Protection (Amendment) Act 2003, the Freedom of Information Act 1997 and the Freedom of Information (Amendment) Act 2003. This places a responsibility on COPE Foundation to be clear about the length of time personal data will be kept and the reasons why the information/data is being retained;
- All Records created and/or received by staff in the course of their duties on behalf of COPE Foundation are retained as long as they are required to meet the legal, medical, administrative, financial and operational requirements of COPE Foundation;
- The final disposal, either through transfer to archives or destruction, is carried out according to the *Record Retention Schedules* as outlined in this Policy (appendix 1);
- This Policy in conjunction with *COPE Foundation's Data Protection Policy & Guidelines*, endeavours to provide assistance to staff in meeting their obligations governing the retention and destruction of Records.

### 6.2 Retention Periods

- Retention periods depend on different criteria, including compliance with legislation and best practice. The retention periods are the *minimum* time that Records should be kept, and are calculated from the end of the calendar month, following the last entry on the Record.

### 6.3 Records Retention Schedules

- A Records Retention Schedule will apply to a *series* of Records, and will indicate when eligible Records must be destroyed or deleted, and when permanent Records are to be archived.

### 6.4 Assessing the Value of Records

In conjunction with the retention periods included in this Policy, the following principles should also be observed:

- Be conservative and avoid inordinate degrees of risk;
- Consider the consensus of opinion of knowledgeable/ experienced people;
- Retain a Record if it is likely to be needed in the future, and if the potential consequences of not having it would be substantial and are foreseeable at the time.
- Apply common sense.

## **6.5 Disposal**

- Destruction of Records must be authorised by the Head of the respective Division. Where Records are to be destroyed after the retention period has expired, they should be destroyed using a cross-cutting shredder, or where there is a large amount of Records to be destroyed, a professional contractor with expertise in this field should be employed on a confidential basis with the intention that such contractor will oversee the process and issue a certificate of destruction.

## **6.6 Keeping a Record of Records Destroyed**

- A Record in the form of a register is to be maintained by the various Divisions/Units/Centres of all Records destroyed, providing verifiable authorised proof of destruction;
- The register should be kept in perpetuity and should provide details of all records destroyed, including identifying the name of the person to whom the record relates, date of birth, address, any file reference number, types of records, dates covered by the records (first entry date and last entry date), former location of the record (or the file), date of disposal, and by whom authorization was given for the records destruction;
- The register should be signed and dated by the person who authorised the destruction of the records. This register should be held in a secure location.

## **6.7 Role of *Central Records Office* in Archiving of Records**

The *Central Records Office* is responsible for:

- Archiving of Records of people who access our services, and
- Maintaining an index of those archived Records.

## **7. Awareness Training**

### **7.1 Report Writing & Data Protection**

- Report writing is an essential skill in providing an effective service to people supported by COPE Foundation;
- Awareness training on *Report Writing Guidelines* (appendix 6) and *Data Protection Principles* (appendix 5) will be offered to those considered appropriate by the Heads of Divisions.

### **7.2 Information Technology (IT) Training**

- IT training will be offered to those considered appropriate by Heads of Divisions and, in particular, to those engaged in report writing and Record keeping.

## **8 Monitoring/ Review**

- The success of this Policy depends on effective monitoring and review mechanisms, to ensure its continued use and relevance;
- Line Managers will be responsible for monitoring staff adoption and application of this Policy;
- Policy review will be undertaken every three years or earlier if appropriate.

## **Conclusion**

It is COPE Foundation's intention that, by reviewing this Policy every three years or earlier if appropriate, that it will remain comprehensive, current with legislation, and relevant to good practice.

## APPENDIX 1: Retention Periods

### 1. Records of People who Access COPE Foundation Services

In January of each year, where these Records are considered to have no current use, they are to be sent to the *Central Records Office* in order for them to be placed on Master Files and/or archived. Where a person is deceased, all of their Records are to be sent immediately to the *Central Records Office* for archiving.

### 1. Records of People Supported by COPE Foundation

<b>Records from the following:</b> <b>Medical</b> <b>Nursing/Care Plans</b> <b>Psychology</b> <b>Social Work</b> <b>Occupational Therapy</b> <b>Speech &amp; Language Therapy</b> <b>Physiotherapy</b> <b>Dietetics</b> <b>Music Therapy</b> <b>Behavioural Therapy/ Support</b>	All of these Records are to be retained in archives for 20 years after the last entry or 25 years in the case of a minor whichever shall be the later <b>or</b> For 8 years after the person's death, if he/she died while in the care of COPE Foundation, after which they are to be destroyed by confidential shredding.	
<b>LRPA Records</b> <ul style="list-style-type: none"> <li>Swimming Pool Diaries</li> </ul>	Retain for 5 years	Destroy by confidential shredding
<b>Person Centred Plans</b>	Retain for 2 years after being superseded	Destroy by confidential shredding
<b>Potential/Actual Litigation</b>	Retain all Records indefinitely	Archive
<b>Financial Accounts of People Supported by COPE Foundation</b>		
<ul style="list-style-type: none"> <li>Copies of Payslips</li> </ul>	Current Year	Destroy by confidential shredding
<ul style="list-style-type: none"> <li>Timesheets</li> <li>Gross to Net Pay Report</li> <li>Deductions Reports</li> <li>Pay Elements Reports</li> <li>Control Summary Reports</li> </ul>	Retain past year plus current year	
<ul style="list-style-type: none"> <li>EFT Reports</li> <li>Cheque Payment Records</li> </ul>	6 years	
<ul style="list-style-type: none"> <li>PPP a/c's</li> </ul>	Retain indefinitely	Archive
<ul style="list-style-type: none"> <li>Deduction Authorisation Forms</li> </ul>		
<ul style="list-style-type: none"> <li>Change of Bank Details</li> </ul>		



## 2. Human Resource Records

<b>Unsolicited Application for Jobs/Posts</b>	Retain for 1 year and then destroy by confidential shredding
<b>Applications for a Vacant Post:</b> <ul style="list-style-type: none"> <li>• Vacancy notification</li> <li>• Advert copies</li> <li>• Job description</li> <li>• Short listing criteria</li> <li>• Candidates not qualified or short listed</li> <li>• Applications &amp; Curriculum Vitae of candidates who are called for interview</li> <li>• Candidates short listed but not successful at interview or are successful but do not accept offer</li> <li>• Selection criteria</li> </ul>	Retain for 1 year and then destroy by confidential shredding
<b>Job Description</b>	Retain on the HR File of the successful applicant  Retain for 3 years after being superseded
<b>Interview Board</b> <ul style="list-style-type: none"> <li>• Marking sheets</li> <li>• Interviewers notes</li> <li>• Panel recommendations</li> </ul>	Retain for 2 years and then destroy by confidential shredding
<b>Staff Personnel Files</b> <ul style="list-style-type: none"> <li>• Job Application &amp; Curriculum Vitae</li> <li>• References</li> <li>• Recruitment Medical</li> <li>• Garda Clearance</li> <li>• Employment Records</li> <li>• Offer/Acceptance of Post</li> <li>• Contract of Employment/Job Specification</li> <li>• Calculations relating to incremental credit and point on scale at appointment</li> <li>• Probation forms</li> <li>• Performance Appraisal</li> <li>• Sick Leave Record</li> <li>• Training &amp; Qualification Records</li> <li>• Resignation/Retirement Correspondence</li> <li>• Superannuation Calculations</li> </ul>	Retain all these Records for duration of employment  On retirement/resignation, retain for 6 years before destroying by confidential shredding, but retain service Records for superannuation/ pension purposes.
<b>Leave Records</b> <ul style="list-style-type: none"> <li>• Annual Leave Applications</li> <li>• Sick Leave Record including certificates</li> <li>• Career Break applications &amp; correspondence</li> <li>• Special Leave</li> <li>• Jury Service Leave</li> <li>• Compassionate Leave Correspondence</li> </ul>	Retain all these Records for at least 3 years

<b>Discipline Records &amp; Correspondence</b>	<p>Hold for duration of employment and for 6 years after retirement/resignation and then destroy by confidential shredding.</p> <p>Where disciplinary policy provides for earlier removal from file, and after Head of Human Resources approval, destroy by confidential shredding.</p> <p>Where disciplinary matter involved criminal activity, retain Records until the person's death and then destroy by confidential shredding</p>
<b>Insurance Policies</b>	Hold indefinitely/Archive
<b>Accident Reports</b>	
<b>Claims Correspondence</b>	
<b>Litigation Records/Dossiers</b>	
<b>Occupational Health Records</b> <ul style="list-style-type: none"> <li>• Pre-employment medical reports</li> <li>• Health screening reports</li> <li>• Other staff reports</li> </ul>	Hold until staff member resigns/retires and then destroy by confidential shredding.
<b>Superannuation Records</b>	Retain until pensioner and any dependent spouse/partner are deceased, and any dependent children are finished in full time education.
<b>Industrial Relations Records</b> <ul style="list-style-type: none"> <li>• Agreements</li> <li>• Policies &amp; Legislation</li> <li>• Surveys/Reports</li> <li>• Correspondence</li> <li>• Individual Industrial Relations issues</li> <li>• Minutes of meetings</li> </ul>	<p>Hold all of these Records until no longer considered relevant; then destroy by confidential shredding.</p> <p>However, archive indefinitely a single copy of all policies, even after being superseded.</p>

### 3. Finance Records

<b>Accounts Payable</b>		
Invoices	Hold for current year plus 6 years	Destroy by confidential shredding
VAT Records	Hold for current year plus 6 years	
Tax Clearance Certs.	Hold for current year plus 6 years	
<b>Accounts Receivable</b>		
Debtors Ledgers	Hold for current year plus 6 years	Destroy by confidential shredding
Income Listings	Hold for current year plus 6 years	
Income Control Accounts	Hold for current year plus 6 years	
Receipts Reconciliation	Hold for current year plus 6 years	
<b>Agreements: Rental, Lease, Use, Occupancy</b>		
Agreements - Rental, Lease, Use, Occupancy	Retain Indefinitely	Archive
<b>Bank Records</b>		
Paid Cheques	Retained in Bank	Bank Responsibility
Used/completed Cheque Books	Hold indefinitely	Archive
Bank Reconciliation	Hold for current year plus 6 years	Destroy by confidential shredding
Bank Statements	Hold for current year plus 6 years	
<b>Property Files in relation to Capital Programmes</b>		
Property Files	Retain indefinitely	Archive
<b>Financial Statements</b>		
Annual Financial Statements	Retain indefinitely in original form	Archive
Final Budgetary Reports for any year	Retain indefinitely in original form	
Management Accounts	Retain for current year plus 6 years	Destroy by confidential shredding
Monthly Cash Flow Reports	Retain for current year plus 6 years	Destroy by confidential shredding
Audit Reports	Retain indefinitely	Archive
Registers maintained in Finance Division under statute i.e. Register of insurances, mortgages, assets etc.	Retain indefinitely in original form	Archive

General Correspondence on Financial Administration	Retain as relevant to support audit on statutory accounts	Destroy by confidential shredding
<b>Fixed Assets</b>		
Records of COPE Foundation Properties, Sale and Purchase	Retain indefinitely in original form	Archive
Assets Register	Retain indefinitely in original form	
<b>Insurance Files</b>		
Insurance Policies	Retain indefinitely in original form	Archive
<b>Payroll</b>		
Time Sheets	Retain Indefinitely	Archive
Input Sheets	Retain past year plus current year	Once annual audit is complete, destroy by confidential shredding
Deduction Authorisation Forms	Retain Indefinitely	Archive
Gross to Net Pay Report	Retain for current year plus 6 years	Destroy by confidential shredding
Deductions reports	Retain for current year plus 6 years	Destroy by confidential shredding
Pay Elements Reports	Retain for current year plus 6 years	
SEPA Reports	Retain for current year plus 6 years	
Hours Reports	Retain for current year plus 6 years	
Control Summary Reports	Retain for current year plus 6 years	Destroy by confidential shredding
Payslips copies	Retain electronic version indefinitely	Archive
	Retain all Pre-1997 indefinitely	
P 35	Retain Indefinitely	
P 60	Retain past year plus current year	Destroy by confidential shredding
Cheque payment records	Retain for current year plus 6 years	
VHI Records	Retain annual listing indefinitely	Archive
Staff expenses	Retain for current year plus 6 years	Destroy by confidential shredding
Doctors Medical Services Record	Retain past year plus current year	
Sessional Staff claims	Retain for current year plus 6 years	
Social welfare records	Retain past year plus current year	
Statements of Earnings	Forward to Human Resource Division	

PC2 Ros Imports	Retain Indefinitely	Archive
Human Resource Office notes	Retain for 3 years	Destroy by confidential shredding
Unions/AVC/VHI payment file	Retain for 3 years plus current year	
Change of Bank details	Retain indefinitely	Archive
NHASS listing of deductions	Indefinitely	Archive
Electronically held Records	Retain indefinitely in electronic format	
Projections and Statistical Analysis	Retain until audit signed off	Destroy by confidential shredding
<b>Procurement Records</b>		
Procurement Records	Retain indefinitely	Archive
Tenders and Quotations	Retain for current year plus 6 years	Destroy by confidential shredding
Contract for Services	After completion of contract, retain for current year plus 6 years	Appraise and evaluate for archiving
Commercial Contracts	After completion of contract, retain for current year plus 6 years	
<b>Legal Matters</b>		
Legal Cases	Retain indefinitely	Archive
Legal Opinion	Retain indefinitely	
Physical Planning Records	Retain indefinitely	
<b>Other Records</b>		
Internal Audit Reports	Retain indefinitely in original form	Archive
External Audit Reports	Retain indefinitely in original form	
Finance Committee Records	Retain indefinitely	
Fundraising Records	Retain indefinitely	
Research Audits	Retain for current year plus 6 years	Destroy by confidential shredding
Internal financial policies, accounting standards, procedures etc.	Retain in original form until superseded. Store indefinitely electronically.	Archive
Government Department Circulars & Correspondence	Retain indefinitely Apply appropriate IT to relevant Records only.	

Property Accounts	Retain indefinitely	
Cancelled Cheques	Retain for current year plus 6 years	Destroy by confidential shredding
Travel Claims	Retain for 10 years	
Receipt Books	Retain for current year plus 6 years	
Purchase Requisition Books	Retain for current year plus 6 years	
Voucher Books	Retain for current year plus 6 years	
Stores requisition Books	Retain for current year plus 6 years	
Petty Cash	Retain for current year plus 6 years	

#### 4. Administration Records

Diaries (office)	Retain for 1 year after end of calendar year to which they refer	Destroy by confidential shredding
Agendas of Meetings	Retain for 2 years	
Minutes of Meetings	Retain for 10 years	
Complaints: <ul style="list-style-type: none"> <li>correspondence, investigation and outcomes</li> </ul>	Retain for 10 years from date of completion of action	
Records of minor or short lived importance e.g. <ul style="list-style-type: none"> <li>advertising matter</li> <li>covering letters</li> <li>reminders</li> <li>letters making appointments</li> <li>anonymous or unintelligent letters</li> <li>drafts</li> <li>duplicates of documents known to be preserved elsewhere</li> <li>other documents that have ceased to be of value on settlement of the matter involved</li> </ul>	Retain for 2 years after the matter to which they relate	
Minutes of Board Meetings	Retain indefinitely	Archive
Records documenting the archiving or destruction of Records	Retain indefinitely	Archive
Major Reports	Retain indefinitely	Archive

## 5. Health & Safety Records

Health & Safety Statements	Retain indefinitely	Archive
Incident Forms	Retain for 10 years	Destroy by confidential shredding
Serious Incident Records associated with potential or actual litigation	Retain indefinitely	Archive
Records relating to any form of litigation	Retain indefinitely	Archive

## 6. Fundraising Records

General Correspondence	Retain for 5 years	Destroy by confidential shredding
Financial records in relation to Fundraising	Forward to Finance Division annually for archiving purposes	

## **Appendix 2: Protocol for the Records of People we Support**

Records of the people we support contain personal and confidential information, and this information is essential to staff in endeavouring to provide the best possible service of care to them. These Records are classed as confidential and must always be kept in a secure place. Therefore, in order to ensure the greatest possible care is taken and that security and confidentiality are maintained, any movement of these Records/files must be in accordance with this Protocol (which applies to all hard copy Records held on the files of people we support).

- Records of different disciplines are to be kept together, according to colour code, and secured in the correct section of the person's file;
- If specific aspects concerning the person need to be highlighted, a red warning triangle will be placed on the outside of the front cover of the file. Examples include epilepsy, allergies, absconding, etc. details of which will appear in the file;
- Save in accordance with this Records Management Policy, and this Protocol, no Record may be removed from the file, or interfered with.

- **Movements of Files between Locations**

If a person we support is transferring from one location to another, (or the file is needed for update, medical etc), it is the responsibility of the existing location to ensure that the file is in the required order. When the file is received by the location to which the person is transferring, it is the responsibility of the person in charge to ensure that the file contains all the necessary Records.

- All records to be transited from one location to another are to be sent via the secure orange plastic folders designed for this purpose.

## **Appendix 3: Freedom of Information**

The Freedom of Information Acts 1997/2003 provide for members of the public to obtain access, to the greatest extent possible, consistent with the public interest and the right to privacy, to information in the possession of public bodies. COPE Foundation is scheduled as a public body for the purposes of the Freedom of Information Acts.

There are three legal rights for members of the public:

1. Right to obtain access, to the greatest extent possible, consistent with the public interest and the right to privacy, to information in the possession of public bodies that are scheduled under the FOI Acts;
2. Right to have information relating to oneself amended where it is incomplete, incorrect, or misleading; and
3. Right to be given reasons for decisions of a public body affecting oneself.

All three rights have significant implications for Record-keeping for those public bodies scheduled under the Freedom of Information legislation.



## **Appendix 4: E-Mails**

- E-mails are Records, and like any Record may be subject to access under Freedom of Information (FOI), Data Protection legislation or a Court Order for Discovery;
- Professional care needs to be taken, particularly in regard to the content and style of writing used in emails;
- Before sending an email, the writer should always re-read it in order to ensure that, if it were the subject of an access request under Freedom of Information, Data Protection or a Court Order for Discovery, that he/she would be comfortable both with its content and style of writing; the writer should also double check the email address to ensure its correct;
- Emails are not an appropriate forum for detailed discussion of the people we support;
- E-mail messages can carry computer viruses, which are potentially dangerous to COPE Foundation's computer operations;
- Emails should be deleted regularly.

Every employee has a responsibility to maintain COPE Foundation's image, to use emails in a productive and professional manner, and to avoid placing COPE Foundation at risk of legal liability based on misuse.

## **Appendix 5: Data Protection Principles**

The requirements of the European Convention are often referred to as the Eight Data Protection Principles, which can be summarised as requiring that:

1. Personal data shall be obtained fairly and lawfully;
2. Personal data shall be obtained and stored only for specific legitimate purposes;
3. Personal data shall only be processed and used in ways compatible with these purposes;
4. Data obtained shall be adequate, relevant, and not excessive for these purposes;
5. Data held shall be accurate and where necessary kept up to date;
6. Personal data shall be retained no longer than is necessary for the specific purpose or purposes for which it was obtained;
7. Adequate security measures shall be taken in respect of personal data;
8. Any individual subject may obtain a copy, of any personal data held relating to them.

In addition, personal data shall not be transferred outside the European Economic Area unless there is adequate protection in the receiving State.

## Appendix 6: Report Writing Principles

- Write as soon as possible after an event has occurred;
- Ensure your handwriting is legible for those who have to read it;
- Use black ink only to ensure legibility and to facilitate photocopying;
- Think about what is relevant and needs to be recorded - before recording;
- Do not record trivia;
- If unsure, consult with others before writing;
- Take care to ensure your style of writing is appropriate/professional (including in emails);
- Consider those who may read the record you write (including those under a Freedom of Information/Data Protection access request or a Court Order for Discovery);
- Identify the person the report relates to;
- Be factual, accurate and as objective as possible;
- Be specific and to the point: Avoid generalizations;
- Distinguish between facts and opinions;
- When expressing an opinion, enter: ~~in~~ in my opinion or ~~I think~~ I think;
- Record reasons for decisions, particularly if saying ~~No!~~ No!
- Sign and date the Record;
- Never use ~~post-it~~ post-it notes as part of official Records;
- Never write directly on correspondence received;
- Never use  ~~Tippex~~ Tippex® if you have made a wrong entry on the record. Strike out the entry with a single drawn line and make a new entry. The wrong entry must remain visible. Sign and date the new entry.

## Appendix 7

### Consent and the use of Photography, Video/Audio etcetera for the Purposes of Care and Treatment of People we Support

#### 1.1 Data/ Information

- Includes photographs, video/ audio recordings for ~~medical~~ purposes (see 1.3 below).

#### 1.2 Is Consent Required?

Consent is *not* required where the processing of Data is necessary for ~~medical~~ purposes and is undertaken by:

- A Health Professional, *or*
- A person who in the circumstances *owes a duty of confidentiality* to the Data Subject that is equivalent to that which would exist if that person were a Health Professional.

#### 1.3 Health Professional

A Health Professional means a person who is a medical practitioner, dentist, optician, pharmaceutical chemist, nurse or midwife, chiropodist, dietician, occupational therapist, orthoptist, physiotherapist, psychologist, child psychotherapist, or speech therapist (s. 3(a) (b) Statutory Instrument 82/1989 - Data Protection (Access Modification) (Health) Regulations, 1989).

#### 1.4 Medical Purposes

The definition of *medical purposes* includes the purposes of preventive medicine, medical diagnosis, medical research, the provision of care and treatment, and the management of healthcare services.

#### 1.5 Implied Consent

Consent may be *implied*, where the Data Subject provides information that will be recorded by a Health Professional or a person who owes an equal duty of confidentiality to the Data Subject, and the recording is for the purposes of preventive medicine, medical diagnosis, medical research (Data needs to be anonymised) the *provision of care and treatment*, and the management of health care services;

The Data Subject should be informed of the reasons *why* the Data will be recorded, with *whom* it may be shared, and the length of *time* it will be kept.

[cf. Data Protection Acts 1988/2003 s.2B(1)(b)(viii) & s.2B(4)]

## Appendix 8: Records Management Working Group

- Marguerite O'Brien, Head of Quality, Systems & Shared Services;
- Mary Fleming, Manager of Central Records Office;
- Bernie O'Sullivan, Head of Homes & Community 2 Division;
- Chris Traynor, FOI/ Data Protection Officer.

## **Appendix 9: Records & Research**

- Research is the systematic design, collection, interpretation, reporting and/or publishing of any such information relating directly or indirectly to any activity of COPE Foundation from time to time;
- The copyright and other proprietary rights in any work arising from research, shall belong to COPE Foundation;
- The protection of confidential information belonging to COPE Foundation and the privacy of the people we support and their families shall be of paramount importance in all research undertaken;
- Researchers hold responsibility for securing Records and data;
- Researchers must handle and store personal information under conditions of the highest possible confidentiality;
- All primary and secondary data must be stored in a secure and accessible form. Raw data (questionnaires, interview transcripts etc.) must be kept on file for a period of one year after completion of the research study. Following this period, all files must be destroyed in an appropriate manner.

## **Appendix 10: Correspondence Protocol**

COPE Foundation, as a general rule would discourage staff from having personal correspondence addressed to them at their business address. Accordingly it will presume that all post addressed to staff is in their business capacity, and it is therefore opened centrally in accordance with organizational procedures and distributed through the internal postal system.

### **Procedures for External Correspondence**

When assessments, letters, reports, e-mails, or faxes are received from external consultants, hospitals, medical and professional practitioners, or others, in respect of a person we support, the following protocol must be observed:

- Original of the correspondence must be sent to Central Records Office for placing in the person's Master File, with a.c.distribution to the Active File. ADEST to all other relevant staff who have access to ADEST; otherwise, a.c.to them.
- A copy of the item is to be held in the receiving Department;
- Where applicable, a copy of COPE Foundation's response, likewise marked, must be sent to Central Records Office.

### **Procedures for Internal Correspondence**

When assessments, letters, reports, e-mails, or faxes, are generated internally, in respect of a person we support, the following protocol must be observed:

1. Copy must be sent to Central Records Office for inclusion in the Master File and for a.c.+distribution by Central Records Office to appropriate internal Departments (including to the Active File);
2. Any additional copies required, over and above those created as per above protocol, must be sought from Central Records Office, and no other photocopies are to be made.