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Records Retention Schedule

Title:	Records Retention Schedule
Procedural document Type:	Policy
Reference:	IG009
Version:	Three
Approved and Ratified by:	Information Governance Forum
Date Approved:	March 2024
Name of responsible team:	Information Governance
Review Frequency:	As Required
Review Date:	March 2027
Target Audience:	All staff

Contents

1. Introduction	4
2. Purpose	4
3. Responsibilities and Decision Making.....	4
4. Interpretation of the Schedules	4
5. Final Action	5
6. Retention Periods	5
7. Who Makes the Decision Regarding Disposal and Destruction of	6
8. Health Records Retention.....	7
9. The CHC Records Retention Schedule	8
9.1 Health Records	8
10. Business and Corporate (Non-Health) Records Retention Schedule	12
10.1 Administrative (corporate and organisation).....	13
10.2 Estates/Engineering	17
10.3 Finance Records	20
10.4 Information Communication and Technology	26
10.5 Human Resources (HR)	27
10.6 Health and Safety (H&S).....	28
10.7 Fundraising	29
10.8 PR and Communications.....	30
10.9 Education	31
10.10 Retail.....	31
Appendix 1 - Equality Impact Assessment	32

Please Note the Intention of this Document

See Introduction

Review and Amendment Log

Version No.	Type of Change	Date	Description of change
One	New	February 2019	New document
Two	Update	August 2021	Reformatting
Three	Update	March 2024	Updating and Reformatting

1. Introduction

This policy provides information and advice about all records commonly found within Cornwall Hospice Care. The retention schedules apply to all the records concerned, irrespective of the format (e.g. paper, databases, e-mails, X-rays, photographs, CD-ROMS) in which they are created or held.

All 'other' organisation's patient documentation is returned to the parent organisation at the end of a patient stay.

2. Purpose

This policy sets out the periods for which the various records created within Cornwall Hospice Care should be retained, either due to their ongoing administrative value or because of a statutory requirement.

3. Responsibilities and Decision Making

The responsibility for managing individual information systems and the life cycle of associated records/data has been allocated to individual Information Asset Owners (IAOs).

Records of Cornwall Hospice Care may be subject to legal or regulatory requirements which impose a statutory duty of care directly upon all individuals who have direct responsibility for any such records i.e. IAOs. Information Asset Owners are responsible for the full lifecycle of records under their control.

4. Interpretation of the Schedules

TYPE OF RECORD: lists records created as part of a particular function. The schedule has grouped together records of major functions found in the Cornwall Hospice Care organisation.

MINIMUM RETENTION PERIOD: Records are required to be kept for a certain period due to statutory requirement or because they may be required for administrative purposes during this time. If the organisation decides it needs to keep records longer than recommended, it can vary the period accordingly and record the decision, and reason behind that decision on the retention schedule.

5. Final Action

At the end of the relevant retention period, one or more of the following actions will apply:

Review: records may need to be kept longer than the minimum retention period due to ongoing administrative need. As part of the review, the organisation should have regard to the UK GDPR which requires that personal data is not kept longer than necessary. If it is decided that the records should be retained for longer than the minimum period, the internal retention schedules will require amending accordingly and a further review date set. Otherwise, the following will apply:

Destroy: where the records are no longer required due to statutory requirement or administrative need and they have no long-term historical or research value. In the case of health records, this should be done in consultation with clinicians in the organisation.

NOTE: Patients can gain a copy of their medical records by making a Subject Access Request (SAR) under UK GDPR but should not be provided with original records.

6. Retention Periods

The minimum retention period should be calculated from the beginning of the year after the last date on the record e.g. a file where the first entry is February 2016 and last is September 2019 for which the retention period is seven years, should be kept in its entirety at least until the end of 2026.

Where retention periods set out in this schedule are based on legal or regulatory requirements Information Asset Owners should not apply a shorter retention period than the minimum set out in this Policy, but there may be circumstances in which they need to apply a longer retention period; such a change will require an entry into this schedule.

In respect of records containing personal data as defined by the UK GDPR, consideration should be given to the principle that personal data processed for a purpose shall not be kept for longer than is necessary for that purpose.

Under the UK GDPR the collection, use, storage and retention of all records containing personal data must have a legal basis, see the Data Protection Policy or ICO website for details.

7. Who Makes the Decision Regarding Disposal and Destruction of Records?

Information Asset Owners are responsible for the full lifecycle of their assets and associated data, including the disposal/destruction of records at the end of their lifecycle and defined retention period.

The principle options are to dispose (passing on to another organisation) or destroy the records. Staff in the operational area that uses the records will usually be the decision makers. Information Asset Owners are responsible for making sure all records are periodically and routinely reviewed to determine what can be disposed or destroyed, in the light of local and national guidance.

In respect of health records, the NHS's recommendation states that a multi-disciplinary Health Records Committee and/or Health Records User Group should be established to provide advice on local policy. Input from local healthcare professionals should be a key element of any records management strategy.

Once the appropriate minimum period has expired, the need to retain records further for local use should be reviewed periodically. Due to the sensitive and confidential nature of such records and the prerequisite to ensure that decisions on retention balance the interests of professional staff, including any research in which they may be engaged, and the resources available for storage, it is recommended that the views of the profession's local representatives should be obtained.

It is not possible to list every record type and category in the retention schedule. Where a record type is not listed Cornwall Hospice Care Information Asset Owners should consider how other organisations manage these record types and should carry out a risk assessment of the pros and cons of destroying the record or maintaining it for a prolonged period. Then decide how best to manage the record.

A guiding principle should be that once a record has been used, and will no longer be used, for the purpose it was created for and reaches the end of minimum retention period it can and should be deleted or destroyed. With

regard to records identifying data subjects or sensitive (as defined by the UK GDPR) information it is not acceptable to maintain records beyond the minimum retention period just in case they may be useful in the future.

8. Health Records Retention

This retention schedule details a 'Retention Period' for each type of health record. Records (whatever the media) may be retained for longer than the minimum period. However, records should not ordinarily be retained for more than 20 years, but there are exceptions. All Records containing personal information are subject to the UK GDPR and Data Protection Act 2018.

The following types of records are covered by this retention schedule (regardless of the media on which they are held, including paper, electronic, images and sound and including all records of NHS patients treated on behalf of the NHS)

- Patient health records, (electronic or paper-based, and concerning all specialties, including GP medical records).
- X-ray and imaging reports, output and images.
- Photographs, slides and other images.
- Microform (i.e. microfiche/microfilm) audio and video tapes, cassettes, CD-ROMs).
- E-mails.
- Computerised records.
- Scanned documents.

9. The CHC Records Retention Schedule

9.1 Health Records

TYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Health		
Adult health records not covered by any other section in this schedule.	8 years.	Basic health and social care retention period – check for any other involvements that could extend the retention. All must be reviewed prior to destruction taking into account any serious incident retentions. This includes medical illustration records such as X-ray, scans, photos as well as video and other formats.
Record of long-term illness or an illness that may reoccur.	20 years or 8 years after the patient has died.	Necessary for continuity of clinical care. The primary record of the illness and course of treatment must be kept of a patient where the illness may reoccur or is a life-long illness (such as diabetes, COPD, arthritis).
Admission books (where they exist in paper format).	8 years after the last entry.	Likely to have archival value. See section 5 'Final Action'.
Ambulance records patient identifiable component.	10 years (applies to All Ambulance Clinical Records).	
Body release forms.	2 years.	Destroy under confidential conditions.

TYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Care records-compiled by employees of Cornwall Hospice Care.	8 years after the patient's death.	Destroy under confidential conditions.
Clinical audit records.	5 years.	Destroy under confidential conditions.
Controlled drugs documentation.	Requisitions / Registers– 2 years. Registers and CDRBs – 2 years from last entry. FP10s – 2 years.	Destroy under confidential conditions.
Counselling records.	8 years after the last entry in the record or 10 years after the patient's death if patient dies whilst in the care of the organisation.	See section 5 'Final Action'.
Creutzfeldt-Jakob Disease (hospital, hospice and GP).	30 years from date of diagnosis, including deceased patients.	See section 5 'Final Action'.
Death – Cause of Certificate counterfoils.	2 years.	Destroy under confidential conditions.
Death registers – i.e., register of deaths kept by the hospice, where they exist in paper format.	Retain for 2 years.	Full dataset is available from ONS.
Discharge books (where they exist in paper format).	8 years after the last entry.	Likely to have archival value. See section 5 'Final Action'.

TYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Lymphoedema records.	Retain for the period of time appropriate to the patient/speciality. 20 years after the last entry in the record or 10 years after the patient's death if patient died whilst in the care of the organisation.	Destroy under confidential conditions.
Mortuary registers (where they exist in paper format).	10 years.	Destroy under confidential conditions.
Occupational health records (staff).	3 years after termination of employment unless litigation ensues.	Destroy under confidential conditions.
Accreditation documents: records of inspections.	10 years or until superseded.	Destroy under confidential conditions.
Serum following needlestick injury or hazardous exposure.	40 years or 6 years after member of staff leaves the Hospice.	
Refrigeration and freezer charts.	11 years.	
Resuscitation. Trolley / equipment checks.	1 year.	
Quality Assurance Environmental monitoring results.	As electronic record in perpetuity.	
Orders Invoices.	6 years. From end of year they relate to.	

TYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Order and delivery notes, requisition sheets, old order books. Inc Pharmacy / stores.	2 years. Current financial year plus one.	
Records/documents related to any litigation.	As advised by the organisation's legal advisor. All records to be reviewed. Normal review 10 years after the file is closed.	See section 5 'Final Action'.
Referral record (for patients who are treated by the organisation to which they were referred).	Electronic process currently via Advice Line.	Destroy under confidential conditions.
Subject Access Requests (SAR).	3 years from SAR completion.	Destroy under confidential conditions.
Clinical trials.	5 years.	The sponsor of the study will be the primary holder of the study and associated data. Refer to MHRA (Medicines and Healthcare Regulatory Agency) guidance.

10. Business and Corporate (Non-Health) Records Retention Schedule

This retention schedule details a Minimum Retention Period for each type of non-health record. Records (whatever the media) may be retained for longer than the minimum period. However, records containing personal information are subject to the UK GDPR and Data Protection Act 2018 i.e. should not be maintained for longer than the purpose(s) for which they were originally obtained.

The following types of record are covered by this retention schedule (regardless of the media on which they are held, including paper, electronic, images and sound).

- Administrative records (including personnel, estates, financial and accounting).
- Records and notes associated with complaint handling.
- Audio and video tapes, cassettes, CD-ROMs etc.
- E mails.
- Computerised records.
- Scanned documents.

The schedule is split into the following types of records:

- Administrative (corporate and organisation).
- Estates/engineering.
- Financial.
- Information communication and technology.
- Human resources.
- Fundraising.
- PR and Communications.
- Education.
- Retail.

10.1 Administrative (corporate and organisation)

Type/subtype of Record	Minimum Retention Period	Final Action
Administration		
Accident forms (see also Litigation dossiers).	10 years.	Destroy under confidential conditions.
Accident register (Reporting of Injuries, Diseases and Dangerous Occurrences register) – see also Incident forms.	10 years.	Destroy under confidential conditions.
Agendas of board meetings, committees, sub-committees (master copies, including associated papers).	30 years.	See para 4 'Final Action'.
Agendas (other).	2 years.	Destroy under confidential conditions.
Annual /corporate reports.	7 years.	See para 4 'Final Action'.
Audit Records (e.g. Organisational Audits, Records Audits, System Audits) – Internal &	2 years from the date of completion of the audit.	Destroy under confidential conditions.

Type/subtype of Record	Minimum Retention Period	Final Action
External in any format (paper, electronic etc.).		
Business plans, including local delivery plans.	Strategy plan 5 years. Corporate plan 2 years.	Destroy under confidential conditions.
Complaints (see also litigation dossiers) - Correspondence, investigation and outcomes - Returns made to Department of Health.	8 years from completion of action. Files closed annually and kept for 6 years following closure. NB: current policy on the handling of complaints if under review by the Department of Health and further guidance will be issued in due course.	Destroy under confidential conditions.
Flexi working hours (personal record of hours actually worked).	3 months.	Destroy under confidential conditions.
Health and safety documentation.	3 years.	Destroy under confidential conditions.
Incident forms (including Patient incident forms).	10 years.	Destroy under confidential conditions.
Manuals – policy and procedure (administrative and clinical, strategy document).	10 years after life of the system (or superseded) to which the policies or procedures refer.	Destroy under confidential conditions.

Type/subtype of Record	Minimum Retention Period	Final Action
Meetings and minutes papers of major committees and subcommittees (master copies).	30 years.	See para 4 'Final Action'.
Patient information leaflets.	6 years after the leaflet has been superseded.	See para 4 'Final Action'.
Patients' property books/registers (property handed in for safekeeping).	6 years after the end of the financial year in which the property was disposed of or 6 years after the register was closed.	Destroy under confidential conditions.
Patients Surveys (re access to services etc.).	2 years.	Destroy under confidential conditions.
Phone message Books.	1 month. NB Any clinical information should be transferred to the patient health record.	Destroy under confidential conditions.
Press cuttings.	1 year.	Destroy.
Press releases.	7 years.	See para 4 'Final Action'.
Quality assurance records (e.g. CQC, King's Fund).	12 years.	Destroy under confidential conditions.

Type/subtype of Record	Minimum Retention Period	Final Action
Records documenting the archiving, transfer to public records archive or destruction of clinical records.	30 years.	See para 4 'Final Action'.
Requests for access to records, other than Freedom of Information or subject access requests.	6 years after last action.	Destroy under confidential conditions.
Time sheets (relating to a Group or Department e.g. Ward where the timesheets are kept as a tool to manage resources, staffing levels).	6 months.	Destroy under confidential conditions.

10.2 Estates/Engineering

Type/subtype of Record	Minimum Retention Period	Final Action
Estates		
Buildings and engineering works, including major projects abandoned or deferred – key records (e.g. final accounts, survey, site plans, bills of quantities).	30 years.	See para 4 'Final Action'.
Buildings and engineering works, including major projects abandoned or deferred – town and country planning matters and all formal contract documents (e.g. executed agreements, conditions of contract specifications, 'as built' record drawings, documents on the appointment and conditions of engagement of private buildings and engineering consultants).	30 years.	See para 4 'Final Action'.

Type/subtype of Record	Minimum Retention Period	Final Action
Buildings – papers relating to occupation of the building (but not health and safety information).	3 years after occupation ceases.	Destroy under confidential conditions.
Deeds of title.	Retain while the organisation has ownership of the building unless a Land Registry certificate has been issued, in which case the deeds should be placed in an archive. If there is no Land Registry certificate, the deeds should pass on with the sale of the building.	See para 4 'Final Action'.
Maintenance contracts (routine).	6 years from end of contract.	Destroy under confidential conditions.
Manuals (operating).	Lifetime of equipment.	Review if issues (e.g. HSE are outstanding).
Medical device alerts.	Retain until updated or withdrawn (check MHRA website).	Destroy under confidential conditions.
Photographs of buildings.	30 years.	See para 4 'Final Action'.
Plans – building (as built)	Lifetime of building	May have historical value – See para 4 'Final Action'.

Type/subtype of Record	Minimum Retention Period	Final Action
Plans – building (detailed).	Lifetime of building.	May have historical value (See para 4 'Final Action').
Plans – engineering.	Lifetime of building.	See para 4 'Final Action'.
Property acquisitions dossiers.	30 years.	See para 4 'Final Action'.
Property disposal dossiers.	30 years.	See para 4 'Final Action'.
Site files.	Lifetime of site.	See para 4 'Final Action'.
Structure plans (organisational charts) i.e. the structure of the building plans.	Lifetime of building.	See para 4 'Final Action'.
Surveys – building and engineering works.	Lifetime of building or installation.	See para 4 'Final Action'.
Close circuit TV images.	31 days.	Erase Permanently.

10.3 Finance Records

As per Head of Finance November 2023

TYPE/SUBTYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Financial		
Accounts – annual (final – one set only).	20 years.	See section 5 ‘Final Action’.
Accounts – minor records (pass books, paying-in slips, cheque counterfoils, cancelled/ discharged cheques (for cheques bearing printed receipts, see Receipts), accounts of petty cash expenditure, travel and subsistence accounts, minor vouchers, duplicate receipt books, income records, laundry lists and receipts).	2 years from completion of audit.	Destroy under confidential conditions.
Accounts – working papers.	6 years from completion of audit.	Destroy under confidential conditions.
Advice notes (payment).	These are held within the system now. Previous Paper records, 6 years.	
Audit records (internal and external audit) – original documents.	2 years from complete audit.	Destroy under confidential conditions.

TYPE/SUBTYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Audit reports – internal and external (including management letters, value for money reports and system/final accounts memoranda).	2 years after formal completion by statutory auditor.	Destroy under confidential conditions.
Bank statements.	6 years from completion of audit.	Destroy under confidential conditions.
Banks Automated Clearing System (BACS) records.	6 years after year end.	Destroy under confidential conditions.
Benefactions (records of).	5 years after end of financial year in which the trust monies become finally spent or the gift in kind is accepted. In cases where the Benefaction Endowment Trust fund/ capital/interest remains permanent, records should be permanently retained by the organisation.	See section 5 'Final Action'.
Bills, receipts and cleared cheques.	6 years.	Destroy under confidential conditions.
Budgets (including working papers, reports, virements and journals).	2 years from completion of audit.	Destroy under confidential conditions.
Capital charges data.	2 years from completion of audit.	Destroy under confidential conditions.

TYPE/SUBTYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Capital paid invoices (see invoices).		
Cash books.	6 years after end of financial year to which they relate.	Destroy under confidential conditions.
Cash sheets.	6 years after end of financial year to which they relate.	Destroy under confidential conditions.
Contracts – financial.	If held by Finance - 15 years.	Destroy under confidential conditions.
Contracts – non-sealed (property) on termination.	6 years after termination of contract.	Destroy under confidential conditions.
Contracts – non-sealed (other) on termination.	6 years after termination of contract.	Destroy under confidential conditions.
Contracts – sealed (and associated records).	Minimum of 15 years, after which they should be reviewed.	See section 5 'Final Action'.
Contractual arrangements with hospices, hospitals or other bodies, including papers relating to financial settlements made under the contract (e.g. waiting list initiative, private finance initiative).	6 years after end of financial year to which they relate.	Destroy under confidential conditions.

TYPE/SUBTYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Cost accounts.	6 years after end of financial year to which they relate.	Destroy under confidential conditions.
Creditor payments.	6 years after end of financial year to which they relate.	Destroy under confidential conditions.
Debtor's records – cleared.	6 years after completion of audit.	Destroy under confidential conditions.
Debtors' records – uncleared.	6 years from completion of audit.	Destroy under confidential conditions.
Demands notes.	6 years after end of financial year to which they relate.	Destroy under confidential conditions.
Estimates, including supporting calculations and statistics.	3 years after end of financial year to which they relate.	Destroy under confidential conditions.
Excess fares.	2 years after end of financial year to which they relate.	Destroy under confidential conditions.
Expense claims, including travel and subsistence claims, and claims and authorisations.	6 years after end of financial year to which they relate.	Destroy under confidential conditions.
Fraud case files/investigations.	6 years.	Destroy under confidential conditions.
Funding data.	6 years after end of financial year to which they relate.	Destroy under confidential conditions.

TYPE/SUBTYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
General Medical Services Payments.	6 years after year end.	Destroy under confidential conditions.
Invoices.	6 years after end of financial year to which they relate.	Destroy under confidential conditions.
Ledgers, including cash books, ledgers, income and expenditure journals, nominal rolls, non-exchequer funds records (patient monies).	6 years after end of financial year to which they relate.	Destroy under confidential conditions.
Non-exchequer funds records (i.e. funding received by the organisation that does not directly relate to patient care e.g. charitable funds).	6 years. Company charities are required by company law to keep their accounts and accounting records for at least three years, but the Charity Commission recommends that they be kept for at least 6 years. The majority of noncompany charities must keep their accounts and accounting records for 6 years (part VI Charities Act 1993).	Although technically exempt from the Public Records Act, it would be appropriate for authorities to treat these records as if they were not exempt.
Patient Monies (i.e. smaller sums of donated money).	6 years.	Destroy under confidential conditions.
PAYE records	6 years after termination of employment	Destroy under confidential conditions.
Payments	6 years after year end.	Destroy under confidential conditions.

TYPE/SUBTYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Payroll (i.e. List of staff in the pay of the organisation).	6 years after termination of employment.	Destroy under confidential conditions for superannuation purposes, organisations may wish to retain such records until the subject reaches benefit age.
Receipts.	6 years after end of financial year to which they relate.	Destroy under confidential conditions.
Salaries (see Wages).		
Tax forms.	6 years.	Destroy under confidential conditions.
Cornwall Hospice Care documents without. permanent relevance/not otherwise mentioned.	6 years.	Destroy under confidential conditions.
VAT records.	6 years after end of financial year to which they relate.	Destroy under confidential conditions.
Wages/salary records.	6 years after termination of employment.	Destroy under confidential conditions.

10.4 Information Communication and Technology

For information Security reasons the retention periods of backups, emails and other ICT related data are not included within this publicly published schedule but may be requested by authorised individuals.

Type/subtype of Record	Minimum Retention Period	Final Action
ICT		
MS Teams (Chat and Meeting Records).	2 years.	Secure Deletion/ physical media shredded.
Email (Outlook/Exchange Online).	2 years.	Secure Deletion/ physical media shredded.
Subject Access Requests and Internal Investigations.	3 years.	Secure Deletion/ physical media shredded.
IT Logs and Incident Reports.	2 years.	Secure Deletion/ physical media shredded.
Member App Data (Including PCI-related Information).	3 years.	Secure Deletion/ physical media shredded.
Local File Systems.	Retention: As defined in the department's record retention policy.	Secure Deletion/ physical media shredded.
Documentation relating to computer programmes written in-house.	Lifetime of software / As defined in the relevant department's policy.	Secure Deletion/ physical media shredded.
Software licences.	Lifetime of software.	Secure Deletion/ physical media shredded.

10.5 Human Resources (HR)

TYPE/SUBTYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
HR		
NB Both medical staff records and agency locums, staff records should be treated as personnel records and retained accordingly.		
Employee files.	6 years Retention trigger: End of Employment.	See section 5 'Final Action'.
Disciplinary (disregarded for disciplinary purposes after end of warning period).	6 years Retention trigger: End of Employment.	See section 5 'Final Action'.
Driving Offences.	Annual Renewal after length of Offence. Retention trigger: Conviction becoming spent under Rehabilitation of Offenders Act 1974.	See section 5 'Final Action'.
Unsuccessful Recruitment.	1 year Retention trigger: Last Action.	See section 5 'Final Action'.
Third party emergency contact details provided by staff member.	Immediate Retention trigger: End of Employment.	See section 5 'Final Action'.
Photo id picture.	Immediate. Retention trigger: End of Employment.	See section 5 'Final Action'.
Completed Subject Access Request file.	2 years.	See section 5 'Final Action'.

10.6 Health and Safety (H&S)

Type/subtype of Record	Minimum Retention Period	Final Action
H&S		
Accident forms The FS203 standard form.	3 years for staff and public over 18 (this is to allow the time for claims to be made).	Destroy under confidential conditions.
Accident forms The FS203 standard form	Children. Form needs to be retained until they are 21. They have three years to mount a claim after turning 18. Even if their parents had claimed previously on their behalf they can initiate a claim as an adult.	Destroy under confidential conditions.
Risk Assessment (Health and Safety).	Minimum review 2 years, retain previous document as proof/reference.	Destroy under confidential conditions.
Health surveillance related to occupational diseases.	As a general rule, individual health records should be kept for at least 40 years from the date of the last entry. However, some regulations may require you to keep them for much longer as ill-health effects might not emerge for a very long period after exposure. (It is good practice to offer individual employees a copy of their health record when they leave your employment).	Destroy under confidential conditions.
Legionella Risk Assessment.	Review every two years, retain previous as reference and proof.	
Asbestos Management reports.	Annually reviewed keep last one for proof /reference.	

10.7 Fundraising

TYPE/SUBTYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Fundraising		
Personal data held within the Raisers Edge database i.e. supporters database and Carn Lottery Master and Draw Master Databases.	15 years after the last interaction with the individual.	Destroy under confidential conditions.
Paper records relating to personal and and/or other details concerning their participation and/or giving capacity, in any campaign supported by or organised by CHC.	6 years + current year. For clarity a Gift Aid Declaration of 6 years + current or over would still be valid if they remain giving, digital copies will be kept.	Confidential deletion/destruction of the records.
Lottery records.	Accounting records must be retained for a minimum of three years from the date of any lottery to which they relate and they must be made available for inspection by the (Gambling) Commission on request. These records must contain, in respect of each lottery, details of the total proceeds of each lottery, the expenses of the lottery, and the number of sold and unsold tickets. CHC retain Lottery records in line with Finance retention requirements i.e. 6 years + current year.	Confidential deletion/destruction of the records.

10.8 PR and Communications

TYPE/SUBTYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
PR & Comms		
Records relating to receiving communications about the activities of the Charity, including the annual information sheet.	These records will be maintained in full for the period of time that communications are maintained, when consent is withdrawn, the person leaves the area or dies - basic details will still be maintained to ensure that further communications are not inadvertently sent.	Confidential deletion/destruction of the records.
Media Consent Forms We keep as many as possible digitally, but paper copies are kept under lock and key.	Which we keep for 5 years.	They are then destroyed via the confidential waste system.

10.9 Education

TYPE/SUBTYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Education		
Blue Stream Academy training records.	18 months after end of employment.	See section 5 'Final Action'.
Clinical Skills training records.	18 months after end of employment.	See section 5 'Final Action'.

10.10 Retail

TYPE/SUBTYPE OF RECORD	MINIMUM RETENTION PERIOD	FINAL ACTION
Retail		
Records pertaining to Finance and Gift Aid.	6 years.	See section 5 'Final Action'.

Appendix 1 - Equality Impact Assessment

Section One

Name of the Policy to be assessed: Subject to Access Requests						
Area responsible for completion: Information Governance			Is this a new policy? NO A refresh of an existing policy? YES			
Name of individual completing EIA: Richard Ward			Contact details: rward@cornwallhospice.co.uk			
1. Policy Aim. Who is the policy aimed at?		All staff/volunteers.				
2. Policy Objectives.		To manage data retention periods.				
3. Policy intended outcomes.		Effective management of data lifecycle.				
4. How will you measure the outcome?		Through the reporting of data retention queries.				
5. Who is intended to benefit from the policy?		The Charity will benefit by being compliant with legislation, and minimising data retention.				
6. A) Who did you consult with?		Workforce	Patients	Local groups	External organisations	Other
		√				
B) Please list any groups who have been consulted about this policy.		Please record specific names of groups: The Director of Clinical Services, Director of Finance and Director of Income Generation, and all IAOs.				
C) What was the outcome of the consultation?		Approval to publish.				

7. The Impact

Please complete the following table. If you are unsure/do not know if there is a negative impact you need to repeat the consultation step.

Are there concerns that the policy **could** have a positive/negative impact on:

Protected Characteristic	Yes	No	Unsure	Rationale for Assessment/Existing evidence
Age		✓		This policy applies to all people and is therefore consistent in its approach regardless of any of the Protected Characteristics
Sex (male, female, non-binary, asexual etc)		✓		
Gender reassignment		✓		
Race/ethnic communities/groups		✓		
Disability (learning disability, physical disability, sensory impairment, mental health problems and some long-term health conditions)		✓		
Religion/other beliefs		✓		
Marriage and civil partnership		✓		
Pregnancy and maternity		✓		
Sexual orientation (bisexual, gay, heterosexual, lesbian)		✓		

If all characteristics are ticked 'no' and this is not a major working or service change, you can end the assessment here as long as you have a robust rationale in place.

Name of person confirming result of initial impact assessment and date:	Name Richard Ward	Date 26/3/2024
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