Records Retention Policy and Retention Schedule



Authorship	University Secretary's Office (Compliance)	
Approval authority	Senior Leadership Group	
Date of approval	11 June 2018	
Amended (if applicable)	February 2020	
Next review due	March 2023	

1. About this policy

- 1.1 The Records Retention Statement outlines the University's approach to records management, maintenance and retention; including adequate disposal and destruction of records in line with their sensitivity at the end of the retention period
- 1.2 The Records Retention Schedule is to advise the University departments on minimum and maximum retention periods on record types, illustrate the appropriate lawful basis under the General Data Protection Regulation under which such records are retained, and where records are suitable for archiving, preservation including preservation for research interests, recommendations on appropriate methods to secure any personal data;
- 1.3 For further advice, guidance or consultation on retention periods:

Compliance Team
University Secretary's Office
Bath Spa University
Data-protection@bathspa.ac.uk

2. Policy Statement

- 2.1 Bath Spa University generates academic and non-academic records about its staff, students and business. In order to operate effectively and efficiently, some of these records are stored and retained. The University is committed to managing these records in accordance with a clear and open policy.
- 2.2 The University recognises that a controlled process for the creation, management, storage and eventual destruction of records can bring administrative and financial benefits, it also assists to discharge legal obligations, particularly those created by the General Data Protection Regulations and accompanying Data Protection Act and Freedom of Information Act. The University is also subject to regulatory and accountancy rules concerning the creation and retention of particular records.
- 2.3 All University staff members must insure they are familiar with the content of this policy. The policy sets out the minimum expected standards of practice required in the management of the University's corporate records.

3. Guidance

- 3.1 Within this policy, 'records' are University data assets and includes information obtained by the University in a variety of formats. This includes both electronic and hard copies. It will include emails, paper, digital, social media, videos and telephone messages. All data assets will be considered records for purposes of this policy.
- 3.2 This includes a wide variety of information stored, gathered or created by the University. A large proportion of the records created by staff of the University may have little long term

- V1.0 11 June 2018
 use or benefit to the University and can be destroyed as soon as they no longer hold any operational, informational or evidential value to the University.
- 3.3 *Duplicate Records:* These are duplicates of master records noted within the schedule (for example, multiple sets of committee minutes or copies of correspondence in the possession of staff other than the Records Owner). Copies and duplicates of an original record do not need to be retained beyond their initial purposes. This policy and the appended retention schedule apply to the original master copy of the relevant record.
- 3.4 *Transitory Records:* These are records which have no significant on-going value after they have served their primary purpose. Some examples of Transitory Records are: draft documents and working materials which do not demonstrate significant steps in the development of a final version; Documents containing requests for information which have no further value after the information is provided or received; Items received only for information from elsewhere in the University; often as part of a distribution list; Items received only for information from external organisations. It is recommended that Transitory Records should be destroyed in the normal course of business when no longer required.
- 3.5 The General Data Protection Regulation and associated legislation: Under the updated data protection laws, the principles of Data Minimisation, Storage Limitation and Security guides the processing of data in its retention. Personal data must not be kept for longer than is necessary, and the University has a duty to notify data subjects of how long we will retain their data. The Schedule outlines the periods for data subjects and departments and staff must ensure that the schedule is adhered to.
 - This does not necessarily equate to the destruction or anonymisation of all personal data processed by the University. As reflected below, where we have an appropriate basis and justification for retaining data, such as retaining minimal student information relating to their award, where there is a reasonable expectation the University will be able to produce this record in the long term for the data subject concerned (such as provision of replacement certificates, transcripts or references) Further there are notable provisions that enable the retention of personal data where it is retained solely for research, statistics or public interest archiving, in line with appropriate safeguards.
- 3.6 Freedom of Information Act 2000: All records are potentially subject to requests under the Freedom of Information Act. This policy is intended to assist University staff to determine which records must be retained to comply with various obligations including those under the Freedom of Information Act, however, staff should be mindful that any record they create or retain is potentially subject to such a request. Whilst the appended retention schedule is non-exhaustive, staff should exercise care before retaining any additional records.
- 3.7 Financial and Health and Safety Legislation: The University is subject to a number of retention requirements for record keeping set in line with tax, payroll or pension purposes. In addition consideration must be paid to legislation around Money Laundering, Anti-Bribery etc. Similarly, various health and safety records (whether relating to general risk assessments or the specific health screening/monitoring of individuals) have to be retained for fixed periods.

- 3.8 Legal Records (Eg The Limitations Act 1980): Certain legal documents (e.g. contracts or deeds) necessitate a lengthy retention period. Even if a fixed retention period is not set out in a specific piece of legislation, many other records should be retained for a certain number of years to allow the University to defend itself from legal claims (e.g. proceedings brought under discrimination or employment legislation) or contractual disputes (e.g. with a supplier, collaborator or research sponsor).
- 3.9 Home Office and Immigration Legislation: As a registered Tier 4 and Tier 2 Sponsor, The University is subject to record keeping in line with Appendix D of the immigration rules, we are required to retain documents relating to immigration status, application for a role or a place on a course at the University, attendance and engagement records and details of any role changes. These periods may in some cases be less than standard retention periods laid out in the Schedule for core records or payroll information, if so care should be taken to ensure that the immigration records are minimised at the retention period end point specified in the Schedule.

4. Roles and Responsibilities

- 4.1 The University Secretary's Office is responsible for the maintenance of this policy, which applies to the University as a whole.
- 4.2 To this end, there will be an annual review of retention activities specific to selected departments undertaken by the Compliance team (within the University Secretary's Office)
- 4.3 Responsibility for implementing the policy (including adhering to the records retention schedule) rests with Heads of Schools, Pro Vice Chancellors, Heads of Departments and Line Managers. Overall responsibility for records management across the institution rests with the Vice-Chancellor.
- 4.4 All staff members are responsible for ensuring that records they create adhere to this policy. In particular, they must ensure that records are stored on the most appropriate medium, only created where necessary, stored securely and in a means by which they are easily accessible in the future, periodically reviewed and confidentially destroyed when no longer required.
- 4.5 Each department or service is responsible for nominating a person to be responsible for the implementation of this policy in their team. It is anticipated this individual will be aligned with departmental data asset managers. These nominated individuals details will be held as part of the retention schedule to ensure the University is able to undertake adequate monitoring in line with it's compliance activities.
- 4.6 The nominated departmental staff are responsible for reviewing records for historical value, the Bath Spa University Archive Collections Policy provides guidance on this, however the decision must be made by the relevant data owner with a substantial assessment of the necessary lawful basis in line with Data Protection laws. Therefore, if a 'Public Interest' basis applies, a Data Protection Impact Assessment in line with this intention must be completed by the data owner. For clarity, this must take place prior to ascertaining the appropriate storage location which may or may not be the Bath Spa University Archive.

4.7 Staff are responsible for developing systems to retain and destroy records in accordance with this policy and the appended retention schedule. Records must be managed to allow for efficient access and retrieval. It is intended that the implementation of this policy will enhance collaborative working and knowledge exchange.

5. Creation

- 5.1 It is recommended that records are stored electronically wherever possible. This will assist to reduce the costs of storage and aid easy access and retrieval. Stored records should ideally be indexed. Indexed electronic records should be retained in shared drives on the University server. Records should not be stored outside of the University's computer systems, for example, on Google Drive; or on local drives of desktop or laptop computers.
- 5.2 The University does not have a central storage facility for paper records. If staff wish to keep records in paper format, appropriate secure storage must be sourced and maintained for the relevant retention period. Paper records must be appropriately secured against damage, for example, by fire or water.

6. Destruction

- 6.1 On expiry of the relevant retention period, the person responsible for the record must review it and either make arrangements to destroy or secure the record (eg. remove any personal data) or, should there be grounds for extending the retention period, ensuring an adequate and auditable assessment and report on sufficient justification for doing so this should be undertaken in consultation with the Compliance team who will refer as necessary to the University Secretary or Data Protection Officer.
- 6.2 The content of the record should be considered for ongoing value to the University in line with the Bath Spa University Archive Collections Policy or the Bath School of Art and Design Collections Policy. In limited circumstances, where a record holds specific value to the establishment and history of Bath Spa, or specific value to the Bath School of Art and Design Collection, records may be suitable for permanent retention in the Bath Spa University Archive.
- 6.3 Once a decision has been made to destroy a record, it must be destroyed securely and confidentially. Paper records must be disposed of via the University's confidential waste bins. All IT assets (eg, hardware and records stored electronically) must be disposed of in line with the IT Asset recycling and Disposal Protocol.
- 6.4 Records must not be destroyed in response to requests under either the Data Protection Act or the Freedom of Information Act. It can be a personal criminal offence for University staff to destroy information requested under either of these Acts.

7. Review

V1.0 11 June 2018

8. The University Secretary's Office will review this policy at least every three years or sooner if updates are required as appropriate to comply with developments in legislation or good practice relevant to the sector.