



Title: **Content and Records Management - Sanctuary Policy**

Business Function: **All Functions across Sanctuary**

Authors: **Technology**

Authorised by: **Executive Committee**

Sanctuary:
Sanctuary Group is a trading name of Sanctuary Housing Association,
an exempt charity, and all of its subsidiaries.

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1. Policy statement

- 1.1 Sanctuary creates, collects and uses information in order to operate effectively and provide high quality services to its customers, whilst meeting its obligation to comply with regulatory requirements.
- 1.2 Sanctuary will:
 - only use information for the purposes it was collected;
 - only store information it requires and is entitled to store;
 - manage records in accordance with relevant laws, regulations and recognised best practice; and
 - dispose of records no longer needed, or entitled to be held, in a controlled and secure way. Records will be destroyed in accordance with the Sanctuary's Retention and Disposal Schedule.
- 1.3 The purpose of this policy is to define the Sanctuary's approach to records management. This will enable Sanctuary to define and control the creation, use, classification and disposal of documentation and information.

2. Roles and responsibilities

- 2.1 The Group Directors are responsible for ensuring adoption of, and adherence to, this policy and its associated procedures relevant to their operation.
- 2.2 This policy applies to all staff within Sanctuary. All staff members are responsible for reading and complying with this policy and its procedure, when dealing with records and documentation.
- 2.3 The Executive Committee is responsible for ensuring that records management is addressed at a strategic level.
- 2.4 Group Directors/Directors/Regional Managers (or equivalent) and Heads of Service are responsible for records management at the operational level and for ensuring that all aspects of this policy and the associated procedure are properly applied. They are also responsible for ensuring that all relevant retention requirements are incorporated into the Group's information retention rules.
- 2.5 Managers are responsible for implementing this policy and the associated procedure locally and ensuring that records and documents are managed consistently.
- 2.6 Sanctuary Retirement Living staff must ensure that consent from services users is obtained to record information on log sheets and that up to date and complete records are kept in a secure location.
- 2.7 The Information Security Manager has overall responsibility for implementing this policy across Sanctuary.

3. References and sources

3.1 The following references and sources were used to collate this policy and associated procedure:

- [Data Protection Act 2018 \(DPA 2018\)](#)
- [UK General Data Protection Regulation \(UK GDPR\)](#)
- [Health Records Act 1990](#)
- [National Housing Federation - Data retention for housing associations](#)
- [Care Quality Commission - Essential standards of quality and safety](#)
- [Information and Records Management Society](#)
- [ISO 15489](#)
- [BS 10008](#)
- [The National Archives](#)
- [National Midwifery Council - The Code including Record Keeping - guidance for nurses and midwives](#)
- [Chartered Institute of Personal Development - Retention of HR Records.](#)

4. Impact on diversity

4.1 This policy applies to all employees as outlined above.

4.2 Sanctuary demonstrates its commitment to diversity and promoting equality by ensuring that this policy is applied in a manner that is fair to all sections of the community, with due regard to the protected characteristics identified under the [Equality Act 2010](#) and in accordance with its [Inclusion for all - Equality, Diversity and Inclusion Strategy 2021-2024](#).

5. Customer consultation

5.1 This policy and the associated procedure is for the management of Sanctuary's records; therefore, customer consultation has not been undertaken.

6. Monitoring and compliance

6.1 This policy and the associated procedure will be reviewed annually by the Information Systems department. The retention and disposal schedule will be reviewed annually by Designated Officers within Sanctuary.

6.2 Period of review

6.2.1 Until a new policy is formally adopted this document will remain in force and operational.

6.2.2 This policy will be reviewed in accordance with the policy review programme agreed by Executive Committee.

6.2.3 If there are significant changes to legislation or regulation or there are found to be deficiencies or failures in this policy, as a result of complaints or findings from any independent organisations, the Information Security Manager/Group Director - Technology will initiate an immediate review.

6.2.4 Where appropriate, key stakeholders and interested parties will be consulted as part of any review of this policy.

7. Approval

7.1 This policy is approved by Sanctuary's Executive Committee.

8. Operational arrangements

8.1 The following Sanctuary policy and procedures to be consulted in conjunction with this policy and the associated procedure:

- [Data Protection - Sanctuary Policy and Procedure](#)
- [Archiving - Sanctuary Policy and Procedure](#)
- [Closed Circuit Television \(CCTV\) - Sanctuary Policy and Procedure](#)
- [Disciplinary - Sanctuary Procedure](#)
- [Homeworking - Sanctuary Procedure](#)
- [Acceptable Usage - Sanctuary Policy and Procedure](#)
- [Information Security - Sanctuary Policy](#) and the [Information Security Management System Manual](#)