



Prifysgol Cymru
Y Drindod Dewi Sant
University of Wales
Trinity Saint David

Records Management Policy

Mae'r ddogfen hon ar gael yn Gymraeg ac yn Saesneg | This document is available in Welsh and English

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1. Introduction

- 1.1 This policy is a high level document setting out the commitment to achieving high standards in the management of UWTSD's records, in whatever format they are held. The policy is supported by guidance and procedures that will guide records management processes on a day-to-day basis. The policy lays out the principles and institutional approach to the management of all types of records created and handled within the University, throughout their lifecycle of creation, maintenance and disposition.

Definitions

The policy applies the terms laid out in BS ISO 15489-1:2016 *Information and documentation - Records management*

Records Management: a corporate function that is responsible for the efficient and systematic control of the creation, receipt, maintenance, use and disposition of records, including processes for capturing and maintaining evidence and information of business activities and transactions in the form of records.

Records: recorded information created, received, and maintained as evidence and as an asset by an organisation or person, in pursuit of legal obligations or in the transaction of business.

Archives: records selected for permanent preservation due to their evidential or historical value.

Records lifecycle: the life of a record from its creation through a period of active use to becoming a 'semi-current' record. Semi-current records may be held in on- or off-site storage but may be referred to occasionally. Records are finally subject to disposal following the appropriate retention period. Records may be securely and confidentially destroyed or transferred to an archive service for permanent preservation.

2. Purpose

- 2.1 The policy demonstrates that UWTSD is committed to achieving compliance with the statutory Code of Practice on the management of records issued under Section 46 of the Freedom of Information Act 2000 (Code of Practice) and to comply with relevant practice guidance issued by appropriate regulatory bodies. It draws on good practice guidance and principles issued by the Office of the Information Commissioner, JISC and The [UK] National Archives.
- 2.2 UWTSD recognises information as a vital resource that requires high levels of protection and proper management by professionally qualified staff, in line with the statutory Code of Practice. Robust records management procedures are necessary:

- to ensure that records are authentic, accurate, accessible, comprehensive, compliant and secure
- to support the efficient and effective management of the University by ensuring information is available when and where it is needed
- to support the operational and administrative needs of its core functions
- to provide accurate and reliable evidence of its decisions and activities
- to ensure compliance with all legal obligations

3. Scope

- 3.1 The Policy applies to all records, regardless of form or medium, which are created, received or maintained on behalf of the University by its officers and staff in the operation of corporate functions. It also applies to records created, received or maintained by any contractors or temporary employees working on behalf of the University.

4. Policy

- 4.1 The policy is a statement of the University's commitment to records management procedures and aims to ensure that:

- a professionally qualified member of staff has responsibility and oversight for records management strategy and procedures within the University
- all records vital to the operation of the University are identified, systematically managed in an appropriate manner and effectively preserved.
- records are created to adequately support and document the decisions and activities undertaken within the University and to comply with any regulatory framework.
- records are authentic, reliable and accurate.
- records can be accessed by staff who have a business need to see them and are held in a manner that aids location and swift retrieval.
- access to records is preserved as long as they are required to support University functions.
- records are stored securely in a dedicated area with appropriate temperature/humidity controls and adequate shelving for as long as necessary: physical records and digital carriers are vulnerable to damage and loss if stored in unsuitable conditions, such as low/high or fluctuating temperatures, high levels of humidity, or inadequate shelving.
- all records are disposed of in an organised, efficient and appropriate manner, in line with the records retention schedules.
- suitable records are identified, selected and retained for permanent preservation as an historic record of the University.
- UWTSD and its staff can comply with all relevant legislation.

- advice, training and guidance is available to all staff on any aspect of records management.
- 4.2 Archives are records selected for permanent preservation as part of the University's Institutional Archives as an enduring record of the conduct of business, evidence of actions and decision-making, and for the purposes of historical research. Only a small percentage of the University's records will be selected for permanent preservation, either in Swansea or the Roderic Bowen Library and Archive in Lampeter.

Roles and Responsibilities

- 4.3 The University has a corporate responsibility to maintain its records and record keeping systems in accordance with all regulatory requirements. The senior manager with overall responsibility for this policy is the Head of Special Collections and Archives.
- 4.4 The Head of Special Collections and Archives has oversight of the storage of paper records on and off University property, as well as the development and management of the Records Management service throughout the University.
- 4.5 The Archives and Records Officer will act as the point of contact for all departments to offer advice and disseminate good practice. This will be supported by training and meetings with departments to view how records are being managed and offer advice and guidance to ensure compliance with this policy.
- 4.6 Oversight for the management of files in each department, faculty or section should be allocated to an individual in each department. The designated individual should act as the point of a liaison with the Archives and Records Officer concerning all aspects of records management and cascade good practice throughout their department. This will help to ensure the integration of records management throughout the University and provide a means of sharing good practice.
- 4.7 Individual employees must ensure that the records for which they are the identified owner are accurate and reliable and are maintained and disposed of securely and in accordance with Records Management guidelines. Records that relate to individuals, whether staff or students or others, are confidential and should be treated as such at all times and in accordance with the principles of the Data Protection Act 2018.

Data disposal and destruction

- 4.8 Implementation of the disposal of records should follow the consultation of the appropriate section of the records retention schedules to determine the appropriate retention period. Departments should maintain a log when records are disposed of, including details of the method, a certificate of confidential destruction (if appropriate), and the date and by whom the disposal was authorised.

Confidential waste disposal procedures are subject to change so are not set out in detail in this policy. Regularly reviewed and updated procedures for disposal of confidential paper records are available to University staff and students on the intranet. Further advice can be obtained from Records Management and Operations staff.

Digital information should be destroyed by a method appropriate to the sensitivity or security classification of the information. Destruction/deletion of electronic records should be permanent, which means all known copies and versions of the information, including printed out versions and digital back-ups, have been destroyed or deleted and cannot be recovered by processes within the control and capability of the authority.

Deletion from a server may not be sufficient. The records may no longer be visible but they are not beyond any possibility of recovery. More extreme measures may be needed to achieve full destruction, e.g. overwriting with random digital code enough times to eliminate the data.

Staff should contact IS&T for support and up-to-date advice in permanently destroying data.

5. Monitoring

- 5.1 The Archives and Records team will liaise with departmental contacts to check that disposal of records is ongoing and being appropriately recorded.

6. Misuse of Policy

- 6.1 Maintaining records that are not in accordance with this policy presents challenges to the University in terms of gaining access to relevant information and being able to store and preserve records in accordance with the University's Records Retention schedules. Non-compliance with legislation such as the Data Protection Act can lead to substantial penalties.

7. Links to other policies

The Data Protection Policy

The Freedom of Information Scheme

Record Retention Schedules

Data Security Policy

Waste Policy

Research Data Management Policy and guidance

This policy also needs to be considers in conjunction with Records Management guidance documents issued by the Head of Special Collections and Archives.

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Document version control

Version No:	Reason for change:	Author:	Date of change:
0.1	First draft of policy	G Fildes	18/12/2014
0.2	Consultation with Claire Godden, Corporate Services		22/12/2014
0.3	Revisions and amendments made		30/06/2015
0.4	Further amendments made after consultation with Alison Harding, Library Services		29/09/2015
0.5	Additions made to reflect comments from James Cale		30/09/2015
2.0	Version approved by Council		15/03/2016
2.1	Policy updated and significantly amended	Sian Collins	11/09/2024

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Is the Policy applicable to: Both FE and HE

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Approval

The policy will be formally considered and approved in accordance with Committee Terms of Reference outlined in the Academic Quality Handbook.

If the policy affects staff, advice should be sought from HR at the outset to ascertain if consultation is required at JCC. HR will also provide advice on the most appropriate stage to consult with JCC and on whether approval by Council is required

ALL policies submitted for approval must be accompanied by a completed:

- [Equality Impact Assessment](#)
- [Institutional Impact Assessment](#)
- [Data Protection Impact Assessment](#)

Prior to submission to committee, authors are asked to consult the Policy and Planning Team who will check that the document complies with University requirements. The Policy and Planning Team will complete the section below.

For completion by the committee secretary

Please tick to confirm the following:

An institutional Impact Assessment has been completed ☒

An EIA has been completed ☒

A PIA has been completed ☒

Matters requiring consideration by the approving committee:



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