# **RETENTION OF RECORDS**

**PTUK REGISTRANTS** 

PLAY THERAPY UK (PTUK)
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#### **Retention of Records**

#### Introduction

PTUK registrants have a responsibility to maintain their records and record-keeping systems. When doing this, registrants will take account of the following factors:

- The most efficient and effective way of storing records and information;
- The confidential nature of the records and information stored;
- The security of the record systems used;
- Privacy and disclosure; and
- Their accessibility.

This policy reflects PTUK's requirements of current legislation and best practice and guidance.

#### **Data Protection**

This policy sets out how long clinical data will be held by PTUK registrants and when that information will be confidentially destroyed in compliance with the terms of the General Data Protection Regulation (GDPR) and the Freedom of Information Act 2000.

Registrants' Data Protection Policies outline their duties and obligations under the GDPR.

The GDPR defines 'personal data' as any information relating to an identified or identifiable natural person (a 'data subject'). An identifiable natural person is one who can be identified, directly or indirectly, in particular by reference to an identifier such as a name, an identification number, location data, an online identifier, or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural, or social identity of that natural person.

The GDPR also addresses 'special category' personal data (also known as 'sensitive' personal data). Such data includes, but is not necessarily limited to, data concerning the data subject's race, ethnicity, politics, religions, trade union membership, genetics, biometrics (if used for ID purposes), health, sex life, or sexual orientation.

Under the GDPR, personal data shall be kept in a form which permits the identification of data subjects for no longer than is necessary for the purposes for which the personal data is processed.

In addition, the GDPR includes the right to erasure or 'the right to be forgotten'. Data subjects have the right to have their personal data erased (and to prevent the processing of that personal data) in the following circumstances:

- Where the personal data is no longer required for the purpose for which it was originally collected or processed such as, decided therapy is no longer required;
- When the data subject withdraws their consent;

- When the data subject objects to the processing of their personal data and the PTUK registrant has no overriding legitimate interest;
- When the personal data is processed unlawfully (i.e., in breach of the GDPR);
- When the personal data has to be erased to comply with a legal obligation.

### Retention Schedule (Appendix 1)

Information (hard copy and/or electronic) will be retained for the period specified in the attached retention schedule. When managing records, PTUK registrants will adhere to the standard retention times listed within Data Retention Schedule, pg.3.

The schedule lists the many types of records used by PTUK registrants and the applicable retention periods for each record type. The retention periods are based on legal requirements.

Data types and associated retention periods may be added or updated at intervals between reviews as appropriate.

## Archiving and transferring information to other media

Where records have been identified as being worthy of preservation over the longer term including closed client files (PTUK/PTI Parental consent form, Parent/Carer Interview form, SDQ, Session records, Supervision records).

PTUK registrants may wish to consider converting paper records to other media such as digital media or virtual storage centres (such as cloud storage). The lifespan of the media and the ability to migrate data where necessary has been considered by PTUK/PTI.

#### **Responsibility and Monitoring**

PTUK/PTI registrants have primary and day-to-day responsibility for implementing this Policy. Their Data Protection Policy should identify the Data Protection Officer (DPO) who is responsible for monitoring its use and effectiveness and dealing with any queries on its interpretation. The DPO will consider the suitability and adequacy of this policy and review accordingly.

## **Therapeutic Executor**

PTUK/PTI registrants have a professional and ethical obligation to prepare for the unexpected. Every PTUK/PTI Registrant must appoint a therapeutic executor and have the right plans in place. (See: Therapeutic Executor Guidance, Alms, Resources).

# **Destruction of records**

Where records have been identified for destruction within the Data Retention Schedule they should be disposed of in an appropriate way. All information must be reviewed before destruction to determine whether there are special factors that mean destruction should be delayed, such as potential litigation, complaints or grievances.

All paper records containing personal information, or sensitive policy information should be securely shredded before disposal. All electronic information must be deleted.

PTUK registrants should maintain a database of records which have been destroyed, recording:

- File reference (or other unique identifier);
- File title/description;
- Number of files.

# **Data Retention Schedule**

| File Description                              | Retention Period                                       |  |
|---|--|--|
| Health and Safety Records                     |  |  |
|   |  |  |
| Health and Safety Risk Assessments            | 6 years from the life of the risk assessment           |  |
| Any reportable accident, death or injury in   | Adults – 6 years from the date of the incident         |  |
| connection with clinical work                 | Children – Until the child's 26 <sup>th</sup> birthday |  |
| Accident reporting                            | Adults – 6 years from the date of the incident         |  |
|   | Children – Until the child's 26 <sup>th</sup> birthday |  |
| Clinical Records                              |  |  |
| Client details, including:                    | Until the child's 26 <sup>th</sup> birthday            |  |
| <ul> <li>Location records</li> </ul>          |  |  |
| Contact details                               |  |  |
| Client records                                |  |  |
| Parental Consent                              |  |  |
| Episode records                               |  |  |
| SDQ scores                                    |  |  |
| Session records                               |  |  |
| Confidential reports                          |  |  |
| Supervision records                           |  |  |
| Supervisor details                            | For 6 years  |  |
| Supervision Logs                              | For 6 years  |  |
| Continuous Professional Development records   |  |  |
| Training records, including CPD plans and CPD | For 6 years  |  |
| logs  |  |  |
| Emails  |  |  |
| Day to day operational emails mentioning      | Until the child's 26 <sup>th</sup> birthday            |  |
| clients or parents/carers                     |  |  |
| Email correspondence from parents/carers      | Until the child's 26 <sup>th</sup> birthday            |  |

| DOCUMENT INFORMATION:               |                            |
|-------------------------------------|----------------------------|
| Date Written: 01/11/2022            | Written by: Amber Cawley   |
| Ratified by: Monika Jephcott, CEO   | Date ratified: 30/11/2022  |
| Date of next review: 30/11/2023     |                            |
|                                     |                            |
| Date review carried out: 23/04/2025 | Review completed by: Radek |
|                                     | Kwietniewski               |