



# AUSTRALASIAN COLLEGE OF LEGAL MEDICINE

## ACLM Document Access, Retention and Disposal Policy

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## Policy

### 1. Introduction

- 1.1. The Australasian College of Legal Medicine (ABN 90 076 857 031) (ACLM) handles a variety of documents in its operations, including practitioner CPD Records.
- 1.2. The purpose of this Document Access, Retention and Disposal Policy (this **Policy**) is to enable ACLM to satisfy the applicable legal requirements for access, retention and disposal requirements for documents which it creates or collects, and holds.
- 1.3. For the purposes of the Privacy Act, ACLM is a 'small business operator' and is therefore not subject to the APPs in the Privacy Act. However, as a matter of ACLM policy, ACLM handles personal information in a manner consistent with the Privacy Act and APP requirements.

### 2. Scope

- 2.1. This Policy applies to all ACLM staff.

### 3. Definitions

- 3.1. In this Policy, the following definitions apply, unless the context requires otherwise:
  - 3.1.1. **AMC** means the Australian Medical Council, and any successor to the AMC.
  - 3.1.2. **APPs (or Australian Privacy Principles)** means the Australian Privacy Principles contained in the Privacy Act.
  - 3.1.3. **CPD** means continuing professional development.
  - 3.1.4. **CPD Records** means records of CPD activities undertaken by ACLM members and other practitioners, and related information such as the practitioner's area of expertise, qualifications, biography, details of exemptions to CPD requirements granted, annual CPD plans, and any AMC accredited 'CPD Homes' that they engage with.
  - 3.1.5. **Document (or record)** means any record of information (including a copy or part of such information), and includes:
    - a) anything on which there is writing; or
    - b) anything on which there are marks, figures, symbols or perforations having a meaning for persons qualified to interpret them; or
    - c) anything from which sounds, images or writings can be reproduced with or without the aid of anything else; or
    - d) a map, plan, drawing or photograph.



For the purposes of this Policy, the terms 'document' and 'record' are used interchangeably.

- 3.1.6. **Electronic Transactions Legislation** means the *Electronic Transactions Act 1999* (Cth), and the equivalent legislation in the States and Territories.
- 3.1.7. **Health information** is a type of personal information and sensitive information, and means information or an opinion about:
- a) the health or a disability of an individual; or
  - b) an individual's expressed wishes about the future provision of health services to them; or
  - c) a health service provided, or to be provided, to an individual that is also personal information, or other personal information collected to provide a health service; or
  - d) other personal information about an individual collected in connection with the donation, or intended donation, by the individual of his or her body parts, organs or body substances; or
  - e) genetic information about an individual in a form that is, or could be, predictive of the health of the individual or a genetic relative of the individual.
- 3.1.8. **Health Practitioner Law** means the *Health Practitioner Regulation National Law* set out in the schedule to the *Health Practitioner Regulation National Law Act 2009* (Qld), as applied in each State and Territory.
- 3.1.9. **Practitioner Board** means the Medical Board of Australia or the Dental Board of Australia, as the case requires, each as established under the Health Practitioner Law, and any successors to those Boards.
- 3.1.10. **Member** means an ACLM member in any ACLM membership category.
- 3.1.11. **Personal information** means information or an opinion, whether true or not and whether recorded in material form or not, about an individual who is identified or reasonably identifiable. Sensitive information and health information are types of personal information.
- 3.1.12. **Policy** (or 'this Policy') means this document.
- 3.1.13. **Practitioner** means an individual who practises the medical or dental profession.
- 3.1.14. **Privacy Act** means the *Privacy Act 1988* (Cth).
- 3.1.15. **Privacy Officer** means the ACLM Privacy Officer appointed in accordance with section 14 of this Policy.



- 3.1.16. **Privacy Policy** means ACLM Privacy Policy, as amended from time to time, and made available on the ACLM website.
- 3.1.17. **Sensitive information** is a type of personal information, and means information or an opinion about an individual's racial or ethnic origin, political opinions or membership of a political association, religious beliefs or affiliations, philosophical beliefs, membership of a professional or trade association or trade union, sexual orientation or practices, criminal record, or health information, genetic information (that is not health information), or biometric information.
- 3.1.18. **Staff** means ACLM officers, employees, contractors and volunteers as applicable.

#### 4. Effective document management

- 4.1. Documents created and collected by ACLM are valuable assets. Effective document management will enable ACLM to:
  - 4.1.1. provide ACLM with an information source in relation to its current business activities, and support its future business activities;
  - 4.1.2. be supported in its policy and procedure formation and managerial decision making;
  - 4.1.3. ensure that ACLM is open and accountable to its stakeholders;
  - 4.1.4. meet its legislative record keeping requirements;
  - 4.1.5. in respect of CPD Records, ensure that practitioners can access and download electronic records of their completion of registration requirements and CPD activities (both current and historical), and also monitor and evaluate their own progress towards meeting CPD requirements;
  - 4.1.6. provide consistency and continuity in the event of disaster; and
  - 4.1.7. be supported with appropriate documentary evidence in the event of legal proceedings concerning ACLM's activities.
- 4.2. In relation to ACLM's status as a body corporate registered under the *Corporations Act 2001* (Cth), effective document management will also enable ACLM to:
  - 4.2.1. develop financial and other reports to meet reporting obligations to the Australian Securities and Investments Commission (**ASIC**) and other government regulators or authorities; and
  - 4.2.2. show that ACLM meets its obligations under the *Corporations Act 2001* (Cth) and taxation legislation, including in relation to financial and operational record keeping and governance.



## 5. General requirements for ACLM's document management

- 5.1. The ACLM document management system must have characteristics including the following in order to ensure that its documents reflect the transaction, communication or other action performed by ACLM:
  - 5.1.1. **Reliability:** Documents should accurately represent the activities or facts to which the documents attest so that they can be relied upon. Documents should be made at the time of the relevant activity to which they relate. The document management system should provide adequate information about the documents controlled within the system.
  - 5.1.2. **Integrity:** Documents must remain complete and unaltered. The document management system must prevent unauthorised access, use, modification or removal of documents.
  - 5.1.3. **Compliance:** Documents generated by ACLM staff and the document management system must allow compliance with all relevant record keeping legislative requirements.
  - 5.1.4. **Accessibility:** The document management system must allow for prompt identification of and access to documents for authorised persons, or across an authorised organisational area. Documents generated by ACLM staff must be capable of such identification and access.

## 6. Requirements for CPD Records

- 6.1. In addition to the above general requirements in section 5 of this Policy, in respect of any CPD Records collected or created, and held by ACLM, the ACLM document management system must:
  - 6.1.1. ensure that CPD Records are able to be accessed and downloaded by practitioners in electronic format;
  - 6.1.2. support practitioners to complete and maintain registration requirements under the Health Practitioner Law in relation to CPD activities;
  - 6.1.3. enable practitioners to monitor and evaluate their own progress towards meeting CPD requirements and to access historical and current records;
  - 6.1.4. support ACLM staff to maintain accurate and complete CPD Records;
  - 6.1.5. comply with applicable privacy laws;
  - 6.1.6. support audit of CPD Records by practitioners, relevant Practitioner Boards, or any other relevant regulator or authority; and
  - 6.1.7. integrate multiple formats or systems of information, where they are used.



- 6.2. In respect of any CPD Records created or handled by ACLM staff, all such staff must comply with the following principles and requirements:
  - 6.2.1. Maintaining clear and accurate CPD Records is essential for the appropriate recording, monitoring and evaluation of CPD activities undertaken by practitioners.
  - 6.2.2. CPD Records created by staff must be recorded in a form that can be understood by practitioners, staff, relevant regulators, and other stakeholders.
  - 6.2.3. CPD Records must be held securely and are protected against unauthorised access, in accordance with the requirements of this Policy and the Privacy Policy.
  - 6.2.4. CPD Records should be documented contemporaneously, or as soon as possible after the relevant CPD activity or interaction.
  - 6.2.5. Any additions or changes to CPD Records should be dated.

## **7. Creation, filing and storage of documents**

- 7.1. Documents must be created, classified and captured within the relevant member or practitioner record (for member services or CPD activities), or an appropriate file that relates to a particular function, activity or transaction of ACLM. Such records and other ACLM files may be physically or electronically stored.
- 7.2. CPD Records should contain all relevant information regarding the relevant practitioner, including records of CPD activities they have undertaken, and related information such as the practitioner's area of expertise, qualifications, biography, details of exemptions to CPD requirements granted, annual CPD plans, and any AMC accredited 'CPD Homes' that they engage with. Each practitioner should have their own separate record (or set of integrated records), with a unique identifier or file number.
- 7.3. Member records should contain all relevant information regarding the relevant member, including the services received from and interactions with ACLM. Each member should have their own separate record (or set of integrated records), with a unique identifier or file number.
- 7.4. Members who undertake CPD activities and have CPD Records may have all of their relevant membership and CPD records integrated and accessible under the one record or account.
- 7.5. For ACLM files that are not CPD or membership records:
  - 7.5.1. Files should bring together all related documents of that particular function, activity or transaction. For example, a file may contain minutes of meetings of the ACLM Board, or a file may concern a particular property leased by ACLM and contain all lease related documentation.



- 7.5.2. New files should be created for any new transactions, activities, functions or projects commenced by ACLM (where use of an existing file is not appropriate).
- 7.5.3. Files, and the documents within those files, must be labelled and marked with appropriate identifying information or indicators, such as a file number or date and/or a unique title (e.g., 'File no.: Board meeting minutes – 2023.01.01').
- 7.5.4. Physical files must be organised into appropriate storage areas, cabinets, folders, envelopes etc.
- 7.6. If there is a file in relation to which there are both electronic and hard copy documents, the relevant electronic and hard copy versions of the files must be labelled identically so they can be associated with each other.
- 7.7. In relation to financial or operational documents and files, these must be organised to relate to the relevant reporting period (e.g. financial year).
- 7.8. All ACLM staff must ensure that documents under their control are securely stored and protected against damage, and that they are not subject to misuse, interference or loss, or unauthorised access, modification or disclosure.
- 7.9. ACLM management staff are responsible for ensuring that staff within their organisational area store documents in accordance with this Policy, through the development of procedures and systems specific to that area and the training of staff.

## **8. The laws which apply to document access, retention and disposal**

- 8.1. As ACLM operates nationally, various pieces of legislation at Federal and State and Territory level govern its handling, retention and disposal of, and access to the documents it holds.
- 8.2. The Table in Schedule 1 of this Policy sets out the specific minimum retention periods for certain categories of documents, and lists the applicable Federal, State and/or Territory laws, or other applicable requirements or guidelines for retention.
- 8.3. If a document fits into more than one category in the Table, the longest stated retention period applies.
- 8.4. In addition to the obligations of ACLM to retain documents in accordance with its legislative obligations, in the event that any document is, or is reasonably likely to be, required as evidence in a legal proceeding, that document must be retained until the relevant legal proceedings have been completed, or until they are no longer reasonably likely to be required in legal proceedings (see further discussion in section 11 of this Policy).
- 8.5. Where there is no reference in the Table in Schedule 1 of this Policy or other legislative guidance as to the period a particular type of document must be retained (and the document is not required for the purpose of legal proceedings as discussed in section 11 of this Policy), the record must be retained for at least 7 years. The 7-year period is intended to cover relevant statutory limitation of actions periods across all jurisdictions.





## 9. Disposal of ephemeral or facilitative documents

- 9.1. The destruction of certain 'ephemeral' or 'facilitative' documents may occur under normal administrative practice without retention for a minimum period. Such documents include:
  - 9.1.1. working papers consisting of rough notes or calculations that do not document significant decisions, discussions, information or reasons, and which were used solely to assist in the preparation of another document;
  - 9.1.2. extra copies of documents preserved solely for reference; and
  - 9.1.3. mail, e-mail, phone messages or other messages or notes which are unrelated to the functions and activities of ACLM (e.g. non-work-related emails or messages).

## 10. Electronic document retention

- 10.1. Retention of documents in electronic format is permitted where this is in accordance with the Electronic Transactions Legislation across Australia.
- 10.2. In broad terms, the Electronic Transactions Legislation provides that if a person is required to keep a document in paper form, that requirement will be met if the document is kept in electronic form if:
  - 10.2.1. the method of generating the electronic form of the document provides a reliable means of assuring the integrity of the information contained in the document (e.g. scanned documents are complete and unaltered); and
  - 10.2.2. at the time the electronic form of the document was generated, it was reasonable to expect that the information contained in the electronic form of the document would be readily accessible and useable for subsequent reference.
- 10.3. (See, for example, section 12 of the *Electronic Transactions Act 1999* (Cth), and the equivalent provisions in State and Territory electronic transactions legislation.)
- 10.4. The legislative retention periods for electronic records and hard copy/paper records do not differ.

## 11. Document retention in the event of anticipated legal proceedings or claims

- 11.1. The destruction of a document which is reasonably likely to be required as evidence in legal proceedings can amount to a criminal offense. See, for example:
  - 11.1.1. section 39 of the *Crimes Act 1914* (Cth); and
  - 11.1.2. section 129 of the Queensland Criminal Code (contained in the *Criminal Code Act 1899* (Qld)).
- 11.2. ACLM may also need to rely on such documents in order to establish, exercise or defend legal proceedings.



- 11.3. Therefore, even if the legislative period for retaining a document has expired, a document which is reasonably likely to be required as evidence in legal proceedings, (both existing and reasonably anticipated legal proceedings), must be retained until it is no longer required for such proceedings.
- 11.4. Whether a document is ‘reasonably likely to be required in legal proceedings’ must be assessed on a case by case basis, considering factors such as whether the document describes or could lead to a dispute, complaint, litigation, claim, investigation, Coronial process, or any other legal proceedings, and whether by commenced by ACLM or any other persons. Staff should seek legal advice if they require guidance on this assessment.
- 11.5. Such documents must be retained until the relevant legal proceedings have been completed, or until they are no longer reasonably likely to be required as evidence in legal proceedings.

## 12. Disposal and de-identification of documents

### Introduction

- 12.1. As discussed in this Policy above, documents must be retained in accordance with all legislative requirements, including satisfaction of the particular retention periods for certain types of documents. This includes retaining documents that are reasonably likely to be required as evidence in legal proceedings (see further discussion in section 11 of this Policy).
- 12.2. As a general rule, after these retention periods have been satisfied, the documents *may* be destroyed.
- 12.3. However, in relation to any documents that contain personal information, under the Privacy Act (APP 11), ACLM *must* take reasonable steps to destroy or de-identify the personal information when the legislative document retention period is met, it is no longer needed for any lawful purpose for which it can be used (e.g. if a document containing the personal information is no longer used for the purpose for which it was lawfully collected), and is otherwise not required to be retained under law or by a Court or Tribunal order.

### Disposal of documents

- 12.4. Documents that may be disposed of must be destroyed or permanently deleted securely and definitively. This process must occur as follows:
  - 12.4.1. for those documents held in hard copy:
    - a) the relevant ACLM manager responsible for retention of the documents in question must arrange for the secure shredding, pulping, burning or pulverising of the documents; and



- b) the relevant ACLM manager may procure the use of a recognised document destruction company for this action with the prior approval of the ACLM Chief Executive Officer; and
- c) the relevant ACLM manager must report the destruction of the documents, including the date range of the documents, to the ACLM Privacy Officer.

12.4.2. for those documents held in electronic format:

- a) the relevant ACLM manager responsible for retention of the documents in question must arrange for either:
  - (i) the 'sanitising' of the relevant IT hardware to completely remove the information (with assistance of ACLM IT staff as required); or
  - (ii) if information is stored on a third party's hardware (e.g. cloud storage), instruction of the third party to destroy the information and confirmation in writing with the third party that this has occurred; and
- b) the relevant ACLM manager must report the destruction of the documents, including the date range of the documents, to the ACLM Privacy Officer.

### **De-identification of documents**

- 12.5. In respect of documents which contain useful operational information (for example, statistical data relating to practitioners), ACLM may wish to de-identify these documents for ongoing use.
- 12.6. The Privacy Act provides a definition of 'de-identified' information, which is personal information that is 'no longer about an identifiable individual or an individual who is reasonably identifiable'.
- 12.7. The process of de-identifying documents will therefore require the removal or alteration of information that identifies an individual or is reasonably likely to do so, which will generally involve:
  - 12.7.1. removing personal identifiers, such as a person's name, address, date of birth or other identifying information; and
  - 12.7.2. removing or altering other information that may allow a person to be identified, for example, because of a rare characteristic of they have, or a combination of unique or remarkable characteristics that enable identification.
- 12.8. However, ACLM staff should be aware that the process of de-identification of documents may not altogether remove the risk that a person can be re-identified. If, for example,



ACLM held or was provided with other data/information regarding a person, which could be matched with information in the de-identified document to actually identify a person, then that 'de-identified' document will contain re-identified personal information.

- 12.9. Therefore, when staff are de-identifying documents, the risk of re-identification must be assessed and managed to mitigate this risk, such as by ensuring there are no related documents or sources of information which could readily re-identify a person in the de-identified document. For further information on the de-identification process, staff should refer to the Office of the Australian Information Commissioner's online resource, [De-identification and the Privacy Act](#).

### **13. The Privacy Act and the ACLM Privacy Policy**

- 13.1. Documents created or collected, and held by ACLM, may contain a person's personal information.
- 13.2. As a matter of policy, ACLM has chosen to handle personal information in a manner consistent with the requirements of the Privacy Act and the APPs.
- 13.3. The Privacy Act and the APPs govern the collection, use, disclosure, security, disposal, access to, and correction of, personal information.
- 13.4. The requirements under the Privacy Act and APPs are reflected in the ACLM Privacy Policy, and staff must refer to and comply with the Privacy Policy in tandem with this Policy when handling documents that contain personal information.
- 13.5. Specific requirements when dealing with requests for access to personal information are set out in section 14 of this Policy, which must be read in conjunction with the Privacy Policy.

### **14. Access to CPD Records and personal information**

- 14.1. Members can log into their ACLM website account and access selected information which may include their account profile and CPD information. This includes members being able to access and download electronic records of their completion of registration requirements and CPD activities. By logging into their accounts, members will also be able to monitor and evaluate their own progress towards meeting CPD requirements and to access historical and current records.
- 14.2. Persons who provide personal information to ACLM will otherwise have a general right of access to this information. This personal information may, for example, be contained in member records of other records held by ACLM.
- 14.3. Persons who provide personal information to ACLM must be notified of their rights of access when providing the information. This information may be provided when individuals are provided with the ACLM Privacy Policy or when they are otherwise notified of these



rights through the ACLM website, or through the relevant interactions they have with ACLM.

- 14.4. Access to personal information held by ACLM may be requested by a person contacting ACLM (in accordance with the Privacy Policy), or other ACLM staff members who will facilitate the access request.
- 14.5. An individual who would like to request access to their personal information should be asked to provide their request in writing (or assisted by ACLM staff to provide their request in writing), and provide any necessary evidence of their identity. Standard format request forms may be utilised by ACLM for this purpose. However, a person must not be required to use a standard form or use a particular request procedure, or provide reasons for their request if they do not wish to do so.
- 14.6. ACLM will appoint a 'Privacy Officer' to collect and manage all access requests. The Privacy Officer may appoint delegates to assist with this process.
- 14.7. All access requests must be forwarded to the Privacy Officer.
- 14.8. If the request for access is unclear, or further information regarding the identity of the person making the request is required, confirmation of these details should be sought to the extent practicable.
- 14.9. An individual's right to access their personal information will not be absolute, and consistent with the permitted grounds for refusal of access under the APPs, requests for access may be refused where:
  - 14.9.1. giving access would pose a serious threat to the life, health or safety of any individual (e.g. access to the information would cause significant distress or lead to self-harm or harm to another person), or to public health or public safety;
  - 14.9.2. giving access would have an unreasonable impact on the privacy of other individuals. For example, where personal information or opinion about the individual is provided on a confidential basis by a third party, it may be unreasonable to allow access to that information;
  - 14.9.3. the request for access is frivolous or vexatious. For example, where there has been repeated requests for access to personal information that has already been provided to the requester, or the request contains offensive or abusive language, or does not appear to be genuine;
  - 14.9.4. the requested information relates to existing or anticipated legal proceedings between ACLM and the individual, and would not be accessible by the process of discovery in those proceedings;
  - 14.9.5. giving access would reveal the intentions of ACLM in relation to negotiations with the individual in such a way so as to prejudice those negotiations;



- 14.9.6. giving access would be unlawful;
  - 14.9.7. denying access is required or authorised under law or by a Court or Tribunal order;
  - 14.9.8. giving access would prejudice ACLM from taking appropriate action in relation to suspected unlawful activity or serious misconduct relating to its functions or activities;
  - 14.9.9. giving access would be likely to prejudice the prevention, detection or investigation of unlawful activities by an enforcement body (e.g. the police); or
  - 14.9.10. giving access would reveal evaluative information generated within ACLM in connection with a commercially sensitive decision-making process.
- 14.10. ACLM must give a person access to their personal information in the manner requested if reasonable and practicable to do so (subject to any circumstances in which access may be refused as specified above).
- 14.11. The Privacy Officer, in consultation with the relevant ACLM manager responsible for retention of the personal information and/or the ACLM Chief Executive Officer as necessary, must review all records and approve or refuse the request of personal information prior to release.
- 14.12. A register of all written requests must be held by the Privacy Officer.
- 14.13. A decision on whether to allow or refuse access will be provided to the person making the request within 30 days.
- 14.14. If a person's request for access is refused or partly refused, then they must be provided with a written notice which sets out:
- 14.14.1. the reasons for the refusal, except to the extent that, having regards to the reason for the refusal, it would be unreasonable to do so; and
  - 14.14.2. the mechanisms available to complain about the refusal, in accordance with ACLM's Privacy Policy and any ACLM complaints policy.
- 14.15. If access is refused, or the manner in which access has been requested is refused, ACLM must take reasonable steps to provide access in a way that meets the needs of ACLM and the person, such as by providing a redacted version of the information requested with deletion of information for which there is a ground for refusing access (e.g. deleting any third party information, or commercially sensitive information), or giving a summary of the information.
- 14.16. If the reason for refusing access is that the personal information is no longer held by ACLM (e.g. because it has been destroyed or de-identified), this must be set out in the written notice.



- 14.17. ACLM must not charge an individual for making a request to access their personal information. ACLM may, however, impose a charge for giving such access, provided the charge is not excessive. Items that may be charged for include staff costs in collating, reproducing and sending the information, and the costs of postage and materials.

## 15. Roles and responsibilities

- 15.1. ACLM management staff:
- 15.1.1. ACLM management staff must develop systems to monitor compliance with this Policy in their organisational area, including:
- a) compliance with relevant legislative obligations for retention and disposal of documents handled in the relevant organisational area; and
  - b) whether any modification to systems is required in the organisational area to meet the requirements under this Policy.
- 15.2. Other ACLM Staff:
- 15.2.1. Other ACLM staff must comply with this Policy when handling documents.

## 16. Related documents

- 16.1. ACLM Privacy Policy
- 16.2. ACLM Complaints Handling Procedure (draft)
- 16.3. ACLM Record Access Register
- 16.4. ACLM Complaints Register
- 16.5. ACLM CPD Register

## 17. Implementation and review

- 17.1. This Policy should be reviewed no less than every 2 years.

<b>Policy version</b>	1
<b>Last review date</b>	12 June 2023
<b>Approved by Council</b>	19 June 2023



## Schedule 1 – Retention periods table

### TABLE

#### Notes:

- *The Table below sets out the minimum document retention periods.*
- *If a document fits into more than one category in the Table, the longest stated retention period applies.*

### 1. CPD RECORDS

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
CPD Records, being: <ul style="list-style-type: none"> <li>• records of CPD activities undertaken by ACLM members and other practitioners, and related information such as the practitioner's area of expertise, qualifications, biography, details of exemptions to CPD requirements granted, annual CPD plans, and any AMC accredited 'CPD Homes' that they engage with.</li> </ul>	No specific legislative requirement.	5 years following completion of the relevant CPD year to which the records relate.	Retention period covers the periods required by: <ul style="list-style-type: none"> <li>• the <i>Registration standard: Continuing professional development – Medical Board of Australia – 1 January 2023</i>, which requires retention of records of annual CPD activity for audit by a CPD Home and the Board for 3 years after the end of each one-year cycle; and</li> <li>• the <i>Registration standard: Continuing professional development   Dental Board of Australia – 1 December 2015</i>, which requires retention of records of CPD activity for 5 years.</li> </ul>

### 2. CORPORATE

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
Constitutions/governing laws	<i>Corporations Act 2001 (Cth)</i> : section 1300	Indefinite.	Books (including constitutions) that are kept under Act must be available for inspection at all times.
Certificates of incorporation	<i>Corporations Act 2001 (Cth)</i> : sections 118 and 1274(7A)	Indefinite.	Section 1274(7A) of the Act notes the evidentiary value of certificates of registration as to the fact that the requirements of registration have been complied with at the relevant time.
Registers: <ul style="list-style-type: none"> <li>• of members/shareholders; and</li> <li>• of option holders and debenture holders (if applicable).</li> </ul>	<i>Corporations Act 2001 (Cth)</i> : sections 168 – 171, 173 and 1300	Indefinite.	Registers kept under the Act must be available for inspection at all times.
Registers: <ul style="list-style-type: none"> <li>• of directors; and</li> <li>• of company secretaries.</li> </ul>	No specific legislative requirement.	Indefinite.	Retention period recommended for evidentiary value. Section 205B of the <i>Corporations Act 2001 (Cth)</i> requires that ASIC is notified of the personal details of a director or secretary within 28 days after they are appointed, and under section 205E of the Act ASIC has power to ask for information about a person's position as director or secretary.
Records of voting on resolutions.	<i>Corporations Act 2001 (Cth)</i> : section 225	7 years after the relevant resolution is passed.	





Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
Books containing minutes of meetings (general or extraordinary) and other proceedings of: <ul style="list-style-type: none"> <li>members;</li> <li>directors; and</li> <li>committees of directors.</li> </ul>	<i>Corporations Act 2001</i> (Cth): sections 251A and 1300	Indefinite.	Books kept under the Act must be available for inspection at all times.
Books containing records of resolutions passed by members, or passed by directors.	<i>Corporations Act 2001</i> (Cth): sections 251A, and 1300	Indefinite.	Books kept under the Act must be available for inspection at all times.
Annual reports	No specific legislative requirement.	7 years.	Retention period in line with financial records retention period under section 286 of the <i>Corporations Act 2001</i> (Cth).
Company or committee records relating to strategy, planning, policy (and not otherwise covered in this 'CORPORATE' section)	No specific legislative requirement	Indefinite.	These documents are valuable business assets which may facilitate future planning and policy development.

### 3. ACCOUNTING AND FINANCE

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
<ul style="list-style-type: none"> <li>Annual financial reports</li> <li>Annual directors' reports</li> <li>Auditor's reports</li> </ul>	No specific legislative requirement.	7 years recommended.	Part 2M of the <i>Corporations Act 2001</i> (Cth) Act requires preparation of these documents.  Retention period in line with financial records retention period under section 286 of the <i>Corporations Act 2001</i> (Cth).
Written financial records, including: <ul style="list-style-type: none"> <li>general account books (including general journal and general and subsidiary ledgers);</li> <li>cash book records (including daily receipts and payments);</li> <li>invoices;</li> <li>banking records (including bank statements, deposit books, cheque butts and bank reconciliations);</li> <li>creditors records (including creditors ledger, invoices and paid bills);</li> <li>debtors records (including debtors ledger, invoices and receipts);</li> <li>details of any contracts;</li> <li>details of any grant payments and acquittals;</li> <li>stock records;</li> <li>records of expenses;</li> <li>assets list or register; and</li> <li>communications relating to finance (emails and letters), for example an email about repaying unspent grant funds; and</li> <li>working papers and other documents needed to explain the methods by which financial statements are made up and any adjustments to be made in preparing financial statements.</li> </ul>	<i>Corporations Act 2001</i> (Cth): section 286	7 years after the transactions covered by the records are completed.	The financial records must correctly record and explain the transactions, financial position and performance of ACLM, and enable true and fair financial statements to be prepared and audited.
Records relating to security interests, security agreements, and registration of security interests on the Personal Property Securities Register (PPSR) under the <i>Personal Property Securities Act 2009</i> (Cth).	No specific legislative requirement.	Retain for 7 years after the term of the relevant security.	



#### 4. TAX

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
Tax records (records that explain all transactions and other acts engaged in by the person that are relevant for any purpose of the <i>Income Tax Assessment Act 1936</i> (Cth)).	<i>Income Tax Assessment Act 1936</i> (Cth): section 262A	Retain for: <ul style="list-style-type: none"> <li>• 5 years after records are prepared or obtained; or</li> <li>• 5 years after the completion of the transactions to which those records relate, whichever is later.</li> </ul>	The retention period will be extended if the Commissioner of Taxation extends an assessment period to which those records relate beyond the usual 5 years, in which case the records must be retained until the completion of that assessment period.
Tax related documents that are created or prepared to explain the methods by which financial statements are made up and any adjustments to be made in preparing financial statements.	<i>Corporations Act 2001</i> (Cth): section 286	7 years after the transactions covered by the records are completed.	
Records relating capital gains tax (CGT), being records of every act, transaction, event or circumstance that can reasonably be expected to be relevant to working out whether there has been a capital gain or capital loss from a CGT event.	<i>Income Tax Assessment Act 1997</i> (Cth): section 121-25	Keep records for 5 years after a CGT event has happened, and no further CGT can happen such that the records will be relevant.	The records must be in English, or be readily accessible and convertible into English.
Records relating to fringe benefits tax, being records which are relevant for the purpose of ascertaining an employer's liability under the <i>Fringe Benefits Tax Assessment Act 1986</i> (Cth).	<i>Fringe Benefits Tax Assessment Act 1986</i> (Cth): section 132	5 years after the completion of the transaction or acts to which they relate.	The records must be in English, or be readily accessible and convertible into English.
Records relating to the following State and Territory imposed taxes (to the extent applicable): <ul style="list-style-type: none"> <li>• land tax;</li> <li>• payroll tax; and</li> <li>• stamp duties.</li> </ul>	<i>Taxation Administration Act 1996</i> (NSW): section 53; <i>Taxation Administration Act 1997</i> (Vic): section 55; <i>Taxation Administration Act 1999</i> (ACT): section 64; <i>Taxation Administration Act 1996</i> (SA): section 53; <i>Taxation Administration Act 2008</i> (NT): section 79; <i>Taxation Administration Act 1997</i> (Tas): section 63; <i>Taxation Administration Act 2003</i> (WA): section 87; <i>Taxation Administration Act 2001</i> (Qld): section 118	Retain for the latest of: <ul style="list-style-type: none"> <li>• 5 years after records are prepared or obtained;</li> <li>• 5 years after the completion of the transactions to which those records relate; or</li> <li>• 2 years after the end of the assessment period to which the record relates.</li> </ul>	The retention period reflects the maximum retention period applicable across all jurisdictions.



## 5. SUPERANNUATION

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
Records relating to superannuation obligations of an employer, including any documents relevant to ascertaining the individual superannuation guarantee shortfalls of the employer for a quarter. (For employee contribution records, see below.)	<i>Superannuation Guarantee (Administration) Act 1992</i> (Cth): section 79	5 years after the records were prepared or obtained, or the completion of the transactions or acts to which the records relate, whichever is later.	The records must be in English, or be readily accessible and convertible into English.
Records of superannuation contributions made to employees, including the amounts and dates of payment, the names of the employee funds, and the records of employee elections of superannuation funds.	<i>Fair Work Act 2009</i> (Cth): section 535  <i>Fair Work Regulations 2009</i> (Cth): regulation 3.37	7 years.	Records must be in a legible form in the English language and readily available to an inspector.

## 6. INSURANCE RECORDS

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
<ul style="list-style-type: none"> <li>Insurance policies</li> <li>Insurance certificates</li> </ul>	No specific legislative requirement.	Indefinite.	
Loss summaries and reports.	No specific legislative requirement.	7 years.	
Insurance audit letters and reports.	No specific legislative requirement.	7 years.	
Insurance claim records.	No specific legislative requirement.	7 years after completion of action in relation to claim.	
Records relating to annual renewal of insurance policies.	No specific legislative requirement.	7 years.	

## 7. CONTRACTS/AGREEMENT DOCUMENTATION

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
Contracts and agreements, including memoranda of understanding (MOUs), service agreements, goods/procurement agreements, but <b>not</b> including dealings in real property nor any agreements in the form of a deed or executed under seal.	No specific legislative requirement.	7 years after expiry or ending of contract or agreement.  If there is no expiry date specified and the contract or agreement has not formally ended, retain for 7 years after completion of all obligations under the relevant contract or agreement.	Contract or agreement may have an expiry date or may otherwise end (for example, through termination).  The 7 year retention period also covers the maximum period under limitation of actions legislation across all jurisdictions within which action must be taken.
Contracts and agreements in the form of a deed or other agreements executed under seal, but <b>not</b> including dealings in real property.	No specific legislative requirement.	15 years after expiry or ending of deed or agreement under seal.  If there is no expiry date specified and the contract or agreement has not formally ended, retain for 15 years after completion of all obligations under the relevant contract or agreement.	Contract or agreement may have an expiry date or may otherwise end (for example, through termination).  The 15 year retention period covers the maximum period under limitation of actions legislation across all jurisdictions within which action must be taken.



## 8. PROPERTY RECORDS

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
Contracts and agreements relating to real property, such as leases and purchases and sales of land.	No specific legislative requirement.	15 years after disposal of property or expiry of relevant contract or agreement, whichever is later.	The retention period covers the maximum period under limitation of actions legislation across all jurisdictions within which action must be taken.
Property registers.	No specific legislative requirement.	15 years after disposal of property.	The retention period covers the maximum period under limitation of actions legislation across all jurisdictions within which action must be taken.
Records documenting property construction, renovation or repair activities, including rectification of defective building work.	No specific legislative requirement.	7 years after completion of works.	The retention period covers the maximum period under limitation of actions legislation across all jurisdictions within which action must be taken.
Records documenting accidents and damage to property.	No specific legislative requirement.	7 years after completion of action to rectify accidents or damage.	The retention period covers the maximum period under limitation of actions legislation across all jurisdictions within which action must be taken.
Records relating to construction, renovation, demolition, repair, fit-out, or other works for property <b>where asbestos was present</b> .	No specific legislative requirement.	Indefinite.	Retention period reflects that there are no limitation period for claims for asbestos related diseases in limitation of actions legislation in certain jurisdictions.

## 9. HUMAN RESOURCES

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
Employee records, including: <ul style="list-style-type: none"> <li>name, commencement date and employment status;</li> <li>pay and overtime records and rates of pay;</li> <li>leave records;</li> <li>superannuation records; and</li> <li>records of termination of employment.</li> </ul>	<i>Fair Work Act 2009</i> (Cth): section 535  <i>Fair Work Regulations 2009</i> (Cth): regulations 3.31 – 3.44	7 years.	Records must be in a legible form in the English language and readily available to an inspector.  This requirement relates specifically to employees under the <i>Fair Work Act 2009</i> (Cth), rather than staff generally.
Volunteer records, including name, commencement date, and volunteer activities engaged in.	No specific legislative requirement.	7 years.	Retention period in line with <i>Fair Work Act 2009</i> (Cth): section 535 in respect of employees.
Employee rosters	<i>Fair Work Act 2009</i> (Cth): section 535  <i>Fair Work Regulations 2009</i> (Cth): regulations 3.33 and 3.34	7 years.	Record keeping obligations under the <i>Fair Work Regulations 2009</i> (Cth) relate to pay, hours of work and overtime, and employee rosters should be retained for the equivalent period to substantiate any pay claims.  This requirement relates specifically to employees under the <i>Fair Work Act 2009</i> (Cth), rather than staff generally.
Staff training and education records	No specific legislative requirement.	7 years.	Retention period in line with <i>Fair Work Act 2009</i> (Cth): section 535 in respect of employees.



## 10. WORK HEALTH AND SAFETY

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
<b>Miscellaneous records</b>			
Records of notifiable workplace incidents	<i>Work Health and Safety Act 2011</i> (Cth)*: section 38	15 years from the date the notice of the incident is given to the relevant regulator.	<p>*Uniform work health and safety laws apply in all jurisdictions apart from Victoria. For the purposes of this Policy, only the Commonwealth legislation will be referred to in relation to the uniform laws.</p> <p>A <b>notifiable incident</b> means: the death of a person; or a serious injury or illness of a person; or a dangerous incident.</p> <p>A <b>dangerous incident</b> means workplace incident that exposes a worker or any other person to a serious risk to health or safety, including where there is an immediate or imminent exposure to the following: an uncontrolled implosion, explosion or fire; an uncontrolled escape of gas or steam; or electric shock.</p> <p>Notices must be provided to the relevant regulator.</p> <p>Note that the statutory retention period under the specified Commonwealth legislation is 5 years from the date the notice of the incident is given to the relevant regulator.</p> <p>However, the retention period of 15 years is recommended for evidentiary value, given the potential for claims that may arise from notifiable incidents, and to cover the maximum periods under limitation of actions legislation across all jurisdictions within which action must be taken.</p>
Health monitoring records, reports and assessments relating to the workplace (where not specified elsewhere in this Table).	No specific legislation.	Recommended retention for 30 years after the completion, or last entry, of the record, report or assessment.	<p>Recommended period in line with retention period for health monitoring reports specified in Table below.</p> <p><b>Health monitoring</b>, of a person, means monitoring the person to identify changes in the person's health status because of exposure to certain substances (regulation 5 of the <i>Work Health and Safety Regulations 2011</i> (Cth)).</p>
<b>Asbestos</b>			
Health monitoring records relating to asbestos.	<i>Work Health and Safety Regulations 2011</i> (Cth): regulation 444	40 years after record is made.	<p>A 'person conducting a business or undertaking' (PCBU) must ensure that health monitoring is provided to a worker carrying out licensed asbestos removal, or asbestos-related work and is at risk of exposure to asbestos.</p> <p>A PCBU, who is usually the employer of the worker, has the primary duty of care under the <i>Work Health and Safety Act 2011</i> (Cth).</p>
<b>Electrical work</b>			
Records relating to inspection and testing of electrical equipment.	<i>Work Health and Safety Regulations 2011</i> (Cth): regulation 150	Keep records until electrical equipment is next tested, or until the equipment is permanently removed from the workplace or disposed of.	



Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
<b>Environment</b>			
Records of air monitoring.	<i>Work Health and Safety Regulations 2011</i> (Cth): regulation 50	30 years after the record is made.	Regulation 50 requires that a PCBU must ensure that air monitoring is carried out to determine the airborne concentration of a substance at the workplace to which an exposure standard applies where there is uncertainty as to the airborne concentration of the substance at the workplace exceeds the relevant exposure standard, or monitoring is necessary to determine whether there is a risk to health.
<b>Hazardous chemicals</b>			
Health monitoring records, reports and assessments relating to hazardous chemicals and worker exposure to hazardous chemicals.	<i>Work Health and Safety Regulations 2011</i> (Cth): regulation 378	30 years after the completion, or last entry, of the record, report or assessment.	A PCBU must ensure that health monitoring is provided to a worker carrying out ongoing work handling hazardous chemicals and there is a significant risk of exposure to a hazardous chemical.
<b>Workers' compensation records</b>			
Registers of workplace injuries.	No specific legislation.	15 years.	Retention period recommended for evidentiary value.
(a) Workers' compensation claim records and documentation not specified in (b).  (b) Workers' compensation claim records and documentation relating to injuries resulting from asbestos or dust-related disease, or tobacco or smoke-related disease.	No specific legislation.	(a) 15 years after claim is resolved.  (b) Retain indefinitely.	Retention periods recommended for evidentiary value and to cover the maximum periods under limitation of actions legislation across all jurisdictions within which action must be taken.  For (b), note that there is no limitation period for claims relating to these diseases in limitation of actions legislation in certain jurisdictions.

## 11. QUALITY MANAGEMENT

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
Records relating to the accreditation or certification of services or facilities by external accreditation, industry and/or professional bodies.	No specific legislation.	Retain for 7 years after accreditation or certification has renewed or lapses.	
Records relating to compliance with permits and licences required for the operation of services or use of equipment (where not specified elsewhere in this Table).	No specific legislation.	Retain for 7 years after expiry or renewal of relevant permit of licence.	
Records documenting compliance with legislation, such as legislative compliance registers or self-assessment tools.	No specific legislation.	7 years.	
<ul style="list-style-type: none"> <li>• Consumer complaints</li> <li>• Consumer satisfaction surveys</li> </ul>	No specific legislation.	7 years.	
Serious incident/investigation records.	No specific legislation.	30 years after last action.	Thirty year period is recommended for evidentiary purposes as there may be related claims and investigation of such incidents by relevant authorities.
Internal and external audit records relating to quality management and risk functions, including audit reports and records documenting changes made to procedures as a result of an audit.	No specific legislation.	7 years.	
Other quality and risk reports, records and documentation (where not specified elsewhere in this Table).	No specific legislation.	7 years.	



## 12. POLICIES AND PROCEDURES

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
Records documenting a policy which prescribes functional, operational or administrative matters of significance (e.g. personnel or finance policies, or other policies which affect all of ACLM).	No specific legislative requirement.	Indefinite.	Such policy documents are valuable business assets and may facilitate future policy development.
Records documenting a policy which prescribes or refers to administrative functions of minor significance.	No specific legislative requirement.	Retain for 7 years after procedure is superseded or updated.	
Records of ACLM's procedures including manuals, handbooks and directives.	No specific legislative requirement.	Retain for 7 years after procedure is superseded or updated.	

## 13. LEGAL SERVICES

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
Legal advice received from internal and external legal service providers	No specific legislative requirement.	15 years after organisational use of the legal advice has concluded.	
Records documenting requests for legal advice	No specific legislative requirement.	7 years after administrative use has concluded.	
Records created and received under subpoenas and legal discovery processes.	No specific legislative requirement.	15 years after legal proceeding has concluded.	

## 14. DOCUMENTS LIKELY TO BE REQUIRED IN LEGAL PROCEEDINGS

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
Any document that is, or is reasonably likely to be, required as evidence in a legal proceeding.	<i>Crimes Act 1914</i> (Cth): section 39; <i>Crimes Act 1900</i> (NSW): section 317; <i>Crimes Act 1958</i> (Vic): section 254; <i>Criminal Code Act Compilation Act 1913</i> (WA): section 132; <i>Criminal Code Act 1899</i> (Qld): section 129; <i>Criminal Law Consolidation Act</i> (SA): section 243; <i>Criminal Code 2002</i> (ACT): section 706; <i>Criminal Code Act 1924</i> (Tas): section 99; <i>Criminal Code Act 1983</i> (NT): section 102	Retain until the relevant legal proceedings have been completed, or until no longer reasonably likely to be required in legal proceedings.	Whether a document is 'reasonably likely to be required in legal proceedings' must be assessed on a case by case basis, considering factors such as whether the document describes or could lead to a dispute, complaint, litigation, claim, investigation, Coronial process, or any other legal proceedings, and whether by commenced by ACLM or any other persons. Staff should seek legal advice if they require guidance on this assessment.



## 15. CORRESPONDENCE AND INTERNAL MEMORANDA

Description of record	Legislation applicable	Minimum retention period	Explanatory notes/comments
<ul style="list-style-type: none"> <li>• File notes;</li> <li>• Emails;</li> <li>• Letters;</li> <li>• Other correspondence and communications; and</li> <li>• Internal memoranda, where not otherwise covered by this Table.</li> </ul>	<p>No specific legislative requirement.</p>	<p>Retain such records for the same period as the document they pertain to or support is required to be retained.</p> <p>However, note that mere 'ephemeral' or 'facilitative' documents may be destroyed without retention for a minimum period (see discussion of ephemeral and facilitative documents in this Policy).</p>	<p>For example:</p> <ul style="list-style-type: none"> <li>• if a letter relates to a particular contract, keep the letter stored with the contract and retain it for the same retention period required for the contract;</li> <li>• if an internal memorandum relates to a particular program or project, keep the memorandum with the other program/project documents and retain it for the same retention period required for the program/project documents.</li> </ul>