



# State Records Act 1997

## Operational Records Disposal Schedule

**Health Services Charitable Gifts Board (and  
predecessor agency)**

**RDS 2014/10 Version 1**

Effective Date: 20 October 2015 to 30 June 2025

Approved Date: 20 October 2015

Approved by SRC



Health Services Charitable Gifts Board (and predecessor agency)

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**Health Services Charitable Gifts Board (and predecessor agency)**

**Preamble**

**Purpose of the Schedule**

This Operational Records Disposal Schedule (RDS) authorises arrangements for the retention or destruction of records in accordance with Section 23(2) of the *State Records Act 1997*.

**Application of the Schedule**

**Health Services Charitable Gifts Board (and predecessor agency)**

**Approved Date: 20 October 2015**

**Effective Date: 20 October 2015 to 30 June 2025**

**Authorisation by State Records**

This authorisation applies only to the disposal of the records described in the Schedule.

**State Records' Contact Information**

**State Records of South Australia**

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ADELAIDE  
South Australia 5001  
Email: [StateRecords@sa.gov.au](mailto:StateRecords@sa.gov.au)

Ph: 7322 7081

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**A/Chair, State Records Council**

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**A/Director, State Records**



## Health Services Charitable Gifts Board (and predecessor agency)

# Disposal of Official Records

## Legislation

Section 23(1) of the *State Records Act 1997* states that an agency must not dispose of official records except in accordance with a determination made by the Manager [Director] of State Records with the approval of the State Records Council.

Section 23(2) states:

‘If an agency requests the Manager to make a determination as to the disposal of official records, the Manager must, as soon as practicable:

- (a) with the approval of the [State Records] Council, make a determination requiring or authorising disposal of the records in a specified manner; or
- (b) make a determination requiring delivery of the records into the custody of State Records or retention of the records and later delivery into the custody of State Records.’

The contents of an RDS, once the approval process is complete, constitute a determination within the meaning of the *State Records Act 1997*.

## Functions of the Schedule

An RDS plans the life of these records from the time of their creation to their disposal. It describes the records created and/or controlled by Health Services Charitable Gifts Board, the disposal sentence specifying whether they are to be retained as archives or destroyed, and when this should occur.

This Operational Records Disposal Schedule has been prepared in conjunction with staff from Health Services Charitable Gifts Board to determine the records which need to be kept because of their long term value and to enable the disposal of records once they are no longer needed for administrative purposes. The assessment of the records takes into account their administrative, legal, evidential, financial, informational and historical values. The appraisal of the records is in accordance with the State Records’ policy as documented in *Appraisal of Official Records – Policy and Objectives* - available from State Records’ website ([www.archives.sa.gov.au](http://www.archives.sa.gov.au)).

The Schedule complements the General Disposal Schedules (GDS) that are issued by State Records to cover housekeeping and other administrative records common to most State Government agencies.



## Health Services Charitable Gifts Board (and predecessor agency)

### Using the Schedule

The Schedule applies only to the records described within it.

### Layout

The Schedule is laid out as follows:

<b>Item Number:</b>	Numbering in the Schedule is multi level: <ul style="list-style-type: none"><li>• Functions have single numbers (<i>e.g.</i> 1.)</li><li>• Activities and/or processes have two-level numbers (<i>e.g.</i> 1.1)</li><li>• Disposal classes have three-level numbers (<i>e.g.</i> 1.1.1)</li></ul>
<b>Function:</b>	The general functions are shown in 12 point bold Arial upper case at the start of each section. ( <i>e.g.</i> <b>CHARITABLE ASSETS MANAGEMENT</b> )
<b>Activity/Process:</b>	The activities and processes relating to each function are shown in 12 point bold Arial sentence case ( <i>e.g.</i> <b>Cases (PHE)</b> ).
<b>Description:</b>	Descriptions are in three levels ranging from broad functions to specific disposal classes: <ul style="list-style-type: none"><li>• definitions of functions are shown at the start of each section in bold (<i>e.g.</i> <b>The function of receiving, managing and applying assets held for the benefit of public health entities, and where required, acting as trustee for other assets.</b>)</li><li>• definitions of activities are located adjacent to the activity title in italics <i>e.g.</i> <i>The activities and processes associated with cases that relate to the establishment of and the managing of charitable assets of public health entities.</i></li><li>• descriptions of each disposal class are arranged in sequence under the activity definitions.</li></ul>
<b>Disposal Action:</b>	Disposal actions relate to the disposal classes arranged under the activity descriptions. The status of the class is either PERMANENT or TEMPORARY with a disposal trigger and retention period given for all temporary records.



## Health Services Charitable Gifts Board (and predecessor agency)

### Retention Period of the Record

The Schedule is used to sentence records. Sentencing involves applying the record retention periods within the RDS to the records of Health Services Charitable Gifts Board. Decisions are made using the Schedule about whether records are to be retained and, if so, for how long, or when they are to be destroyed.

Retention periods set down in the Schedule are minimum ones and Health Services Charitable Gifts Board may extend the retention period of the record if it considers there is an administrative need to do so. Where Health Services Charitable Gifts Board wishes to retain records for substantially longer periods it should request that the Schedule be amended to reflect this requirement.

### Custody and Transfer of the Record

#### Permanent Records

Section 19 of the *State Records Act 1997* includes provisions for the transfer of custody of an official record:

- a) when the agency ceases to require access to the record for current administrative purposes or
- b) during the year occurring 15 years after the record came into existence - whichever first occurs

Official records that have been sentenced as permanent, in accordance with an approved disposal schedule, are required to be transferred to State Records.

Agencies with valid reasons to retain permanent records for longer than 15 years should apply in writing to Director [Manager], State Records requesting either a postponement or an exemption from section 19.

It should be noted that postponement or exemption are only granted in exceptional circumstances.

#### Temporary Records

The custody of official records that have been sentenced as temporary is the responsibility of agencies. A policy and standards framework for the management and storage of temporary value official records has been established by State Records as documented in ***Records of Temporary Value: Management and Storage: Standard and Guidelines (May 2002)***. Health Services Charitable Gifts Board needs to comply with these policy documents - available from State Records' website ([www.archives.sa.gov.au](http://www.archives.sa.gov.au)).





## Health Services Charitable Gifts Board (and predecessor agency)

The custody of official records on networks or hard drives is also the responsibility of agencies. Health Services Charitable Gifts Board needs to ensure that records in electronic format remain accessible to authorised users for the duration of the designated retention period. State Records is, however, currently examining options for the transfer of permanent value electronic records in digital form to its custody.

### Destruction of Temporary Records

Temporary records can only be destroyed with the approval of the CE or delegate in accordance with the *Destruction of Official Records Guideline* issued by State Records of South Australia. Failure to comply with this direction falls under Section 17 of the *State Records Act 1997* and may be considered by ICAC as misconduct or maladministration.

Prior to destruction, the following General Disposal Schedules (GDS) need to be consulted:

- ***GDS 16 Impact of Native Title Claims on Disposal of Records*** to ensure records which are relevant to native title claims in South Australia are identified and preserved
- ***GDS 27 for Records Required for Legal Proceedings or Ex Gratia Applications Relating to Alleged Abuse of Former Children Whilst in State Care*** to ensure the preservation of official records that may relate to the rights and entitlements of the individuals who present a court claim or apply for an ex gratia payment and of the State Government in defending or processing those claims and applications
- ***GDS 32 for Records of Relevance to the Royal Commission into Institutional Responses to Child Sexual Abuse*** to ensure that records of relevance to the Royal Commission are protected and available for the purposes of the Royal Commission and any subsequent actions involving the South Australian Government as well as for future reference and accountability purposes and to protect the rights and entitlements of stakeholders.

Health Services Charitable Gifts Board must ensure that all destruction is secure and confidential and that a certificate confirming destruction is provided by private contractors.

Standard methods for destruction of paper are shredding, pulping or other means that are environmentally friendly.

Records in electronic format must only be destroyed by reformatting or rewriting to ensure that the data and any “pointers” in the system are destroyed. “Delete” instructions do not offer adequate security as data may be restored or recovered.

Health Services Charitable Gifts Board should keep their own record of all records destroyed, noting the relevant disposal authority. Proof of destruction may be required for legal purposes, or in response to FOI applications. When records are destroyed systems that control them should also be updated by inputting destruction dates and relevant disposal authorities.



## Health Services Charitable Gifts Board (and predecessor agency)

### Review

State Records' disposal schedules apply for a period of ten years. Either Health Services Charitable Gifts Board or State Records may propose a review of the Schedule at an earlier time, in the event of changes to functions or procedures that affect the value of the records covered by the disposal authority. Reviews are especially necessary if there is vast administrative change that affects the currency and use of the records and/or the records are dispersed to other agencies.

The State Records Council needs to approve all amendments to the Schedule. Officers using the Schedule should advise State Records of any necessary changes.

Approved by SRC

**Health Services Charitable Gifts Board (and predecessor agency)****Context Statement****Context of the Agency Covered by the Schedule****Health Services Charitable Gifts Board History and Background****Commissioners for Charitable Funds<sup>1</sup> (1875 – 2011)**

The *Public Charities Act 1875* (No. 7 of 1875) (consolidated in 1912 and 1935), established the Commissioners of Charitable Funds as a body corporate to hold in trust and administer gifts of money or property bequeathed to institutions (principally hospitals) proclaimed as public charitable institutions.

The main property held by the Commissioners is Town Acre 86 (fronting Rundle Mall) and the principal beneficiary of the trusts they administer is the Royal Adelaide Hospital. The *Hospitals Act 1867* had made provision for the administration of funds donated to each institution (section 12).

To improve the utilisation of such gifts, the Public Charities Act provided for a body corporate of three Commissioners (in lieu: the Auditor General, Under Secretary and Under Treasurer) who were to maintain separate accounts for each institution.

The *Public Charities Act 1876* provided for three or more commissioners to be appointed for a single institution, at the request of its board of management.

Whilst the 1876 Act explicitly used the definitions and terms of the 1875 Act, it was not incorporated with it. The resultant anomalies and confusion lasted until 1912.

The first Commissioners were appointed on 10 January 1877 (William Wyatt M.R.C.S., Maurice Salom J.P. and William Kay M.P.) Although clearly appointed specifically for the Adelaide Hospital, they were appointed under the 1875 Act.

By 1912, when the Public Charities Funds Act repealed and consolidated the earlier enactments, the Commissioners were also serving the Port Augusta and Port Lincoln Hospitals and the Destitute and Lunatic Asylums.

The 1912 Act continued the Commissioners in office and abolished the provision for separate bodies to be appointed to each institution. There were various amendments to this Act, which was again consolidated in 1935.

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<sup>1</sup> Source: <http://143.216.93.27/archivessrsa/t1tbmain.asp> Administrative history of the Commissioners for Charitable Funds. Viewed and downloaded 9/11/2015.

### Health Services Charitable Gifts Board (and predecessor agency)

The original hope had been that the Commissioners, by simplifying the long-term management of trusts, would be able to contribute significantly to the funding of institutions such as hospitals.

Bequests to hospitals have, however, gone out of fashion and the commissioners have tended, with the passage of time, to provide specific items of equipment from time to time.

#### Estate of Thomas Martin

As indicated previously, the main property administered by the Commissioners is Town Acre 86 (fronting Rundle Mall) which they hold in trust for the Royal Adelaide Hospital, as its share of Thomas Martin's estate.

Thomas Martin, although usually resident in England, had property interests in South Australia. On 23 June 1896 he made a separate will dealing with his South Australian property. Martin died in England on 21 May 1898 and probate was granted on the South Australian will on 14 July. It was not until 1912 that Town Acre 86, along with 21,200 pounds was transferred to the Commissioners by the Trustees of the estate.

The Commissioners established an endowment fund for the Adelaide Hospital, which was to hold Town Acre 86 in perpetuity. The records of the estate include those of Martin's agents (and later trustees): Philip Santo (c. 1870-1889), James Smith (1890-1900) and G.R. Annells (1900-c1912).

The Commissioners had, for many years, kept an office on the 1<sup>st</sup> floor of Martin Buildings, 141 Rundle Mall. In 1986 the Commissioners granted a 33 year lease, with 2 renewal options on the property and moved into an office in the Royal Adelaide Hospital as they were then to manage only financial assets.

#### Health Services Charitable Gifts Board (2011 – ongoing)<sup>2</sup>

The Health Services Charitable Gifts Board (the Board) began operations on 1 July 2011 with the commencement of the *Health Services Charitable Gifts Act 2011* (HSCG Act) and the consequent repeal of the *Public Charities Funds Act 1935* (SA)<sup>3</sup>.

In the second reading speech (addendum)<sup>4</sup> the Minister stated: that “[The Bill] not only remedies the drafting and language issues, but also confers more contemporary responsibilities and powers on the Commissioners. The Bill also addresses legal uncertainty about the establishment of the Commissioners and some of their past actions.”

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<sup>2</sup> Source: <http://143.216.93.27/archivessrsa/t1tbmain.asp> Administrative history of the Health Services Charitable Gifts Board. Viewed and downloaded 9/11/2015.

<sup>3</sup> The Commissioners of Charitable Funds Annual Report, 2010 – 2011, p2

<sup>4</sup> Source: <http://my.lawlex.com.au/tempstore/SA/Hansard/119501.htm>, viewed and downloaded 13/11/2015.

## Health Services Charitable Gifts Board (and predecessor agency)

The Commissioners of Charitable Funds (CCF) became the Health Services Charitable Gifts Board<sup>5</sup>, and gained new powers and responsibilities. According to the Commissioners of Charitable Funds Annual Report, 2010 - 2011, the new Act '... addresses many matters that have caused technical qualification of the Commissioners' financial statements in the past.'<sup>6</sup> The new Act rectified many of 'the deficiencies and limitations of the old Act' and in particular to describe the investment powers of the Board<sup>7</sup>.

### Health Services Charitable Gifts Board Role and Function

Strategically, the functions of the Board are to manage the charitable assets vested in the Board and apply these assets for the benefit of public health entities or otherwise, and in accordance with the Health Services Charitable Gifts Act (all funds vested with CCF were transferred to the Board<sup>8</sup>).

The functions of the Board, set out under section 15 of the Act, are as follows:

- to prudentially manage the charitable assets and apply such assets for the benefit of public health entities or otherwise in accordance with this Act
- to act as a trustee in relation to certain other property in accordance with this Act
- to determine, after consultation with any person or body considered appropriate by the Board, appropriate investment strategies for the charitable assets and other property vested in the Board under this Act
- to consult with any person or body considered appropriate by the Board on the application of funds by the Board under this Act and, in the case of funds to be applied for the purposes of clinical equipment or research, to consult with any prescribed research body and any advisory committee established under this Act for the purpose of advising the Board on such an application of funds
- to fulfil any fiduciary and other duties that arise out of the functions of the Board under this Act
- to provide advice to the Minister as may be appropriate
- to carry out other functions assigned to the Board by or under this or any other Act, or by the Minister.

The Board has the power of a 'natural person', and as such, is able to determine appropriate investment strategies<sup>9</sup>.

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<sup>5</sup> The Commissioners of Charitable Funds Annual Report, 2010 – 2011, p2

<sup>6</sup> Ibid, p2

<sup>7</sup> Annual Reports of the Auditor General, for the year ended 30 June 2012 – Agency Audit Reports, Part B, Volume 3 2011/2012 (Health Services Charitable Gifts Board), [http://www.audit.sa.gov.au/publications/11-12/b/b3/partb\\_3.html](http://www.audit.sa.gov.au/publications/11-12/b/b3/partb_3.html), accessed 25/02/2015, p. 749

<sup>8</sup> Ibid, p749

<sup>9</sup> Ibid, p749

### Health Services Charitable Gifts Board (and predecessor agency)

The Board is exempt from income tax and has been issued with deductible gift recipient status by the Australian Tax Office (ATO). Consequently, donations received by the Board may be an allowable deduction to the donor<sup>10</sup>.

The relationship of the Board to SA Health and the Minister is governed by provisions of S15 of the Act. The Board maintains contact (through liaison and meetings) with the Minister and SA Health including the relevant Public Health Entities (PHEs) as required.

### Trusts

The Board is now the trustee of the charitable trusts for Ray and Shirl Norman Cancer Research Trust and the DE Brown Trust. The Board is also trustee for the charitable health trust for South Australian Health & Medical Research Institute Charitable Health Trust.

### Public Health Entities

Funds and other assets have been given to proclaimed institutions and vest in the Board, pursuant to section 17 of the HSCG Act, by way of:

- bequests
- donations and gifts received from corporate and community groups and individuals
- the proceeds from other corporate, community and institutional fund raising programs.

Trust funds held on behalf of public health entities<sup>11</sup> include:

- Royal Adelaide Hospital
- SA Pathology (formerly IMVS)
- Hanson Centre for Cancer Research (Hanson Institute)
- Port Augusta Hospital
- Port Lincoln Hospital
- Port Pirie Hospital
- The Queen Elizabeth Hospital
- South Australian Dental Health Service
- Whyalla Hospital
- Mount Gambier Hospital
- Wallaroo Hospital
- Whyalla Hospital
- Modbury Hospital
- Lyell McEwin Hospital
- Flinders Medical Centre

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<sup>10</sup> Ibid, p750

<sup>11</sup> Ibid, p756



### Health Services Charitable Gifts Board (and predecessor agency)

- Repatriation General Hospital
- Noarlunga Hospital
- Women's and Children's Hospital
- MedStar (as proclaimed that part of South Australian Ambulance Service known as MedStar
- and soon to be proclaimed, BreastScreen SA.

### Investment Policy and Strategy<sup>12</sup>

The South Australian Health and Medical Research Institute Charitable Health Trust (SCHAT) was established during 2013-14. The trust deed of SCHAT specified how its funds were to be invested and that Funds SA was an appropriate investment vehicle. Consequently there was a requirement that the Board, as Trustee, would be required to have the status of a Prescribed Public Authority pursuant to the *Superannuation Fund Management Corporation Act 1995*.

During 2013-14 the Board undertook a comprehensive review of all its investment processes to ensure that the Board's investment policies and structures were in line with institutional investment best practice.

When Prescribed Public Authority status was coupled with the investment review, the Board had an opportunity to include Funds SA as one of the five major financial institutional investment groups from whom submissions were sought.

Following this review (and after evaluation of alternative investment models and alignment of the capabilities of the major investment groups with the Board's governance, risk management, investment return and cost effectiveness requirements) the Board approved the appointment of Funds SA as its primary outsourced investment service provider. The Board's equity and cash investments were transitioned to Funds SA during 2014-15.

The Board has established and updated a number of policies that cover the way that the funds are managed, invested, and applied. It should be noted that funds vested in the Commissioners are used for the purpose for which they were donated. This is almost always at the institution for which the assets are held. In some rare instances where funds cannot be used for the purpose donated at the institution, consultation as provided under section 18(3) of the HSCG Act is undertaken to determine whether the funds can be redirected to enable them to be used for the purpose intended.

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<sup>12</sup> The Commissioners of Charitable Funds Annual Report, 2013 – 2014, pps 4 and 12



## Health Services Charitable Gifts Board (and predecessor agency)

### Health Services Charitable Gifts Board Structure Description

As at 30 June 2015 the Board members and support staff included:

#### Board

- Ms Robyn Pak-Poy, Chairman
- Mr Geoff Loveday, Commissioner
- Professor Villis Marshall, Commissioner

#### Staff

- Mr Christopher Peirce, Executive Officer
- Ms Chenoa Makris, Business Services Officer
- Mrs Tanya McKeough, Clerical Officer

#### Predecessor Agencies

- GA254 (GRG94) Commissioners for Charitable Funds, 1875 – 2011.

#### Successor Agencies

There are no successor agencies.

#### Legislation

##### Current Legislation

- *Health Services Charitable Gifts Act 2011*  
(No 15 of 2011 assented to 26 May 2011, commenced 1 July 2011, South Australian government Gazette 30 June 2011 p2870).

##### Repealed Legislation Summary<sup>13</sup>

- *Public Charities Act, 1875* (No. 7 of 1875). (Established the Commissioners of Charitable Funds).
- *Public Charities Act, 1876* (No 39 of 1876). (Provided for Commissioners to be appointed for a specific institution).
- *Public Charities Amendment Act, 1886* (No. 376 of 1886).
- *Public Charities Further Amendment Act, 1890* (No. 492 of 1890).

Both amending Acts (above), which revised and extended the Commissioners' powers to invest, were incorporated with the 1875 Act.

All four Acts (above) were repealed by the 1912 consolidating legislation.

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<sup>13</sup> Source: ArchSearch <http://143.216.93.27/archivessrsa/t1tbmain.asp>, GA264 Commissioners for Charitable Funds





## Health Services Charitable Gifts Board (and predecessor agency)

- *Public Charities Funds Act, 1912* (being Act No. 1078 of 1912, as amended by No. 1160 of 1914, as amended by No. 1160 of 1914; 1209 of 1915; 1465 of 1921; 1553 of 1923; 1729 of 1926; and 2218 of 1935). This Act was itself repealed by consolidating legislation) in 1935.
- *Public Charities Funds Act, 1935* (being Act No. 2249 of 1935, as amended by No. 50 of 1940; 54 of 1965; and 122 of 1974. The principal Act, though assented to on 19 Dec, 1935, was not proclaimed until 1 June 1937 (South Australian Government Gazette 25 March, 1937, p. 643). This Act was repealed by in 2011 by the current legislation (see above).

Legislation impacting HSCGB operations:

- *Superannuation Fund Management Corporation of South Australia Act 1995*<sup>14</sup>
- *Health Care Act 2008*<sup>15</sup>

## Context of the Records Covered by the Schedule

### Coverage of RDS 2014/10

This schedule provides comprehensive coverage for the ongoing and closed operational records of Health Services Charitable Gifts Board and its predecessor agency the Commissioners for Charitable Funds from 1875 onwards. Coverage extends to both physical and electronic records.

Records relating to tax exemption status of the Board are not covered by this RDS but by GDS 35 (as amended).

This RDS excludes pre 1901 records held by State Records under GRG 94.

### Related Series Affected by RDS 2014/10

There are no related series affected by this RDS.

### Complementary Schedules to RDS 2014/10

There are no complementary Disposal Schedules to use with this RDS.

### Existing Disposal Schedules Superseded by RDS 2014/10

There are no existing Disposal Schedules superseded by this RDS.

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<sup>14</sup> To enable the Board to become a Prescribed Public Authority and thus to administer the SAHMRICHT

<sup>15</sup> S13, As regards terms and conditions of staff of the Board

## Health Services Charitable Gifts Board (and predecessor agency)

### Records Structure within Health Services Charitable Gifts Board

The physical records of the Board are created, maintained and managed within the office using both chronological and alphabetical systems of arrangement. These records are supported and complemented by electronic records (ie e-mail, MS Office products, Adobe, etc, within the server environment). Official records exist in both physical and electronic formats. The Board is in the process of considering the use of EDRMS to address its ongoing recordkeeping requirements. Funding for such systems remains an issue.

Currently the records are managed in a relatively unstructured recordkeeping environment<sup>16</sup>, as there is no formal RMS or EDRMS in place. Simple control is maintained by the use of spreadsheets and listings of files and other records.

Computerised accounting packages were introduced and by circa 2000 all financial transactions were processed and managed electronically.

The Executive Officer is aware of the current government initiative: *Digital by Default Declaration*<sup>17</sup> and intends to introduce EDRMS functionality within its operations subject to funding.

There are no records held under the GRS system. A detailed listing of records held by State Records under the Commissioners for Charitable Funds (GRG94/GA254) is at Annexure A.

### Broad Description and Purpose of the Records

The records of the Board document the source, management, and application of funds gifted pursuant to the provisions of the HSCG Act 2011 or its predecessor legislation. These funds usually are bequests, donations, and gifts from private citizens, in almost all instances there are formal documents (ie wills, deeds, etc) supporting these gifts.

### Functions and Activities Documented by the Records

The records of the Board covered by this RDS cover the function of CHARITABLE ASSETS MANAGEMENT, and comprise the following Activities:

- Cases (Gifts)
- Cases (PHE)
- Cases (Property)
- Cases (Trusts)
- Consultation
- Enquiries (HSCGB)

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<sup>16</sup> There are records lists in existence that indicate annual single numbering was in place from 1915 until early 1986 when the numbering appears to have been discontinued.

<sup>17</sup> Source: <http://dpc.sa.gov.au/digital-default> viewed 20 June 2015



## **Health Services Charitable Gifts Board (and predecessor agency)**

- Financial Control
- Policy and Strategy
- Procedures (HSCGB)
- Reporting (HSCGB).

### **Arrangement of the Records**

See “Records Structure within Health Services Charitable Gifts Board” p.17-18 above.

### **Agency Creating the Records**

Health Services Charitable Gifts Board that administers the records covered by this RDS also created them.

### **Agency Owning or Controlling the Records**

Health Services Charitable Gifts Board that administers the records covered by this RDS also controls or owns them.

### **Date Range of the Records**

Date Range: 1875 to **Ongoing**.

### **Volume of the Records**

Record holdings held by:

- Board: 30 linear metres
- external storage provider: 15 linear metres
- State Records (GRG 94): circa 30 linear metres (152 units).

The annual accumulation rate is estimated at less than 5%.

### **Special Custody Requirements**

There are no special custody requirements.

### **Special Storage Requirements**

There are no special storage requirements.

### **Issues Not Mentioned Previously**

There are no issues that have not already been mentioned.

**Health Services Charitable Gifts Board (and predecessor agency)****Comments Regarding Disposal Recommendations****Permanent Records Rationale**

The records nominated for permanent retention in this schedule meet the criteria for ongoing value as set out in the *Appraisal of Official Records: Policy and Objectives Guideline*, in particular Objectives 1, 3 and 4. In relation to Charitable Assets Management within South Australia, records document:

- high-level advice and reporting to government
- formulation and determination of policy
- transactions of enduring value.

Note: A significant proportion of the activities of the Board relate to the management of assets emanating from bequests, donations, and gifts from private citizens, in almost all instances there are formal documents (ie wills, deeds, etc) supporting these transactions. From a family history and genealogy viewpoint it is important the evidence of these transactions remain available, *within the context of Board operations*, for future descendants and other public researchers to access in future years.

Thus these records (Items 1.1.1, 1.2.1, 1.2.2, 1.3.1, 1.3.2, 1.4.1, 1.4.2, 1.5.1, 1.6.1, 1.7.1, 1.7.2, 1.7.4, 1.7.5, 1.8.1, 1.9.1, 1.10.1, and 1.10.2) are of enduring value to the Board, government, and the people of South Australia.

**Temporary Records Rationale**

Records nominated for temporary status in this schedule document routine processes and/or transactions that support the activities of the Health Services Charitable Gifts Board. Retention periods have been determined by the legal, administrative/ operational, evidential and financial accountability requirements.

Temporary records are those that are considered not to have continuing value to the Board or the State. They include items 1.1.2, 1.1.3, 1.2.3, 1.2.4, 1.2.5, 1.2.6, 1.3.3, 1.4.3, 1.4.4, 1.5.2, 1.5.3, 1.6.2, 1.7.3, 1.7.6, 1.7.7, 1.7.8, 1.8.2, 1.8.3, 1.8.4, 1.9.2, 1.10.3, and 1.10.4.

**Other Disposal Considerations**

There are no other considerations for or against the retention or destruction of records affected by this RDS.

**Disposal Recommendation Effect on Related Records**

There are no related records affected by the disposal recommendations in this RDS.



## Health Services Charitable Gifts Board (and predecessor agency)

### Alternative Record Formats

The primary capture of recorded information is paper-based. Electronic records are located on a server. Information located on the server is there to complement paper-based records where it is not possible to have a hard copy and also to facilitate searching and retrieval. See “Records Structure within Health Services Charitable Gifts Board” p18 above.

### Impact on Native Title Claims

There is no discernible relevance to Native Title Claims.

### Indigenous Considerations

The determinations within RDS 2014/10 are consistent with Recommendation 21 of the *National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families*.

The principles outlined in **GDS 16**, relating to Native Title claims, have also been considered in the development of this Schedule.

RDS 2014/10 meets all cultural, historical, legal and administrative requirements.

All documents considered relevant to native title in South Australia must be checked for actual relevance with the Native Title Section of the Crown Solicitor’s Office before being disposed of.



## Health Services Charitable Gifts Board (and predecessor agency)

### Scope Note

### Records Covered by this Schedule

See “Context of the Records Covered by the Schedule - Coverage of RDS 2014/10” p.17 above.

### How to Apply this Schedule

#### Use in conjunction with GDS

This Schedule should be used in conjunction with **GDS 15**, as amended, or its successor. Cross-references to the **GDS 15** are included in this Schedule where appropriate.

To identify records that may be potentially relevant to native title claims, please refer to guideline *Identifying documents which may be relevant to Native Title* attached to **GDS 16**. Where records sentenced for temporary retention are identified as having potential relevance to a native title claim, they need to be retained until 31 December 2024.

To identify records that may be potentially relevant to *Legal Proceedings or Ex Gratia Applications Relating to Alleged Abuse of Former Children Whilst in State Care*, please refer to **GDS 27**. Where records sentenced for temporary retention are identified as having potential relevance, they need to be retained until 31 December 2020.

To identify records that may be potentially relevant to the *Royal Commission into Institutional Responses to Child Sexual Abuse*, please refer to **GDS 32**. Where records sentenced for temporary retention are identified as having potential relevance, they need to be retained until 31 December 2023.

#### Use in conjunction with, or complementary to, other RDS

This Records Disposal Schedule does not complement any existing schedules.

#### Other RDS superseded by RDS 2014/10

This RDS does not supersede any existing schedules.

#### Re-sentencing of records where schedules are superseded or particular entries within a schedule are superseded

In this instance, the re-sentencing of records is not required.

#### Records excluded from RDS 2014/10

There are no records excluded from this RDS.

## Health Services Charitable Gifts Board (and predecessor agency)

### Application to records in all formats

RDS 2014/10 applies to records in all formats, including databases and other electronic records. Health Services Charitable Gifts Board is required to ensure that records remain accessible for the duration of designated retention periods.

### Interpretation of the Schedule

#### Minimum retention periods

Retention periods for temporary records shown in RDS 2014/10 are minimum retention periods for which records need to be retained. It is at the discretion of Health Services Charitable Gifts Board as to whether records are kept for longer than the minimum period.

#### Acronyms

- **ABS** Australian Bureau of Statistics
- **AGD** Attorney General's Department
- **APRA** Australian Prudential Regulatory Authority
- **ATO** Australian Taxation Office
- **CCF** Commissioners of Charitable Funds
- **HSCGB** Health Services Charitable Gifts Board
- **LTO** Lands Titles Office
- **PHE** Public Health Entity
- **SAHMRI** South Australian Health & Medical Research Institute
- **ToR** Terms of Reference

#### Definitions of terms specific to RDS 2014/10

- **Claims** Claim to HSCGB by a PHE for reimbursement of funds held on behalf of a public health entity
- **Gift** A donation or bequest given to a PHE
- **PHE** A public health entity as proclaimed by the Minister
- **ToR** A governing document applying to funds held for a particular purpose.
- **Trust** A trust is a relationship where a person or entity (the Trustee) is under an obligation to hold property for the benefit of other persons or entities (the Beneficiaries). The terms of the obligation(s) are defined by the terms of the Trust Deed or other governing document applicable to the trust.





## Health Services Charitable Gifts Board (and predecessor agency)

### Legal Deposit

Legal deposit refers to statutory provisions that oblige publishers to deposit copies of their publications in libraries in the country in which they are published. Under the Commonwealth *Copyright Act 1968* and various Australian state Acts, a copy of any work published in Australia must be deposited with (a) the National Library of Australia and (b) the appropriate State Library. Legal deposit extends not only to commercial publishers but also to private individuals, clubs, churches, societies and organisations.

In South Australia, one copy of publications produced for external use should be deposited with the State Library and the Parliamentary Library (section 35, *Libraries Act 1982*). Publications include books, newspapers, magazines, journals, pamphlets, maps, plans, charts, printed music, records, cassettes, films, video or audio tapes, computer software CD-ROMS, compact discs and other items made available to the public.

### Records and Litigation

Where Health Services Charitable Gifts Board is aware that records may be required for use in litigation, for use in a government enquiry or the consideration of the Ombudsman, the records must not be destroyed. In such circumstances the records must be retained until two years after all cases and enquiries are complete (including appeals) and then have the original retention period applied to the records.

### Pre-1901 Records

All pre-1901 records are required to be **retained permanently** in accordance with a motion approved by the State Records Council on 19 February 2008.

This RDS applies to pre-1901 records that are required to be **retained permanently**.





Health Services Charitable Gifts Board (and predecessor agency)

## List of Functions and Activities

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### Health Services Charitable Gifts Board (and predecessor agency)

Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
<b>1 CHARITABLE ASSETS MANAGEMENT</b>			
<b>1</b>	<b>CHARITABLE ASSETS MANAGEMENT</b>	<p>The function of receiving, managing and applying assets held for the benefit of public health entities, and where required, acting as trustee for other assets.</p> <p><b>See also GDS 15 (as amended).</b></p>	
<b>1.1</b>	<b>Cases (Gifts)</b>	<p><i>The activities and processes associated with the Board receiving, holding, managing and applying proceeds of assets emanating from bequests, donations and other gifts, derived from external sources and entities, eg trusts, corporate sector, community groups, and individuals. Includes proceeds from other corporate, community and institutional fundraising programs.</i></p> <p><i>See Item 1.2 Cases (PHE) for gifts relating to Public Health Entities.</i></p> <p><i>See also 1.7 CHARITABLE ASSETS MANAGEMENT – Financial Control.</i></p>	
1.1.1	Cases (Gifts)	Summary records documenting the receipt, management and application of funds relating to Cases (Gifts), includes records relating to multiple PHEs.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.1.2	Cases (Gifts)	Cases documenting the administrative arrangements relating to the receipt, management and application of funds relating to Cases (Gifts).	<b>TEMPORARY</b> Destroy 20 years after action completed
1.1.3	Cases (Gifts)	Facilitative records, including drafts, working papers and associated routine correspondence, relating to Cases (Gifts).	<b>TEMPORARY</b> Destroy 5 years after action completed



### Health Services Charitable Gifts Board (and predecessor agency)

Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
<b>1 CHARITABLE ASSETS MANAGEMENT</b>			
<b>1.2</b>	<b>Cases (PHE)</b>	<i>The activities and processes associated with the cases that relate to the establishment of and the managing of charitable assets held by the Board for public health entities.</i> <i>See also 1.7 CHARITABLE ASSETS MANAGEMENT – Financial Control.</i>	
1.2.1	Cases (PHE)	Records documenting the accounts held in favour of public health entities, whether by estate bequest or any other gift or donation. Includes terms of reference, annual reports and financial statements, etc.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.2.2	Cases (PHE)	Summary records documenting the receipt management and application of gifts.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.2.3	Cases (PHE)	Records documenting loans advanced to public health entities by the Board.	<b>TEMPORARY</b> Destroy 20 years after loan discharged.
1.2.4	Cases (PHE)	Records documenting annual budget requests and approvals, claims, authorisations and payments, copies of financial reports, etc of specific public health entities.	<b>TEMPORARY</b> Destroy 20 years after action completed
1.2.5	Cases (PHE)	Records documenting unsuccessful claims for funds by eg, independent researchers, etc. Includes claims withdrawn.	<b>TEMPORARY</b> Destroy 5 years after action completed



**Health Services Charitable Gifts Board (and predecessor agency)**

Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
<b>1 CHARITABLE ASSETS MANAGEMENT</b>			
1.2.6	Cases (PHE)	Facilitative records, including drafts, working papers and associated routine correspondence, relating to Cases (PHE).	<b>TEMPORARY</b> Destroy 5 years after action completed
<b>1.3</b>	<b>Cases (Property)</b>	<p><i>The activities and processes associated with cases that relate to the acquisition, management and disposal of property comprising real estate, shares, bonds, etc, gifted to, or acquired by gifted funds by, the Board.</i></p> <p><i>See also 1.7 CHARITABLE ASSETS MANAGEMENT – Financial Control.</i></p> <p><i>See also GDS 15 (as amended).</i></p>	
1.3.1	Cases (Property)	Summary records documenting the acquisition, management and disposal of property.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.3.2	Cases (Property)	Cases documenting acquisition, managements and disposal of real estate gifted to the Board, or acquired by the Board pursuant to a gift, a bequest or a donation, eg Town Acre 86. Includes Head Lease agreements, surrender of lease documentation, LTO documentation, etc. Use GDS 15 (as amended) PROPERTY MANAGEMENT – Various for routine property management and maintenance, rental income and outgoings, as required.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.3.3	Cases (Property)	Facilitative records, including drafts, working papers and associated routine correspondence, relating to Cases (Property).	<b>TEMPORARY</b> Destroy 5 years after action completed

**Health Services Charitable Gifts Board (and predecessor agency)**

Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
<b>1 CHARITABLE ASSETS MANAGEMENT</b>			
<b>1.4</b>	<b>Cases (Trusts)</b>	<i>The activities and processes associated with cases that relate to the establishment and management of trusts, where the Board is a trustee or co-trustee. Includes external trusts.</i> <i>See also 1.7 CHARITABLE ASSETS MANAGEMENT – Financial Control.</i>	
1.4.1	Cases (Trusts)	Cases documenting the establishment and management of specific trusts (and similar entities), eg Ray and Shirl Norman Cancer Research Trust, SAHMRI Trust, etc. Includes consultation, advice, liaison, grants, etc. Also includes annual reports and financial statements, etc.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.4.2	Cases (Trusts)	Records documenting fiduciary obligations in relation to where the Board is a Trustee, or a Co-Trustee, not contained within specific Trust Case files. Includes consultation, advice, liaison, analysis, etc. Also includes call for funding proposals and acquittal reporting. Also includes annual reports and financial statements, etc.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.4.3	Cases (Trusts)	Facilitative records, including drafts, working papers and associated routine correspondence, relating to Cases (Trusts).	<b>TEMPORARY</b> Destroy 10 years after action completed
1.4.4	Cases (Trusts)	Records documenting unsuccessful claims for funds by eg, independent researchers, etc. Includes claims withdrawn.	<b>TEMPORARY</b> Destroy 5 years after action completed
<b>1.5</b>	<b>Consultation</b>	<i>The activities and processes associated with the Board, pursuant to legislation, undertaking formal consultation with Funds SA, public health entities, external trusts, and other relevant stakeholders.</i>	



### Health Services Charitable Gifts Board (and predecessor agency)

Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
<b>1 CHARITABLE ASSETS MANAGEMENT</b>			
1.5.1	Consultation	Records documenting <b>formal</b> consultation pursuant to legislation, including the HSCG Act 2011 (as amended). Includes liaison, collaboration, and cooperation in relation to the functions of the Board.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.5.2	Consultation	Records documenting <b>other</b> consultation.	<b>TEMPORARY</b> Destroy 10 years after action completed
1.5.3	Consultation	Facilitative records, including drafts, working papers and associated routine correspondence, relating to Consultation.	<b>TEMPORARY</b> Destroy 5 years after action completed
<b>1.6</b>	<b>Enquiries (HSCGB)</b>	<i>The activities associated with the handling of requests for information relating to charitable assets and the role of the Board.</i> <i>See also GDS 15 (as amended) for other enquiries.</i>	
1.6.1	Enquiries (HSCGB)	Records documenting enquiries relating to charitable assets, the role of public health entities, relevant legislation, and the Board, etc.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.6.2	Enquiries (HSCGB)	Facilitative records, including drafts, working papers and associated routine correspondence, relating to Enquiries (HSCGB).	<b>TEMPORARY</b> Destroy 5 years after action completed



### Health Services Charitable Gifts Board (and predecessor agency)

Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
<b>1 CHARITABLE ASSETS MANAGEMENT</b>			
<b>1.7</b>	<b>Financial Control</b>	<p><i>The activities and processes associated with financial control and fiduciary obligations relating to gifts, donations, bequests, and trusts, and application of funds.</i></p> <p><i>Use GDS 15 (as amended) for other routine financial records.</i></p> <p><i>See also:</i></p> <p><i>1.1 CHARITABLE ASSETS MANAGEMENT – Cases (Gifts)</i></p> <p><i>1.2 CHARITABLE ASSETS MANAGEMENT – Cases (PHE)</i></p> <p><i>1.3 CHARITABLE ASSETS MANAGEMENT – Cases (Property)</i></p> <p><i>1.4 CHARITABLE ASSETS MANAGEMENT – Cases (Trusts)</i></p>	
1.7.1	Financial Control	Financial control records documenting all sources and application of funds. Includes annual financial and audit reports and statements, etc.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.7.2	Financial Control	Financial ledgers (or journals in the absence of ledgers or cash books in the absence of ledgers and journals) created and maintained in physical format up <b>until 1975</b> and prior to the introduction of computerised financial management systems.  See GDS 15 (as amended) for physical financial records created and maintained <b>post 1975</b> and computerisation.	<b>PERMANENT</b>
1.7.3	Financial Control	Other financial records.	<b>TEMPORARY</b> Destroy 7 years after action completed



**Health Services Charitable Gifts Board (and predecessor agency)**

Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
<b>1 CHARITABLE ASSETS MANAGEMENT</b>			
1.7.4	Financial Control	Annual reporting of financial position provided by the fund manager. Includes market performance and investment monitoring statements and analyses.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.7.5	Financial Control	Records documenting high level liaison and advice between the Board and the fund manager or investment advisor as regards the investment portfolio.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.7.6	Financial Control	Annual summaries of investment fund transactions and capital movements, and itemised transactions.	<b>TEMPORARY</b> Destroy 20 years after action completed
1.7.7	Financial Control	Interim (weekly, monthly, quarterly) reporting of financial position provided by the fund manager.	<b>TEMPORARY</b> Destroy 5 years after action completed
1.7.8	Financial Control	Facilitative records, including drafts, working papers and associated routine correspondence, relating to Financial Control	<b>TEMPORARY</b> Destroy 5 years after action completed
<b>1.8</b>	<b>Policy and Strategy</b>	<i>The activities and processes associated with the development and application of policy (including investment policy) and strategy. Includes consultation pursuant to section 18 (3) of the HSCG Act 2011 (as amended). Also includes liaison and consultation with fund managers.</i>	





**Health Services Charitable Gifts Board (and predecessor agency)**

Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
<b>1 CHARITABLE ASSETS MANAGEMENT</b>			
1.8.1	Policy and Strategy	Records documenting transfers of funds to/from/between external funds managers. Includes transitional arrangements.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.8.2	Policy and Strategy	Records relating to agreements documenting selection and appointment of fund manager(s). Includes agreements.	<b>TEMPORARY</b> Destroy 20 years after action completed
1.8.3	Policy and Strategy	Records documenting the development and management of investment policy and strategy. Note: Master copy of operational procedures relating to policy and strategy are included in Board papers.	<b>TEMPORARY</b> Destroy 10 years after action completed
1.8.4	Policy and Strategy	Facilitative records, including drafts, working papers and associated routine correspondence, relating to Policy and Strategy.	<b>TEMPORARY</b> Destroy 5 years after action completed
<b>1.9</b>	<b>Procedures (HSCGB)</b>	<i>Standard methods of operating determined by the Board according to formulated policy and operational requirements and the requirements of legislation. See also GDS 15 (as amended).</i>	
1.9.1	Procedures (HSCGB)	Final, approved master versions of records documenting operational procedures relating to the functions of the Board.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes



### Health Services Charitable Gifts Board (and predecessor agency)

Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
<b>1 CHARITABLE ASSETS MANAGEMENT</b>			
1.9.2	Procedures (HSCGB)	Facilitative records, including drafts, working papers and associated routine correspondence, relating to Procedures (HSCGB).	<b>TEMPORARY</b> Destroy 5 years after action completed
<b>1.10</b>	<b>Reporting (HSCGB)</b>	<p><i>The processes associated with the Board initiating or providing a formal response to a situation or request (either internal, external or as a requirement of a legislative scheme or corporate policies), and to provide formal statements or findings of the results of their examination or investigation. Includes agenda, briefing, business, discussion papers, proposals, reports, reviews and returns.</i></p> <p><i>Includes all reporting pursuant to HSCG Act (as amended) 2011 s23.</i></p> <p><i>See also GDS 15 (as amended).</i></p>	
1.10.1	Reporting (HSCGB)	Final versions of all reports transmitted to the Minister (or nominee), the Government, public health entities, or other public authorities, other organisations and stakeholders (including the general public). Includes General and Special Financial Reports.	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes
1.10.2	Reporting (HSCGB)	<p>Final versions of responses relating to Parliamentary Questions (QON, QWN, Estimates, and Parliamentary Committee enquiries), Ministerials, etc.</p> <p>See GDS 15 (as amended) for records relating to FOI requests.</p>	<b>PERMANENT</b> Where in digital format actively manage and migrate to ensure ongoing accessibility evidentiary and/or historical purposes



**Health Services Charitable Gifts Board (and predecessor agency)**

Item No.	FUNCTION Activity / Process	Description / Disposal Class	Disposal Action
<b>1 CHARITABLE ASSETS MANAGEMENT</b>			
1.10.3	Reporting (HSCGB)	Other reports, including interim (eg monthly/quarterly) General and Special Financial (Annual) Reports. Includes reports to external agencies (ie ATO, APRA, ABS, etc) required as a statutory obligation, eg Ancillary Fund Return to ATO.	<b>TEMPORARY</b> Destroy 10 years after action completed
1.10.4	Reporting (HSCGB)	Facilitative records and working papers, including drafts, working papers and associated routine correspondence, relating to Reporting (HSCGB).	<b>TEMPORARY</b> Destroy 5 years after action completed



Health Services Charitable Gifts Board (and predecessor agency)

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