

## **Key Policy**

Key Holding and Access Management Policy

**Glapwell Community Sports Facility – Hall Corner, Park Avenue, Glapwell**

**Glapwell Centre, The Green, Glapwell**

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### **Safe Key Holding and Access Management Policy**

#### **1. Purpose**

This policy outlines the procedures for safe key holding and access management at Glapwell Community Sports Facility and the Glapwell Centre, ensuring that all keys, fobs, and access codes used within our services are securely managed, controlled, and monitored. The aim is to protect the safety and privacy of staff, visitors, volunteers and property while maintaining efficient access to premises.

This policy ensures compliance with Care Quality Commission (CQC) regulations, data protection laws, and health and safety legislation, ensuring that key access is strictly controlled to prevent unauthorised entry, loss, or misuse.

#### **2. Scope**

This policy applies to:

- All staff handling or managing keys and access controls.
- People we provide services for, ensuring their privacy and rights are upheld.
- Contractors, volunteers, visitors, and external agencies accessing properties.
- All premises: Glapwell Centre, the MUGA, Glapwell Sports Facility, office spaces, storage rooms, and all areas managed by Glapwell Parish Council.

#### **3. Legal and Regulatory Compliance**

**This policy aligns with:**

- General Data Protection Regulation (GDPR) 2018 – Ensuring confidentiality of door entry codes, access logs, and keyholder information.
- Health and Safety at Work Act 1974 – Ensuring safe premises access and emergency evacuation procedures.
- Fire Safety Order 2005 – Ensuring keys and access systems do not obstruct emergency exits or evacuation procedures.

#### **4. Principles of Safe Key Holding and Access Management**

- Security and Safety – Key management must prioritise the security of people we provide services to, our staff, and our premises.
- Access Control – Only authorised individuals should hold or access keys, fobs, and entry codes.
- Accountability – All key holders must be trained, authorised, and monitored to prevent unauthorised use.
- Emergency Preparedness – Key access must allow for emergency entry while maintaining security protocols.

## **5. Safe Key Holding Procedures**

### **5.1 Key Classification**

**All keys within Glapwell Parish Council are categorised as follows:**

- Master Keys – Provide access to all areas and must be strictly controlled.
- Staff Keys – Assigned for work and returned after use.
- Office and Storage Keys – Restricted to authorised personnel only.
- Volunteer Keys – Assigned for volunteering work and returned after use.
- MUGA users – Assigned following the paying of a key deposit and returned at the end of the season.
- Emergency Keys – Secured in a locked, designated area with access strictly monitored and recorded.

### **5.2 Authorised Key Holders**

- Only designated staff members will be assigned keys based on their role and responsibilities.
- A key register must be maintained to log:
  - Who holds which keys.
  - The time and date keys were issued and returned.
  - The reason for key access.
- Managers must approve any temporary or permanent allocation of keys.

### **5.3 Secure Storage and Logging of Keys**

- All keys must be stored in a secure, locked cabinet when not in use.
- Access logs must be kept for key retrieval and return.
- Key safes may be installed at specific locations for controlled access.
- Staff must never leave keys unattended in open areas or shared spaces.

## **6. Visitor and Contractor Access Management**

### **6.1 Access Control for External Visitors/volunteers**

- Visitors/volunteers must sign in and out when entering and leaving any premises.
- Visitors/volunteers should be escorted where necessary to ensure security.
- External contractors must be issued temporary keys only with Clerk approval and must return them immediately after use.

### **6.2 Confidentiality of Access Information**

- Door entry codes and access logs must be stored securely and only shared with authorised personnel.
- Staff must never disclose access codes or key locations to unauthorised individuals.

## **7. Emergency Key Access Procedures**

### **7.1 Emergency Situations**

- Emergency keys must be accessible in the event of a fire, medical emergency, or security breach.
- Staff must follow fire safety and evacuation protocols, ensuring people we support are not locked in or restricted.
- If a key is lost or stolen, staff must report it immediately to management, and locks must be changed if required.

## **8. Lost, Stolen, or Misused Keys**

- If a key is lost or stolen, the incident must be reported immediately to the Clerk.
- A risk assessment must be conducted to determine whether locks need to be changed.
- Any misuse or unauthorised duplication of keys will be treated as a serious security breach and will result in further action being taken.

## **9. Staff Training and Accountability**

- All new staff must receive key holding and access management training as part of their induction.
- Staff must complete annual refresher training on:
  - Safe key handling.
  - Emergency access procedures.
  - GDPR compliance regarding access codes.
- Staff who misuse key access privileges may be subject to disciplinary action.

## **10. Compliance Monitoring and Quality Assurance**

- The Clerk will conduct regular audits of key registers and access logs.
- Compliance with key management procedures will be reviewed during inspections and internal quality checks.
- If any security incidents occur, policies and procedures will be reviewed and updated accordingly.

#### **11. Related Policies**

- **Safeguarding Policy**
- **Health and Safety at Work Policy**
- **Risk Management and Assessment Policy**
- **Fire Safety and Evacuation Procedures**
- **Confidentiality and Data Protection Policy**

#### **12. Policy Review**

**This policy will be reviewed annually, or earlier if:**

- Legislation changes.
- A security incident occurs, requiring updates.
- Feedback from staff or people we provide a service suggests improvements.

**THIS POLICY AND CODE OF PRACTICE MUST BE COMPLIED WITH AT ALL TIMES.**

Signed .....

Print Name ..... Date ...../...../.....

Adopted 29<sup>th</sup> January 2026 Min 306e.1/26

Review date May 2026