



Policy & Procedure

Subject: Management of Records

- 1) **Purpose:** The purpose of this policy is to establish a corporate record management plan, including the development of a directory of records and a personal information bank by classifying and cataloguing all administrative, financial and general records held in the care, custody and control of St. Mary's General Hospital.
- 2) **Policy Statement:** St. Mary's General Hospital (SMGH) provides healthcare services and as such creates records that:
 - Are required by legislation
 - Support the business operations of the institution
 - Document and provide evidence of business transactions
 - Demonstrate compliance with accountability and other business requirements
 - Have future business, legal, financial, research, academic or archival value.

This policy applies to all records in the custody and control of SMGH.

3) Definitions:

Annual Record Purge

Each department at SMGH has a responsibility to annually review and purge records that fall outside of the scope of the SMGH records retention schedule by January 1st of each year.

Broader Public Sector Accountability Act (BPSA)

The BPSA came into effect December 10, 2010 and among other things directed that Ontario hospitals and local health integration networks would be subject to the Freedom of Information and Protection of Privacy Act as of January 1, 2012.

Document

For purposes of this policy the terms document and record have the same meaning.

Freedom of Information and Protection of Privacy Act (FIPPA)

FIPPA is provincial legislation designed to allow the public access to information held by publically funded institutions.

Inventory of Records

A listing of the general classes or types of records prepared by or in the custody or control of each institution provided to the Ministry of Government Services annually, FIPPA (32)(b)

Personal Health Information (PHI)

Personal Health Information, as defined according to the Personal Health Information Protection Act (PHIPA):

- relates to the physical or mental health of the individual, including information that consists of the health history of the individual's family,
- relates to the providing of health care to the individual, including the identification of a person as a provider of health care to the individual,
- is a plan of service within the meaning of the Home Care and Community Services Act, 1994 for the individual,
- relates to payments or eligibility for health care, or eligibility for coverage for health care, in respect of the individual,
- relates to the donation by the individual of any body part or bodily substance of the individual or is derived from the testing or examination of any such body part or bodily substance,
- is the individual's health number, or
- identifies an individual's substitute decision-maker. 2004, c. 3, Sched. A, s. 4 (1); 2007, c. 8, s. 224 (6); 2007, c. 10, Sched. H, s. 2.

Personal Information (PI)

Personal Information, as defined according to FIPPA as identifiable information that includes:

- Information related to race, national or ethnic origin, colour, religion, age, sex, sexual orientation or marital or family status or an individual.
- Information related to education or the medical, psychiatric, psychological, criminal or employment history of the individual or information relating to financial transactions an individual has been involved in
- Any identifying number, symbol or other particular assigned to the individual
- The address, telephone number, fingerprints or blood type of the individual
- The personal opinions or views of the individual
- Correspondence sent to an institution by the individual that is implicitly or explicitly of a private or confidential nature, and replies to that correspondence
- The views and opinions of another individual about that individual, and
- The individual's name where it appears with other personal information about the individual

Note, while name, title and contact information at work are personal information these items have no legislative privacy protection.

Personal Information Bank

Means a collection of personal information that is organized and capable of being retrieved using an individual's name or an identifying number or particular assigned to the individual. FIPPA (2) (h), reportable to the Ministry of Government Services annually.

The list includes:

- its name and location;
- the legal authority for its establishment;
- the types of personal information maintained in it;
- how the personal information is used on a regular basis;
- to whom the personal information is disclosed on a regular basis;
- the categories of individuals about whom personal information is maintained; and
- the policies and practices applicable to the retention and disposal of the personal information. FIPPA (45).

Record

A record is any information documented on any media that supports the business operations of SMGH; any information created, received and maintained in the pursuance of legal obligations or evidence of business transactions.

There are four types of records:

1) Official Records:

- a. Support the business operations of SMGH
- b. Often required by legislation
- c. Provide evidence of business transactions
- d. Demonstrate compliance with accountability or other business requirements
- e. Valuable for Research, Archives, Litigation, Etc.

2) Transitory Records:

- a. Are temporary documents; having immediate or short-term value and will not be required in the future; i.e., a record that is made obsolete by an updated version; e.g., drafts of documents should be retained until final publication and then removed. (Note that final versions of outdated policies and procedures must be retained to demonstrate SMGH procedures at a specific point in time)

3) Duplicate Records:

- a. Are copies of documents; the original of which is held by another record custodian; i.e., copies have been provided for information or reference purposes only; e.g., copies of minutes circulated to all committee members or payroll sign-in sheets, the original of which is held by Payroll

4) Personal Records:

- a. Are records or documents which are personal in nature and do not support the business operations of the hospital and are considered a form of transitory records
- b. Often in the form of email sent or received through the SMGH email system.

Administrative Records include:

Legislated (See Schedule A):

- Agreements and Contracts
- Corporate Records
- Employee Health Records
- Human Resource Records
- Occupational Health & Safety Records
- Patient Health Records
- Procurement Records
- Waste Management Records
- Facilities Maintenance Records
- Some Policies and Procedures

Financial Records include:

- Accounting
- Budget
- Payroll

General Records include

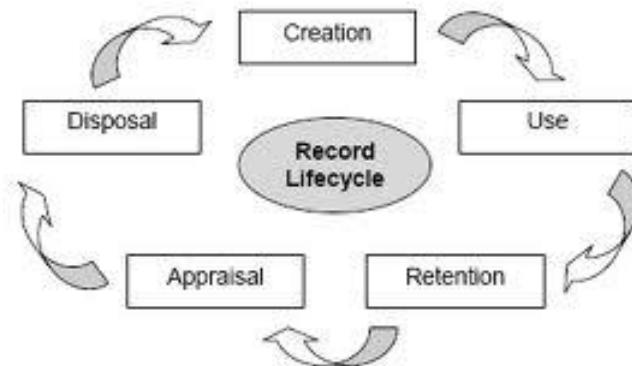
Non-Legislated (See Schedule B):

- Email/Correspondence
- Department copies of Cost Centre Reports
- Department copies of Purchase Orders, Contracts, Lease Agreements
- Department copies of requisitions including cheques, printing, stores, major/minor work orders.
- Committee minutes
- Reports
- Departmental Employee Files
- Newsletters
- Periodicals
- Research applications, approvals and minutes
- Educational materials
- Program-Specific Planning Documents
- Some Policies and Procedures

Record Custodian

Anyone designated as having responsibility for the creation, maintenance, retention and disposal of official corporate, department or program records.

- 4) **Policy:** The management of records is an important corporate responsibility at St. Mary's General Hospital (SMGH). The corporate record management plan describes the lifecycle of records from creation, through use (access, compliance, dissemination, maintenance, protection), retention (legal, regulatory, fiscal, operational, and historical requirements), appraisal (decision on destruction /archiving) to final disposal



All SMGH *administrative, financial and general* records, except records containing personal health information, are subject to the Freedom of Information and Protection of Privacy Act (FIPPA) as of January 1, 2012 and apply to any records coming into the custody and control of SMGH after January 1, 2007.

Records containing personal health information are excluded from FIPPA and are subject to the Personal Health Information Protection Act (PHIPA).

5) Procedure:

Creation:

Records are created to provide evidence and information of work activities or events, in pursuance of legal obligations, in business transactions, and in the decisions made on behalf of SMGH. Records should contain essential and common components such as date, author and a title that appropriately reflects the subject matter and assists in easy retrieval.

When creating a record, keep in mind the type of record you are creating, as this will impact subsequent procedural steps.

Consider whether it is necessary to include personal information when creating a record, as extra care must be taken to safeguard records containing personal information, ensuring that PI is collected and used only for intended purposes and these records must then be included in the SMGH Personal Information Bank and reported annually to the Ministry of Government Services.

Use (Maintenance & Storage)

It is important to ensure that records are maintained in a safe and secure environment depending on the media on which they are stored. Paper records that are deemed

confidential should be stored under lock and key and electronic records should be stored on network drives restricted to authorized users.

Active records that support the daily operational activities should be organized to that they can be easily and quickly retrieved when necessary. Inactive records should be transferred to alternate storage areas, alternate media or file systems as necessary. It is important to track the location of records throughout their lifecycle.

It is recommended that file name, location and date of creation be stored in the footer of documents to allow for easy identification and retrieval of those documents.

Retention:

Official corporate/divisional records are retained by the responsible identified department according to the legislated/mandated requirement as set out in Schedule A.

Where there is no legislated/mandated requirement, recommended retention guidelines (See Schedule B) are established by those departments responsible for the source document; e.g., Finance recommends certain retention requirements where the Finance Department is the generator of those reports.

Where records are generated for the exclusive use of a department or program and there is no legislated requirement to retain those records, then the department generating those records should establish their own internal retention and destruction schedule.

Transitory and duplicate records should be destroyed when their purpose ends.

Appraisal (Decision):

Once a record has reached the end of its life cycle, a decision should be made to archive or dispose of that record.

See the retention guidelines as set out in Schedules A & B.

Disposal: See the disposal process described in Schedules A & B.

All other material containing corporate/division or confidential information; e.g., faxes, copies made from electronic systems, etc., should be deposited in one of the locked slotted receptacles, located throughout the hospital for secure shredding by a bonded shredding service.

Archive: See the archive process described in Schedules A & B

NOTE: DO NOT DISPOSE OF CONFIDENTIAL MATERIAL IN THE BLUE 'RECYCLING' WASTE BASKETS.

6) References

Internal References

External References

- American Record Management Association (ARMA) Generally Accepted Recordkeeping Principles (GARP)
- Broader Public Sector Accountability Act, Ontario, 2010
- Freedom of Information and Protection of Privacy Act, Ontario, 1990
- International Standards Organization (Information and documentation – Records Management – Part 1: General / ISO, Geneva, 2001) ISO 15489-1
- Ontario Hospital Association Record Management Guidelines
- Personal Health Information Protection Act, Ontario 2004
- Public Hospital Act, Ontario, 1990

7) In Consultation With

Freedom of Information and Protection of Privacy Steering Committee

8) Attachments/Appendix

Schedule A: Legislated Records

Schedule B: Common Non-Legislated Records

Origin: Freedom of Information and Protection of Privacy Steering Committee

Date Approved: January 10, 2012

Approved By: Senior Management Team

Dates Revised:

Date Reviewed:

Responsibility: VP Quality & Performance Management & Diagnostics

Where relying upon any St. Mary's General Hospital policy and/or procedure, users are requested to consult the online policy and procedure manual to ensure access to and use of the most current, up-to-date and accurate policy. St. Mary's General Hospital cannot guarantee the currency or accuracy of any printed policy and/or procedure.

Schedule A Legislated Records

Record Category	Jurisdiction	Retention Period (Required)	Active Storage Media	Inactive Storage Media	Disposal	Contains Personal Information	Responsible Department
<i>Corporate Records</i>							
Articles of Incorporation	Business Corporation Act	Statutory - Permanent	Electronic and Paper	Electronic and Paper	N/A	No	Office of the President
Letters Patent	Business Corporation Act	Statutory - Permanent	Electronic and Paper	Electronic and Paper	N/A	No	Office of the President
Contracts/Legal Agreements	PHA-Sec. 32, (1m)	Statutory - Permanent	Electronic and Paper	Electronic and Paper	N/A	No	Finance/Purchasing
Minutes of the Executive Committees: Board of Trustees and subcommittees, Medical Advisory Committee and subcommittees	Business Corporation Act, Sec. 140, (1b)	Statutory - Permanent	Electronic and Paper	Electronic and Paper	N/A	Yes	Office of the President Chief of Staff Office
Policies/Bylaws	Business Corporation Act, Sec. 140, (1a)	Statutory - Permanent	Electronic and Paper	Electronic and Paper	N/A	No	Office of the President
Corporation and Board Lists	Business Corporation Act, Sec. 140, (1a)	Statutory - Permanent	Electronic and Paper	Electronic and Paper	N/A	No	Office of the President

Record Category	Jurisdiction	Retention Period (Required)	Active Storage Media	Inactive Storage Media	Disposal	Contains Personal Information	Responsible Department
<i>Financial Records</i>							
Audited Financial Statements	Business Corporations Act	Statutory - Permanent	Electronic and Paper	Electronic and Paper	N/A	No	Finance
Annual Returns	Business Corporation Act	Statutory - Permanent	Electronic and Paper	Electronic and Paper	N/A	No	Finance
Year-End Audit Working Paper File	Internal Finance Policy	Recommended 25 years	Electronic and Paper	Electronic and Paper	Shred/Delete Electronic Files	No	Finance
General Ledger	n/a	Statutory – 50 years	Electronic and Paper	Electronic and Paper	Shred/Delete Electronic Files	No	Finance
General Journals	Business Corporations Act	Statutory – 50 years	Electronic and Paper	Electronic and Paper	Shred/Delete Electronic Files	No	Finance
Payroll	Business Corporations Act	Statutory – 7 years	Electronic and Paper	Electronic and Paper	Shred/Delete Electronic Files	Yes	Finance
Accounts Receivable	Business Corporations Act	Statutory – 7 years	Electronic and Paper	Electronic and Paper	Shred/Delete Electronic Files	Yes	Finance
Accounts Payable	Business Corporations Act	Statutory – 7 years	Electronic and Paper	Electronic and Paper	Shred/Delete Electronic Files	Yes	Finance
Internal Reports	Business Corporations Act	Recommended – 10 years	Electronic and Paper	Electronic and Paper	Shred/Delete Electronic Files	No	Finance
Annual Inventory Reports	Business Corporations Act	Statutory – 3 years	Electronic and Paper	Electronic and Paper	Shred/Delete Electronic Files	No	Finance

Record Category	Jurisdiction	Retention Period (Required)	Active Storage Media	Inactive Storage Media	Disposal	Contains Personal Information	Responsible Department
<i>Personnel Records</i>							
Attendance Records Correspondence Employee Documents Curriculum Vitae Employment Record Job Description Performance Appraisals Record of Vacation Human Rights Appeals	Business Corporation Act Employee Standards Act	7 years after last day employee worked	Electronic and Paper	Electronic and Paper	Shred/Delete Electronic Files	Yes	Human Resources

Record Category	Jurisdiction	Retention Period (Required)	Active Storage Media	Inactive Storage Media	Disposal	Contains Personal Information	Responsible Department
<i>Health Records</i>							
Patient Record - paper	PHA, Regulation 965, Sec 20 (3) Limitations Act	Statutory – 10 years after patient achieves 18 years of age or, if over 18, 10 years after last contact	Paper	Microfiche	Shred	Yes	Health Records
Patient Record - electronic	PHA, Regulation 965, Sec 20 (3) Limitations Act	Statutory – 10 years after patient achieves 18 years of age or, if over 18, 10 years after last contact	Electronic	Microfiche	Shred	Yes	Health Records
Digital and Film Diagnostic Records	PHA, Regulation 965 Sec 20 (3)	Statutory – 10 years after patient achieves 18 years of age or, if over 18, 10 years after last contact. Recommended - 5 years	Electronic	Electronic	Delete	Yes	Health Records
Antenatal Records	PHA, Regulation 965, Sec 20 (3)	Statutory – 33 years	N/A	Microfiche	Shred	Yes	Health Records
Ultrasound Videotapes	PHA, Regulation 965, Sec 20 (3)	Statutory – 10 years after patient achieves 18 years of age or, if over 18, 10 years after last contact	Electronic	Electronic	Delete	Yes	Health Records
Release of Information Records	PHIPA	33 years	Electronic	Electronic	Delete	Yes	Health Records

Record Category	Jurisdiction	Retention Period (Required)	Active Storage Media	Inactive Storage Media	Disposal	Contains Personal Information	Responsible Department
<i>Occupational Health & Safety Records</i>							
Health & Safety Committee Minutes	Occupational Health & Safety Act	Statutory – 1 year Recommended – 3 years	Paper/Electronic	Paper/Electronic	Recycle /Delete Electronic Files	No	Health & Safety Specialist
Inspection Reports from Ministry of Labour	Occupational Health & Safety Act	Statutory – 1 year or longer to ensure that 2 of the most recent report are available Recommended – 10 years	Paper/Electronic	Paper/Electronic	Recycle /Delete Electronic Files	No	Health & Safety Specialist
Investigation Reports on Hazardous Substances/Designated Substances	Occupational Health & Safety Act	Statutory – Keep most recent copy. Recommended – keep past 2 reports	Paper/Electronic	Paper/Electronic	Recycle /Delete Electronic Files	No	Health & Safety Specialist
JOHSC Workplace Inspection Reports (Done Yearly)	Occupational Health & Safety Act	Statutory – Keep most recent copy	Paper/Electronic	Paper/Electronic	Recycle /Delete Electronic Files	No	Health & Safety Specialist
Accident/Injury Incidents Reports	Occupational Health & Safety Act	Statutory – Keep for 1 year. Recommended – keep for 3 years	Paper/Electronic	Paper/Electronic	Shred/Delete Electronic Files	Yes	Occupational Health Centre
<i>Employee Health Records</i>							
Medical Records of Employees	Occupational Health & Safety Act	Statutory – 10 years after employee terminates and lifetime retention if a work-related illness/injury	Paper/Electronic	Paper/Electronic	Shred/Delete Electronic Files	Yes	Occupational Health Centre

Record Category	Jurisdiction	Retention Period	Active Storage Media	Inactive Storage Media	Disposal	Contains Personal Information	Responsible Department
<i>Waste Management Records</i>							
Annual Waste Audits Reduction Work Plans Source Separations Detention	Ministry of Environment and Energy Reg 102, 103, 105	Statutory – 2 years	Paper/Electronic	Paper/Electronic	Recycle Paper/Delete Electronic	No	Engineering/Support Services
Manifests	Ministry of Environment and Energy Reg 347	Statutory – 2 years	Paper	Paper	Recycle Paper/Delete Electronic	No	Engineering/Support Services
Notices	Environment Canada – E.I.H.W. Reg. Subsection 45(3) of C.E.P.A.	Statutory – 3 years	Paper	Paper	Recycle Paper/Delete Electronic	No	Engineering/Support Services
Inspection Reports		Recommended – 5 years	Paper/Electronic	Paper/Electronic	Recycle Paper/Delete Electronic	No	Engineering/Support Services

**Schedule B
Common Non-Legislated Records**

Record Category	Jurisdiction	Retention Period (Recommended)	Active Storage Media	Inactive Storage Media	Disposal	Contains Personal Information	Responsible Department
<i>Common Non-Legislated Records</i>							
Budget/Payroll/Cost Centre Reports (Departmental copies)	Recommended by Finance Dept.	Recommend – 2 years	Paper/Electronic	Paper/Electronic	Shred Paper/Delete Electronic	No	All departments
Purchase Orders, Contracts, Lease Agreements (Departmental copies)	Recommended by Finance Dept.	Recommend – 2-3 years after completion of agreement	Paper/Electronic	Paper/Electronic	Shred Paper/Delete Electronic	No	All departments
Requisitions including Cheques, Printing, Stores, Major/minor Work Orders (Departmental Copies)	Recommended by Finance Dept.	Recommend – 2 years	Paper/Electronic	Paper/Electronic	Shred Paper/Delete Electronic	No	All departments
Accreditation Records	Recommended by Quality & Risk Management	Recommend- 6 years- Current and previous cycles	Paper/Electronic	Paper/Electronic	Shred Paper/Delete Electronic	Yes	Quality and Risk (patient and visitor) Health & Safety Specialist & Occupational Health Centre (employee)
Committee Minutes	Recommended by Corporate Offices	Recommend – 2 years	Paper/Electronic	Paper/Electronic	Recycle Paper/Delete Electronic	No	All departments/programs throughout hospital
E-mail/ Correspondence	Recommended by Privacy and IT	6 months	Electronic	Electronic	Delete	Yes	Responsible Users/Information Technology
Annual Reports and Other Reports	Recommended by the Archives	Recommend Paper– 2 years Electronic- permanent	Paper/Electronic	Paper/Electronic	Recycle Paper	No	Communications All departments/programs throughout hospital
Departmental Employee Files	Recommended by Human Resources	Recommend – Term of employment	Paper/Electronic	Paper/Electronic	Shred Paper/Delete Electronic	Yes	All departments/programs throughout hospital
Newsletters	Recommended by Communications	Recommend Paper- 1 year Electronic- permanent	Paper/Electronic	Paper/Electronic	Recycle Paper		Communications
Research Ethics Applications, Approvals & Minutes	Recommended by Ethics Committee	Recommend – 7 years after completion of research project	Paper/Electronic	Paper/Electronic	Shred Paper/Delete Electronic	Yes	THREB/Research Ethics

Record Category	Jurisdiction	Retention Period (Recommended)	Active Storage Media	Inactive Storage Media	Disposal	Contains Personal Information	Responsible Department
Department-specific planning files	Recommended by Corporate Offices	Recommend – 2 years	Paper/Electronic	Paper/Electronic	Recycle Paper/Delete Electronic	No	All departments/programs throughout hospital
Patient Relations Files	Recommended by Communications & Patient Relations	Recommend- Permanent	Paper/Electronic	Paper/Electronic	N/A	Yes	Communications & Patient Relations
Patient and Employee Incident Files, Identification of Workplace Hazards Files	Recommended by Quality & Risk	Recommend- Permanent	Paper/Electronic	Paper/Electronic	N/A	Yes	Quality & Risk
Facilities Maintenance and Development Records	Industry Standard	Recommend- retention periods vary depending on type of record- based on industry standards (e.g. CSA, TSSA)	Paper/Electronic	Paper/Electronic	Recycle Paper/Delete Electronic	No	Engineering Services
Education Attendance records and materials	Recommended by Clinical Education	Recommend- Permanent	Paper/Electronic	Paper/Electronic	Recycle Paper/Delete Electronic	Yes	Clinical Education
Sterilization Records	CSA Standard	2 years	Paper	Paper	Shred	No	Sterile Processing Department
Records of refrigerator temperatures	Recommended by Risk Management	1 year	Paper	Paper	Recycle Paper	No	All departments/programs