

1.2.3 RETENTION AND
DESTRUCTION OF
RECORDS – PAPER AND
ELECTRONIC

Effective: 02/74

Revised: 02/15; 03/20; 05/22;

04/23

Reviewed/Approved by Bd. of

Dir.: 03/24

Kirk Davis, President/CEO

## **Policy Statement:**

In order to serve the needs of Lakemary Center, Inc., (LMC) in compliance with federal, state and accreditation agency requirements and standards, the Board of Directors delegates to the President/CEO, the responsibility and authority to establish and maintain a system of administrative records.

#### **Policy:**

It is the policy of LMC that:

- Public records required by law to be kept are open to inspection by parties having legitimate interest in them to the satisfaction of the Board of Directors, President/CEO or their designate representative.
- All such office records are kept for the minimum length of time required by law.
- Access is limited to authorized personnel as determined by the President/CEO or designated representative. (See Policy 1.6.1 Privacy Practices for Protected Health Information)

## **Document Destruction and Exceptions**

### Paper Documents and Records

Medical Records is responsible for the ongoing process of identifying its records, which have met the required retention period as defined by state and federal law and accrediting agencies and overseeing their destruction. Destruction of documents is accomplished by shredding. Notwithstanding the normal document destruction schedule, document destruction will be suspended immediately in the following circumstances:

- a) Where the information has been subpoenaed in a civil or criminal case, or is the subject of an information request letter from a government agency,
- b) Where the information relates to civil or criminal litigation against LMC or subsidiary that is pending, imminent or contemplated.
- c) Where destruction of the information would impede, obstruct or influence the administration of any matter within the jurisdiction of the federal government, where such matter is pending, imminent or contemplated

Destruction will be reinstated upon conclusion of the investigation or lawsuit, but only after consultation between the LMC President/CEO and the organization's legal counsel.

### Electronic Documents and Records

Electronic documents are retained as if they were paper documents. Therefore, any electronic files, including records of donations made online, that fall into one of the document types from the LMC – Guidelines for Retention of Records are maintained for the appropriate amount of time. If a user has sufficient reason to keep an e-mail message, the message should be printed in hard copy and kept in the appropriate file or moved to an "archive" computer file folder. Backup and recovery methods are tested on a regular basis.

# **Compliance and Sanctions**

Failure on the part of employees to follow this policy can result in possible civil and criminal sanctions against LMC and possible disciplinary action against responsible individuals. The President/CEO periodically reviews these procedures with legal counsel to ensure that they are in compliance with new or revised laws and regulations.

**Policy reference:** 1.6.1 Privacy Practices for Protected Health Information Policy

1.7.1 Security Practices for Protected Health Information Policy

**Procedure reference:** Records Retention Schedule

HIPPA Privacy Practices Procedure Manual HIPPA Security Practices Procedure Manual

**Application:** All Services