|  |  |  |
| --- | --- | --- |
|  | **HOSPITAL****GUIDELINES OF PRACTICE** | **Number: 900.10** |
| **Page 1 of 4** |

|  |
| --- |
| **CONTROL OF RECORDS** |

 **PURPOSE**

Define the procedure to properly identify, store, protect, retrieve, retain and dispose of records. Information herein applies to records required by the ISO9001-2008 and National Integrated Accreditation for Healthcare (NIAHO) requirements.

**POLICY**

Verde Valley Medical Center (VVMC) maintains two types of records: 1) patient medical records and 2) all others records, including those used for business operations. Patient medical records are maintained under the control or the Health Information Management Department. All other types of records include documents determined by the organization to be necessary for the effective planning, operation, and control of its processes. VVMC establishes and maintains records to provide evidence of conformance to requirements and of all the effective operation of the Quality Management System. Records are to remain legible, readily identifiable and retrievable.

It is the policy of VVMC to apply effective and cost-efficient management techniques to maintain complete, accurate and high quality records. Records are protected, tracked and maintained. Expired and non-records are discarded at the appropriate time. Corresponding retention schedules, destruction methods and other supporting procedures have been developed to support this policy (see Corporate Policy CP605 Records, Reports and Statistics Retention Policy). Process owners are responsible to make certain records required for their processes are controlled as defined by this policy.

Definition of Records:

Record is recorded information, in either paper or electronic format and including email, regardless of medium or characteristic that can be retrieved at any time. It includes, but is not limited to, all original documents (including scanned /faxed), papers, letters, x-rays, cards, logbooks, maps, photographs, blueprints, sound or video recordings, microfilm, magnetic tape, electronic media, and other information recording media, regardless of physical form or characteristic, that are generated and/ or received in connection with transacting its business and is related to VVMC's legal obligations. If not stipulated otherwise, this is the record to which the retention schedules apply.

Business records include, but are not limited to, letterhead correspondence, legal opinions, real estate documents, directives and policies, official meeting minutes, personnel records, benefit programs, purchasing requisitions / invoices, accounting documents, tax documents, reimbursement documents, completed and signed forms, contracts, insurance documents, general ledgers, audit findings/ reports, results of rounds/surveillance, records of third party inspections and financial reports.

Medical record means all communications that are recorded in any form or medium and that are maintained for purposes of patient treatment, including reports, notes and orders, test results, diagnoses, treatments, photographs, videotapes, x-rays, and the results of independent medical examinations that describe patient care. Medical records do not include materials that are prepared in connection with utilization review, peer review or quality assurance activities, including records that a health care provider prepares pursuant to A.R.S. 36-441, 36-445 or 36-2402. Medical records do not include recorded telephone and radio calls to and from a publicly operated emergency dispatch office relating to requests for emergency services or reports of suspected criminal activity, but may include communications between emergency personnel and medical personnel concerning treatment of a person. Records include the:

* Designated Record Set as defined by Health Insurance Portability Accountability Act (HIPAA) HOSP 220.04
* Legal Health Record for Disclosure Purposes HOSP 220.09
* Using and Disclosing Limited Data Sets of Protected Health Information HPP-200-27
* Use and Disclosure of Protected Health Information for Treatment, Payment, and Healthcare Operations HPP 200-05
* Psychological records and all medical records held by a health care provider, including medical records that are prepared by other providers

 Records can only be discarded when the specified retention period has

 expired and are destroyed according to the guidelines in Section 8 of this policy.

Definition of Non-Records:

Non-records material includes, but is not limited to, duplicate copies of correspondence, duplicate copies of records used for short-term reference purposes, blank forms, stocks of publications, magazines, publications from professional organizations, newspapers, public telephone directories, and transitory messages used primarily for the informal communication of information.

Transitory messages do not set policy, establish guidelines or procedures certify a transaction, or become a receipt. Transitory messages may include, but are not limited to, e-mail messages short-lived or no administrative value, voice mail, self-sticking notes, and telephone messages.

Non-records are maintained for as long as administratively needed, and the retention schedules do not apply. Non-records may be discarded when the business use has terminated.

**PROCEDURE**

1. Employees apply effective and cost-efficient management techniques to maintain complete, accurate and high quality records. Employees make certain records are protected, tracked and maintained and that expired records and non-records are discarded at the proper time.

2. All employees and agents are responsible for making sure that all records are created, used, maintained, preserved and destroyed in accordance with this policy.

3. This policy applies to all clinical and business records stored on computers and other electronic media, such as e-mail, word processing files, spreadsheets, Internet materials and reports or other outputs from other software systems, in the same way it applies to hard copy records. Electronic records should comply with the same record retention procedures and periods as hard copy records.

1. Electronic records, including patient medical records, are stored in accordance with established VVMC retention schedule (see CP605). It is the responsibility of those parties storing electronic records or email that contains electronic records to make certain records are being stored according to established Information Technology (IT) guidelines.
2. Retention, protection, and distribution of non-medical records such as meeting minutes, results of audit findings, purchasing records and third party inspections is maintained by a variety of methods, including but not limited to records dated when posted within department, archive of obsolete records, maintaining authorized records at specific locations within departments (in binders, clipboards, file cabinets, standard /daily huddle boards).
3. All records generated and received by VVMC are the property of VVMC. No employee, by virtue of his or her position, has any personal or property right to such records even though he or she may have developed or compiled them.

6. The unauthorized destruction (including destruction of records subject to a litigation hold), removal or use of any records is prohibited. When an employee leaves a department/ unit (either by transfer to another department/unit or by voluntary or involuntary termination), the employee's director inspects / reviews files in the employee's office/work station and approve the removal or destruction of any records.

7. No one may falsify or inappropriately alter information in any record or document. Any activities pertaining to the unauthorized destruction, removal, alteration or falsification of VVMC documents should be reported to management, either directly or through the Compliance Hotline at *1-877-373-0127.*

8. Destruction of Records:

A. Records that have satisfied their legal, fiscal, administrative, and archival requirements may be destroyed in accordance with the Record Retention Schedule and specific department storage and retention policies (see CP605).

B. Records that cannot be destroyed include records subject to a litigation hold or records with a permanent retention. In the event of a lawsuit or government investigation, the applicable records that are not permanent cannot be destroyed until the lawsuit or investigation has been finalized.

C. Records are destroyed in a manner that provides for the confidentiality of the records and renders the information no longer recognizable as VVMC records. The approved methods to destroy VVMC records include, but are not limited to, recycling, shredding, and magnetizing. VVMC records are only placed in designated trash receptacles unless the records are rendered no longer recognizable as a VVMC record.

9. Record Retention Schedules:

A. All records are maintained in accordance with federal and state laws and regulations as well as accrediting bodies.

B. Minimum retention schedules are outlined in Northern Arizona Healthcare Corporate Policy CP 605 Records, Reports and Statistics Retention.

10. Questions and Comments:

A. If employees or agents have questions or comments regarding this policy, a record or any procedures, they should direct such questions and comments to their manager or director.

B. If employees or agents still have questions or comments, or for other reasons do not wish to approach their manager or director, they should contact the Compliance Office directly at 928-779-2347 or the Compliance Hotline at 1-877-373-0127.

**REFERENCES:**

\* A.R.S. §12-2297; medical record retention;

\* A.R.S. §12-2291; definition of medical record

\* A.R.S. §12-542; medical malpractice statute of limitations

\* A.R.S. § 36-343; vital statistics

\* A.R.S. § 44-7012; electronic records

\* Ariz. Admin. Code § 9-10-201; perinatal services

\* Ariz. Admin. Code§ 9-10-228; outpatient records

\* ISO 9001 2008 4.2.4

\* CP605 Records, Reports and Statistics Retention

\* HIM 6102 Retention of Medical Records

\* HOSP 220.04 Designated Record Set

\* HOSP 220.09 Legal Health Record for Disclosure Purposes

\* HPP 200-05 Use and Disclosure of Protected Health Information for Treatment, Payment, and Healthcare

 Operations

\* HPP 200-27 Using & Disclosing Limited Data Sets

**ATTACHMENTS:** N/A

|  |  |  |
| --- | --- | --- |
| **Prepared by/Title/Date:**Beth Overly, RN, February 10, 2013, 8/1/13**Director Approval/Date:**Suzanne Ballard, RN April 2, 2013, 8/5/13Rea Spangler, April 2, 2013Jeri Turner, April 2, 2013 **President Approval/Date:**Barbara Dember, Interim President/CEO, 8/13  | **Committee Approval/Date:** GOP: by committee 4/2/13GOP/DCC: 8 20 13 | **Dates Reviewed/Revised:** 8/1/13 |