Effective Date: January 2018 Last Reviewed: January 2019 Next Scheduled Review: January 2020

Archiving Policies and Procedures

PURPOSE

This policy is designed to ensure compliance with federal and state laws and regulations, to reduce the risk of accidental destruction of records earlier than intended, and to facilitate operations by promoting efficiency in retrieving records and freeing up valuable storage space with destruction of outdated documents.

POLICY STATEMENT

It is the policy of <u>Best Ever Family Planning</u> to preserve and maintain records as required by law and to destroy them when appropriate.

Archiving

- 1. All policies and procedures and documentation associated with employee training, audits and subsequent communication will be preserved in the archive system for a <u>period of 7 years after the date the policy/procedure was discontinued.</u> *NOTE: Organizations should receive a legal opinion on the retention requirements could vary by type of policy.*
- 2. No adverse inference is to be drawn from an inadvertent failure to retain a document in accordance with the established guidelines.
- 3. Electronic storage is the preferred method and will be organized in the same order as agency policy/procedure manuals.
- 4. Archived electronic records must be preserved in a PDF or other immutable format to prevent changes from being made to the document.
- 5. Whenever possible, paper documents will be scanned and saved as PDF file, using the established naming convention, and placed in the electronic archive.
- 6. If scanning is not feasible and electronic document will be created as a placeholder within the archive system.
- 7. Work with the <u>Information Technology (IT) Director</u> to establish a specific drive for archive file storage and to ensure ongoing maintenance of and access to the files.

Action Steps

(See ADDENDUM A for examples of filing and naming conventions)

- 1. All policies and procedures will be saved in a PDF format and placed in the archive folder at the time of implementation.
- 2. Training documents, memos, and responses to staff questions will be included in the archive using a naming convention that groups all items next to the pertinent policy/procedure.



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- 3. A policy or procedure will be considered discontinued as of the date a revised version is effective and placed in the archive.
- 4. When a policy or procedure is eliminated, rather than revised, written notification will be provided to staff. This notification will cite the date discontinued, saved as a PDF file and preserved in the electronic archive to document the change.
- 5. Paper documents will be scanned and saved as a PDF, using the established naming convention.
- 6. When scanning of a paper document is not feasible an electronic document will be created as a placeholder in the archive system. This placeholder will include:
 - a. number and title of the paper document,
 - b. effective date
 - c. description of contents or table of contents
 - d. number of pages
 - e. physical storage location of the hard copy
- 7. Save placeholder as a PDF, using the established naming convention. Place in the archive system.
- 8. A hard copy of the placeholder document will be printed and placed with the paper file. The paper version will be stored in the secure location and readily retrievable.

Auditing Retrieval of Archived Documents

The ability to retrieve archived documents is a vital component of risk management for the organization and annual audits will be conducted to ensure accessibility of these files.

Action Steps

- 1. Identify six unique policies or procedures to be retrieved, each from different years
- 2. <u>Assign two individuals</u> with access to the archive system, to retrieve three of the archived files
- 3. Document
 - a. Whether or not the appropriate files were located
 - b. What difficulties were encountered in retrieving the files
 - c. Any changes identified to improve retrieval

Document Destruction and Exceptions

- 1. The <u>CEO, COO, Head of Health Services, CFO</u> and <u>Legal Counsel</u> are responsible for the ongoing process of identifying records which have met the required retention period and overseeing their destruction.
- 2. Destruction of paper documents will be accomplished by shredding.
- 3. Destruction of electronic files will be completed by the <u>IT Director</u>.
- 4. Notwithstanding the normal document destruction schedule of the organization, document destruction will be suspended immediately in any of 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 a civil or criminal litigation against the organization that is pending, imminent, or contemplated

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- c. where destruction of the information would impede, obstruct, or influence the administration of any matter within the jurisdiction of the state or federal government, where such matter is pending, imminent, or contemplated
- d. where legal counsel places a "legal hold" on any document for any reason.
- 5. Destruction will be reinstated upon conclusion of the investigation or lawsuit, but only after consultation with the <u>CEO</u> and <u>Legal Counsel</u>, and only in accordance with this policy's general schedule.
- 6. In the event that the normal document destruction schedule is suspended, the <u>CEO</u> or <u>Legal Counsel</u> will notify affected employees with instructions. Employees shall work with <u>Legal Counsel</u> and the <u>IT</u> <u>department</u> to ensure complete compliance with the instructions.
- 7. Employees will similarly be notified when the normal schedule of document destruction resumes.

Compliance and Sanctions

• Failure on the part of employees to follow this policy can result in possible civil and criminal sanctions against <u>Best Ever Family Planning</u> and possible disciplinary action against responsible individuals. The <u>CEO</u> will periodically review these procedures with <u>Legal Counsel</u>, the <u>COO</u> and <u>CFO</u> to ensure compliance with new or revised laws and regulations.

Definitions

Immutable: not capable of or susceptible to change

"Immutable." Merriam-Webster.com. Merriam-Webster, n.d. Web. 29 June 2018.

References

This document was prepared by the National Family Planning & Reproductive Health Association in January 2019. It is available online at:

www.nationalfamilyplanning.org/pages/issues/issues---providing-high-quality-services--health-center-operations

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Addendum A: Example of Filing and Naming Conventions

Develop a separate drive for ARCHIVE documents and provide limited access to key individuals (e.g., admin assistant, CEO, Head of Health Services, Legal, or anyone with need to find old documents).

When filing each policy/procedure do the following:

- 1. Establish main folder with name of policy 50.3 Archiving Policies and Procedures
 - a. Within the main folder add a sub folder for the current policy that will contain all related documents- include effective date to keep the versions separate.

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Be sure to include effective date and keep naming convention **exactly the same** so future versions will be stored sequentially.

- 2. Add sub-folders here that contain documents related to this version of the policy:
 - a. 50.3_Training Materials (example of documents to file in this folder)
 - Training calendar
 - Slide presentation
 - Highlight of changes
 - Screen shot of electronic chart forms
 - Other updated forms or tools
 - b. 50.3_ Staff Acknowledgment Forms
 - Create additional sub-folder for each location and department (e.g., Gotham clinic, Administration, Finance, HR, etc.)
 - File individual documents by staff name within the appropriate location
 - c. 50.3_Communication and Memos
 - File each communication by date and topic within this folder
 - d. 50.3_Audits and Corrective Actions
 - File by date all audits and any related communication or actions