

Administrative Policies and Procedures

Scanning and Destroying Non-Permanent Records (UW Medicine Policy)

Division: Shared Services
Effective Date: 03/2012
Review Date: 05/2012
Reviewer: Sally Beahan / Christine Taylor / Lori Mitchell

POLICY PURPOSE:

POLICY:

Scanning (or document imaging) is a process by which paper documents are copied and saved as digital images. These digital images change the format of the records from paper to electronic, and are often saved as PDF or TIFF files. If scanned appropriately, the electronic record can legally take the place of the paper record, and the paper record can be destroyed once it is scanned. Like all records, scanned records must be accessible, retrievable, and readable for the full retention period attached to the records. Electronic records are also subject to UW Medicine Information Security Policies. The controls required to safeguard electronic data are dependent on its classification. More stringent controls are necessary to protect confidential information such as Protected Health Information (PHI) and Personally Identifiable Information (PII). The purpose of this policy is to outline the requirements related to document imaging and the destruction of paper records after they have been scanned, and to assure the appropriate security of electronic data.

PROCEDURE:

The Washington State Archives approved the "Requirements for the Destruction of Non-Archival Paper Records After Imaging" for state and local government agencies on March 14, 2012 (attached). In addition to adhering to these State requirements, entities and departments that fall under the jurisdiction of the UW Medicine Records Management must have the following reviewed and authorized by the Records Officer for UW Medicine prior to the implementation of a scanning program:

1. A list of record types (series) being scanned.
2. Written document imaging procedures (include acceptable formats and when to manipulate images for clarity).
3. Written quality control and security procedures (include 100% image verification, access lists, password controls, and protocols for protecting confidential information, and for security breaches).
4. Written naming conventions and file structures (if applicable).
5. Written documentation regarding migration and preservation (include how retention and destruction of scanned records will be assured).
6. Written documentation regarding back-up and disaster preparedness plans (include regular back up protocol and offsite storage).

Once the source documents have been scanned and verified, the source documents can be destroyed (see GS 11012). Because of the very short retention period for the source records after they have been scanned, UW Medicine Records Management Services will not take custody of these records. It will be up to each office/unit to see to the appropriate destruction of the source documents.

The scanned records are to be kept for the appropriate, state-approved retention period. UW Medicine Records Management Services is responsible for the disposition process and destruction notices related to scanned records.

Scanning records related to clinical and/or human subject research may require a more detailed process than outlined in the State document, and may require additional security steps. Contact UW Medicine Records Management Services for assistance.

Copies of all document imaging procedures and authorizations will be kept on file at UW Medicine Records Management Services.

CROSS REFERENCE:

None

ATTACHMENT:

Attachment 1: Requirements for the Destruction of Non-Archival Paper Records after Imaging *“Scanning and Tossing”*

REVIEW/REVISION DATES:

05/2012

SIGNATURE:



Manager: Christine Taylor Date: _____

UW Medicine Chief Financial

Officer: Lori Mitchell Date: _____