POLICY:	Control of Hea	alth Records	
Program Area:	Health Inform	nation Services	Santé
Section:	Health Information Services		Southern Sud
Reference Number:	ORG.1410.PL.008		Health /
Approved by:	Regional Lead – Corporate Services & Chief		
	Financial Officer		
Date:	Issued Revised	2024/Jul/08 yyyy/mmm/dd	

PURPOSE:

- To define guidelines for the removal and return of the health record from/to Health Information Services (HIS).
- > To comply with the requirements of the Personal Health Information Act (PHIA) to protect the confidentiality of personal health information.
- > To ensure the integrity of the health record for chart completion standards.
- > To ensure health records are available for:
 - o Patient care
 - \circ $\;$ Health record reviews for audits, education and research
 - Data abstracting for timely submission of information to Manitoba Health, Canadian Institute for Health Information (CIHI)
 - Response to requests for Personal Health Information
 - \circ $\;$ Any other need as approved by the Manager of HIS or delegate $\;$

BOARD POLICY REFERENCE:

Executive Limitation (EL-02) Treatment of Clients.

POLICY:

- > Health Information Services shall house health records in secured storage areas.
- Health records shall only be removed from HIS for direct patient care or follow-up. Exceptions may be made at the discretion of the Manager, HIS or delegate.
- > HIS shall provide health records upon request and in the following priority:
 - areas providing patient care when the patient is in attendance for treatment or investigation
 - o patient care areas to complete follow up with the patient
 - for rounds, audit, research to other activity.
- All requests for access to health records not related for provision of care shall be reviewed in Health Information Services.
- The original requestor/location shall be responsible for the safekeeping of the health record when it is removed from HIS.
- The patient care unit shall transfer a patient's health record to the receiving unit when a patient is transferred within the facility.

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- The original requestor/location shall be responsible to advise HIS when the health record is forwarded to another individual. The recipient shall then become responsible for the safekeeping of the record.
- > Health records shall be returned immediately upon request by HIS staff.

IMPORTANT POINTS TO CONSIDER:

- Health records should not be removed off site without approval and notification. Health Information Services must ensure tracking and security of health information occurs
- Health Information staff shall access, without permission, during off hours any office or other area where health records are being held in order to retrieve health records required for patient care, or other urgent purposes.

PROCEDURE:

- Requests for health records may be made by telephone, in person to Health Information Services.
- Requestors shall provide:
 - $\circ \quad \text{their name} \quad$
 - o patient's name and health record number,
 - location of where health record is going or name of individual who is requesting the record
- Requestors shall return the health record to HIS, the same day it was obtained from HIS. Exceptions:
 - Inpatients: The health record will be maintained on the patient care unit for the duration of the admission and returned within 12 hours of discharge.
 - Day Surgery will be held for the duration of the stay and returned by end of regular operational hours.
 - Emergency Visits and Outpatient Clinic/Ambulatory Care Visits: The health record may be retained to facilitate patient follow-up but shall be returned to HIS within 12 hours of the visit. Obstetrical outpatients' health record may be maintained on the unit for the duration of and up to the delivery and returned within 12 hours post discharge.

REFERENCES:

Health Sciences Centre Policy #80.115.016; Control of Medical Records Northern Region AD-09-105; Control of Health Records

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