



POLICY: Retention of Non Client Records

Program Area: Health Information Services

Section: Health Information

Reference Number: ORG.1410.PL.202

Approved by: Regional Lead – Corporate Services & Chief Financial Officer

Date: Issued 2016/Jun/29
Revised 2025/Feb/28

PURPOSE:

To establish consistent retention and destruction procedures for all Recorded information collected and maintained within Southern Health-Santé Sud, to meet the requirements of federal and provincial legislation as it relates to Retention of Records.

BOARD POLICY REFERENCE:

Executive Limitation (EL-07) Corporate Risk.

POLICY:

- For the purposes of this policy, non client records are those which are Recorded or printed on paper, including that which has been converted from paper to another form to facilitate storage and accessibility.
- Records may be written, photographed, recorded or stored in any manner, on any storage medium including graphic, electronic or mechanical means.
- Original records that are collected and maintained within programs, disciplines, services and facilities will be retained for the entire **minimum** retention periods stipulated in ORG.1410.PL.202.SD.01 Retention Schedule for Non Client Records.
- Original records must be maintained in a manner that ensures the integrity and availability of the information in a readable and reproducible format for the duration of the retention period.
- The Privacy & Access Officer shall ensure an Information Managers Agreement is in place when the information will be processed, stored or destroyed by an external individual or body other than the Trustee that collected the information.
- Conversion of records from one storage medium to another during or following the minimum retention periods shall be permitted provided the conversion preserves the integrity of the information and meets the proof of original and admissibility of evidence requirements set forth in *The Manitoba Evidence Act of Manitoba*.

- Records converted from paper to an electronic format do not need a record of media conversion.
- Records that have been converted to another storage medium prior to the expiration of the minimum retention period (i.e. imaged paper records) may be destroyed immediately following conversion and completion of data integrity checks, provided that the converted record is retained for the balance of the retention period.
- Permanent destruction of Records shall occur according to policy ORG.1410.PL.203 Disposal Personal Health Information.
- Any revisions made to ORG.1410.PL.202.SD.01 Retention Schedule for Non Client Records shall be recorded on ORG.1410.PL.202.SD.02 Change History Table Retention Schedule for Non-Client Records.

PROCEDURE:

1. The facility/program/discipline designate is responsible to:
 - Identify Records eligible for destruction according to ORG.1410.PL.202.SD.01 Retention Schedule for Non Client Records.
 - Identify Records requiring an extended retention period and bring them along with supporting justification and recommended extension time lines to the attention of the Director of Health Services or Regional Program Director.
 - If the requested extension is approved, the record will be marked with the appropriate destruction date.
 - Notify the applicable persons of records ready for destruction.
2. Use of ORG.1410.PL.202.FORM.01 Record of Destruction Log Non-Client is optional.

SUPPORTING DOCUMENTS:

[ORG.1410.PL.202.FORM.01](#) Record of Destruction Log Non-Client
[ORG.1410.PL.202.SD.01](#) Retention Schedule for Non Client Records
[ORG.1410.PL.202.SD.02](#) Change History Table Retention Schedule for Non-Client Records

REFERENCES:

Northern Health Region *Retention and Destruction of Health Records*, AD-09
WRHA *Retention of Office Records*, #10.00.120