Team Name: Health Information Services	Reference Number: ORG.1410.PR.001
Team Lead: Manager, Health Information Services	Program Area: Health Information Services
Approved by: Regional Lead – Corporate Services & Chief Financial Officer	Policy Section: Health Information Services
Issue Date: February 1, 2024 Review Date: Revision Date:	Subject: Securing Health Records

Use of pre-printed documents: Users are to refer to the electronic version of this document located on the Southern Health-Santé Sud Health Provider Site to ensure the most current document is consulted.

PROCEDURE
Securing Health Records

PURPOSE:
To provide a consistent and controlled process for securing and restricting access to health records that contain information related to legal or risk management matters (standards of care) involving Southern Health-Santé Sud or staff.

To protect the security and integrity of the information within the health record that may be required for legal proceedings or risk management.

IMPORTANT POINTS TO CONSIDER:
➢ Health records are secured in circumstances where there is the potential for legal action involving Southern Health-Santé Sud and/or staff or at the request of a Director/Lead or Patient Safety.
➢ Health records that are in paper format are secured in a designated locked storage unit with controlled access. Electronic health records are secured following processes specific to the electronic health system used.
➢ Secured paper health records are identified and tracked using ORG.1410.PR.001.FORM.01 Health Record Safekeeping Control Report and ORG.1410.PR.001.FORM.02 Secured Health Records Log and, where applicable, an electronic chart locator.
➢ Where a legal and/or risk management matter is related to one visit, only the original information related to the visit is secured.
➢ Copies of the information are made for the continuity of care and are included in the active health record.

- Where possible, staff requesting access to a secured record will be provided with the copied version.
- Any requests to access the original record will be closely monitored and tracked using ORG.1410.PR.001.FORM.01 Health Record Safekeeping Control Report.
- Secured charts will not be released to active or archived files unless authorized by Patient Safety or a Director/Lead.
- ORG.1410.PR.001.FORM.02 Secured Health Records Log will be reviewed with Patient Safety or the Director/Lead at a minimum of every twelve months for health records that no longer need to be secured.
- Use and disclosure of the secured records must be in accordance with ORG.1411.PL.404 Security and Storage of Confidential Information including Transportation and ORG.1411.PL.502 Use and Disclosure of Personal Health Information.
- All requests for Personal Health Information required as part of a legal proceeding, including requests from solicitors representing the Trustee, medical staff or other disciplines, must be coordinated by the Site Privacy Officer or Privacy and Access Specialist.

PROCEDURE:

1. Securing a Health Record
   1.1. Notify a manager or supervisor when a request is received to secure a health record to confirm there is a requirement to secure the health record.
   1.2. Determine the information to be secured. For example; if the request is related to a specific visit, secure only the information related to the visit.
   - Electronic Health Records: where applicable, print a copy of all relevant health records maintained in an electronic health record system. Electronic health records are considered original documents and therefore, the printed copy will serve as the original for the purpose of a legal proceeding.
   1.3. Following ORG.1410.PL.002.SD.01 Completion of Health Records Standards (acute/transitional sites), review the paper health record to ensure all physician documentation is complete.
   1.4. Number both sides of the pages, including blank pages, on the bottom right hand corner of the original health record (to be secured) in sequence to allow for proper indexing when additions to the health record are made.
   - Ensure the numbers will be visible on the photocopied or scanned record. Date and initial the first page or facesheet of the original health record.
   - Late reports or information related to subsequent activity will be placed in the correct order and numbered with an alpha suffix (i.e. 12a, 12b).
   1.5. Photocopy the original records that have been numbered to produce a copy that is the exact reproduction of the original record to be secured. For example; two-sided.
   1.6. Stamp 'copy' on all copies and file in the health record that will be returned to active files or, if related to an inpatient admission, return to the ward.

1.7. Complete all sections of ORG.1410.PR.001.FORM.01 Health Record Safekeeping Control Report.   Make two copies.

   ➢ Attach a copy to the front of the health record (original) to be secured and a copy in the health record to be returned to active files or the ward.

1.8. Complete ORG.1410.PR.001.FORM.02 Secured Health Records Log and file in a designated binder or folder for ease of access.

1.9. Secure the original records or health record in a designated locked storage unit. The entire original chart of a deceased patient may be secured in its entirety if physician deficiencies have been completed (acute/transitional sites).

1.10. Outguide the health record when applicable (i.e. deceased record).

1.11. File copied records in the health record and return to active file room or the ward as the case may be.

2. **Responding to Requests for Information from a Secured Health Record**

   2.1. When required to email records, encrypt and password protect electronic copies using a Digital Shared Services approved file compression and encryption software such as Adobe Pro or 7-Zip Manager and in accordance with ORG.1411.SG.001 Emailing Confidential Information.

   2.2. Electronic or paper copies may also be mailed or couriered in accordance with ORG.1411.PL.404 Security and Storage of Confidential Information including Transportation.   Note, if electronic records are disclosed a vault privacy USB storage device must be purchased from the Digital Shared Services approved product list.

3. **Releasing a Health Record to Active or Archived Files**

   3.1. Once notified that there is no longer a requirement to secure a health record, destroy all copies in accordance with ORG.1410.PL.201 Retention and Destruction of Personal Health Information and return the original health record(s) to active or archived files.

   3.2. Destroy all copies of ORG.1410.PR.001.FORM.01 Health Record Safekeeping Control Report one month after the health record has been removed from the secured file area.

   3.3. Update ORG.1410.PR.001.FORM.02 Secured Health Records Log.

SUPPORTING DOCUMENTS:
ORG.1410.PR.001.FORM.01 - Health Record Safekeeping Control Report
ORG.1410.PR.001.FORM.02 - Secured Health Records Log

REFERENCES:
ORG.1410.SG.001 Encrypting Records using 7-Zip File Manager
ORG.1411.SG.001 Emailing Confidential Information
ORG.1411.PL.404 Security and Storage of Confidential Information including Transportation
ORG.1410.PL.201 Retention and Destruction of Personal Health Information and