California Health Sciences University
CHSU RECORDS MANAGEMENT POLICY

1) PURPOSE

a) Records Management provides a method of inventorying University records and developing Record Retention Schedules to meet administrative, legal, fiscal, research and historical needs and requirements of the University. Assuring properly maintained records decreases the exposure for the University and individuals to legal risks.

2) SCOPE

a) This policy applies to all employees and to all records that are created, received, or retained in the transaction of University business. Any recorded information, regardless of media, characteristics, physical form, storage location, or means of transmission, is considered a University record.

3) POLICY STATEMENT

a) CHSU supports Records Management to ensure efficiency in the creation, use, handling, control, maintenance, and disposition of records, regardless of format, by adhering to a Records Retention Schedule that applies to all University departments, offices, and agencies in compliance with state and federal statutory requirements. The goals in managing University records are to reduce risk associated with unintended disclosure of sensitive information, increase efficiency of business operations through efficient storage and retrieval systems, and protect vital and historical information about CHSU.

b) Roles and Responsibilities:

i) Department or Office Heads: The heads of departments or offices are responsible for ensuring that procedures within their area of responsibility meet the requirements of CHSU’s records management relative to record identification, control, maintenance, storage, and disposition. The department or office head should designate a Records Custodian in support of this work.

ii) Records Custodian: The Record Custodian is a position within each department or office who is responsible for assisting in the design, implementation, and management of their department or office records by maintaining the Records Retention Schedule. The Records Custodian assists in training of staff within their unit on the compliance of records management.

iii) Information Technology: Information Technology collaborates with the Records Custodian and departments or offices to preserve and dispose of electronic records by setting restrictions on access, maintaining storage, implementing a disaster recovery plan,
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and ensuring timely disposition of electronic records on CHSU-controlled systems.

iv) All Faculty, Staff, and Contractors: All employees are responsible for managing the records in their possession in compliance with this policy. When leaving a position, employees must ensure that records are left in the custody of personnel of the originating department or office.

v) Records Inventory Sheet: Each department or office compiles an inventory of their departmental records by completing the Records Inventory Sheet. Itemize records by record title/category, description, retention period, location of record, record format, and if record is Official or Copy of the original electronic/paper hardcopy or copy.

vi) Retention Schedule: The highest level administrator of each college and/or department shall complete the CHSU record retention form which shall include the length of time each record is to be kept, in compliance with legal requirements for each such record. CHSU records include, but are not limited to, information pertaining to financial transactions, personnel actions, research activities, and student and course documentation. The retention schedule applies to all records, regardless of format.

vii) Records Destruction Form: According to the listed retention period on the Records Retention Schedule, if a record is eligible to be archived or destroyed, departments or offices must complete a Records Destruction Form.

c) Prohibitions:

i) No employee is permitted to keep University, College or departmental records on personal devices, on external hard-drives or other devices or platforms that are not backed up to CHSU’s cloud-based platforms (e.g., use of Google Docs is prohibited).

4) DEFINITIONS

a) Confidential Records: Any information that is required by contract, law, ethical guidelines, or data owner mandate to be limited to controlled access or any information that if used inappropriately or disclosed could cause significant harm to individuals or CHSU.

b) Disposition of Records – the disposal of the actual record, either by physical destruction or transfer to Archives.

c) Permanent Records: Materials created or received in the conduct of business that are preserved because of the enduring historical value or as evidence of the roles and responsibilities of the creator.

d) Record: Any recorded information, regardless of media, characteristics, physical form, storage location, or means of transmission, made or received and maintained by CHSU pursuant of its legal obligations or in the transaction of its business.

e) Retention Schedule: Document that identifies and describes CHSU’s records by type and provides instructions for the length of time records must be kept and their required disposition.
f) Non-records: Materials made or acquired and kept solely for reference or exhibition purposes, copies of records kept only for convenience or reference, and stocks of publications.

5) PROCEDURES

a) Departments and offices are responsible in taking inventory of their records by completing the Records Inventory Sheet. This will indicate how long to retain types of records. An annual evaluation of the record inventory listed on the form should be completed to determine which records need to be destroyed or archived.

b) Permanent Records: Departments and offices will routinely transfer records with continuing and enduring value, as identified on the retention schedule to be archived. Systems containing permanent records should be implemented in consultation with the Health Sciences Library Director.

c) Non-permanent Records: Departments and offices will destroy records that have not been deemed permanent in the manner identified by the retention schedule. A Records Destruction form must be approved, completed and saved. Confidential paper must be shredded; electronic records must be made unreadable by being overwritten or the storage media being physically destroyed. Recordkeeping systems must be capable of the complete deletion of records; it is not sufficient to take information off-line. Departments and offices will establish a plan for the final disposition of electronic records within recordkeeping systems at the time they procure each system. Records should not be maintained past the end of their stated retention unless involved in current litigation, investigation, or audit. Records may not be destroyed because of lack of space or funding for storage. Destruction should occur at the record type-level, not at the item level, and destruction must be documented by to ensure compliance.

d) Records Capture and Storage: Records must be maintained in such a way that they are identifiable and accessible for the entirety of their assigned retention period. Paper should be stored in areas with consistent temperatures and humidity levels and be protected from fire, free of vermin and insects, and located far from water pipes. Confidential records should be stored in a secure area that is locked and has controlled access. Electronic records must be stored, managed, and retained in CHSU-approved recordkeeping systems to prevent unauthorized addition, alteration, use, suppression, or deletion. Electronic records should not be kept on devices or in locations where they cannot be centrally managed, such as desktops, personal devices, or unapproved systems. Information Technology staff will develop migration or conversion strategies to update hardware, software, and storage media for record systems to ensure future usability of records. Any device that does not meet CHSU security requirements is prohibited from accessing or storing confidential electronic records.
e) Department or office heads are responsible for investigating and resolving any alleged violations of this policy. Violations of the records management practices laid out in this policy may expose CHSU to liability, including penalties, fines, and imprisonment. Sanctions for non-compliance may include reprimand or other appropriate measures.

6) REFERENCE

a) All contracts must be negotiated, executed and stored in compliance with the CHSU Contracts Negotiation and Signatory Authority policy.

Policy Owner: President
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