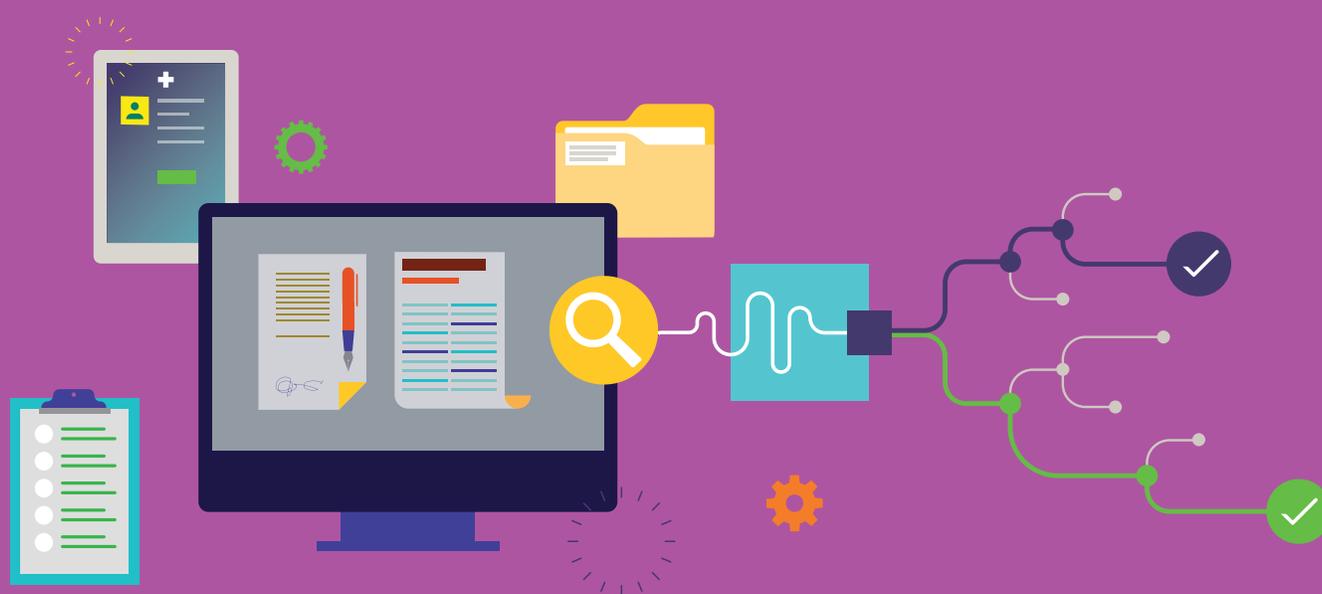


Records Retention Toolkit

A Guide to the Maintenance and Disposal
of Hospital Records

SEPTEMBER 2022



Disclaimer

This Toolkit was prepared for the ownership and use of the Ontario Hospital Association (OHA). It outlines the most up-to-date legislative, regulatory or otherwise recommended retention periods applicable to hospital records and may be used by hospitals as a reference tool as they develop their own records management strategy.

The materials in this resource are for general information only. Hospitals concerned about the applicability of retention periods to specific records within their organizations are advised to seek legal/professional advice, and consult with relevant insurers, based on their particular circumstances. This Toolkit reflects the interpretations and recommendations regarded as valid at the time that it was published based on available information. It is not intended as, nor should it be construed as, legal or professional advice or opinion.

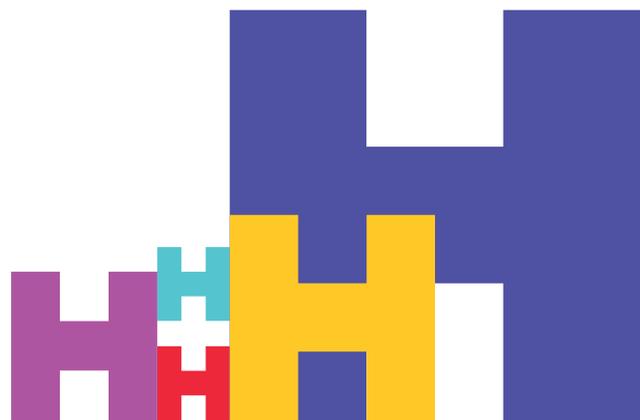
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Table of Contents

1.1 Application of Toolkit	1
1.2 Determining Appropriate Record Retention Periods:	1
1.2.1 Considerations for Policy Development	1
1.2.2 Limitation Periods	2
1.2.3 The <i>Personal Health Information Protection Act, 2004</i> (PHIPA)	2
1.2.4 The <i>Freedom of Information and Protection of Privacy Act</i> (FIPPA)	3
1.2.5 Specific Requirements related to Electronic Records	4
1.2.6 The <i>Excellent Care for All Act</i> , (ECFAA)	5
1.2.7 <i>Connecting Care Act</i> , 2019 (CCA)	5
2.1 Overview of Guidelines	5
2.1.1 Corporate Records	5
2.1.2 Financial Records	5
2.1.3 Human Resources Records	6
2.1.4 Patient Care Records	6
2.1.5 Quality and Risk Management Records	6
2.1.6 Research Records	7
2.1.7 Transitory Records	7
3.1 Table of Records	8
3.1.1 Corporate Records	8
3.1.2 Financial Records	17
3.1.3 Human Resources Records	21
3.1.4 Patient Care Records	28
3.1.5 Quality and Risk Management Records	33
3.1.6 Research Records	35



Introduction

The Ontario Hospital Association (OHA) has developed and updated this resource to provide Ontario’s public hospitals with a quick and practical reference for ensuring compliance with legislative requirements for record retention. The laws on this subject are complex and subject to change and their applicability to a given situation will depend on the particular facts and circumstances involved.

This 2022 update to the Records Retention Toolkit builds on previous versions of the guidelines by incorporating the relevant retention standards for new kinds of records and changes to the regulatory landscape for hospitals. Among the revisions, this iteration includes updates to reflect the proclamation of the *Not-For-Profit Corporations Act*, 2010, as well as obligations under the *Connecting Care Act*, 2019. However, it should be noted that legislation is not the only consideration for establishing appropriate retention periods. Other factors, including the historical value of the information and technological advances should be considered.

Hospitals should seek expert legal and technical advice when designing a comprehensive records management or record-keeping system. (In the context of archival considerations, the Toolkit suggests that where the records may have enduring value, the hospital may wish to seek specialized internal or external advice).

1.1 Application of Toolkit

The Records Retention Toolkit applies to public hospitals in Ontario identified in Regulation 964 under the *Public Hospitals Act* and currently governed by the *Not-For-Profit Corporations Act* (NFPCA).

This Toolkit outlines the legislative and regulatory retention periods that apply to various hospital records. Where legislation or regulatory authorities do not specify a retention period, recommendations for retention are provided. In both cases, the accompanying rationale and/or commentary can assist hospitals in their understanding of the retention requirements.

Finally, it should be noted that this Toolkit does not include archival or technological requirements. As such, when developing a comprehensive record management system or plan, hospitals should treat the recommendations provided herein as one consideration. Ultimately, individual hospitals, in consultation with legal and technical experts, should develop a system that is consistent and aligned with their specific environment and unique circumstances, in addition to legislation.

1.2 Determining Appropriate Record Retention Periods:

1.2.1 Considerations for Policy Development

Records retention is one element of a broader records management strategy.¹ In this regard, developing comprehensive policies based on strong rationales is key to efficiently and practically overseeing the vast volume of records in hospitals. Currently however, many hospitals retain a significant number of records in the absence of any legal requirement or beyond legally required retention periods. This practice may be financially unsustainable and impractical especially in a FIPPA environment and the requirements to respond to requests within certain timeframes.

Especially where there is no legislated retention period, hospitals must balance the impulse to keep records “just in case” with the ability to critically assess the currency and relevance of the information contained in them. Additionally, hospitals may struggle to settle on a retention period for

1 OHA Primer: A Practical Guide for Hospital Records Management Programs [https://www.oha.com/Legislative%20and%20Legal%20Issues%20Documents1/A%20Practical%20Guide%20for%20Hospital%20Records%20Management%20Programs%20\(2011\)%20\(PUBLICATIONS\).pdf](https://www.oha.com/Legislative%20and%20Legal%20Issues%20Documents1/A%20Practical%20Guide%20for%20Hospital%20Records%20Management%20Programs%20(2011)%20(PUBLICATIONS).pdf).

certain records where the same record may be valued differently by different parts of the organization. For example, research may claim an enduring interest in certain patient and quality records (requesting indefinite retention) while the hospital administrator advocates for a retention period substantially less than that.

Some of the considerations that may help mediate discussions about appropriate retention periods include:

- The kind or category of record at issue;
- The usefulness of the information in the record for patient care, quality assurance, research and teaching, and protecting the legal interests of the hospital and its staff;
- The usefulness of the information in the record to the patient, both in legal actions against third parties and for purposes of obtaining insurance and other benefits;
- The archival or historical information in the records; and
- The physical, financial and technological resources available to the hospital to store and maintain the documents in a secure manner.

Most hospitals are party to a number of different contracts and other agreements, which may impose records retention requirements of their own. For example, there may be terms under hospitals' Hospital Services Accountability Agreements (H-SAA) that require the retention of records related to hospital services and funding.

In addition, there are certain overarching legislative concepts which impact policy development. These are discussed in detail below.

1.2.2 Limitation Periods

A limitation period is the time within which a person must bring a legal proceeding. It is an important consideration when developing retention policies as it ensures that hospitals preserve records that may be relevant to a legal proceeding until such a time as the that proceeding can no longer be brought. This is especially important where provincial or federal legislation may prescribe retention for a particular kind of record which is less than the limitation period.

The *Limitations Act* is the single piece of legislation that prescribes the relevant limitation periods applicable to claims that might arise in any health care settings (i.e., mental health, hospitals etc.). Under the *Limitations Act*, the basic limitation period is two (2) years, which starts to run from the day on

which the claim is said to be “discovered”. In the hospital context, this means that a patient may bring a lawsuit against the hospital within two (2) years of knowing that he or she has suffered an injury or adverse event that is the basis for a claim, and that two years can begin long after the actual health care interaction.

In some situations, however, it may take a long time for a patient to discover a claim. This might occur if, for example, harm to a patient does not manifest itself until many years after the injury is incurred. In those cases, the Limitations Act provides for an ultimate limitation period of fifteen (15) years after the day the injury or event leading to a claim occurred (with certain exceptions for which there is no ultimate limitation period, including sexual assault). In other words, a patient has a maximum of 15 years within which to discover his or her claim and commence the appropriate proceeding.

So for example, if Patient A were to have been harmed by an incident in Hospital B in 2020, she would have until 2035 to bring suit against Hospital B. However, if Patient A's injury only manifests itself in 2033, and then, in 2034, she discovers that the injury was caused by Hospital B, despite the basic limitation of 2 years (which would have started to run in 2034); she would still only have until 2035 to commence her suit.

Where the harmed patient is a minor or is an incapable person who is not represented by a litigation guardian (person who makes decisions for a minor in a court proceeding) in relation to his/her claim, the ultimate limitation period only begins to be run from the date that the patient is no longer a minor or incapable.

If a hospital receives notice of a legal proceeding or claim, or notice of any other inspection, inquest, or investigation, it should retain any relevant records until the proceeding is finally disposed of or completed (i.e., all applicable appeal periods are exhausted), even if the applicable retention period is at an end.

1.2.3 The Personal Health Information Protection Act, 2004 (PHIPA)

Another important consideration with respect to record retention policy development is the *Personal Health Information Protection Act* (PHIPA). PHIPA applies to public hospitals, which PHIPA defines as “health information custodians”. PHIPA outlines various obligations for health information custodians concerning the collection, use and disclosure of personal health information. Generally, personal health information would be contained in a patient's health/

medical record, although financial records (e.g., OHIP records or patient payment receipts) may also contain personal health information.

PHIPA does not identify a retention period for records that come within the definition of personal health information, or that contain such information. However, PHIPA does require records containing personal health information to be kept for as long as necessary to allow an individual to exhaust any recourse available under PHIPA concerning a request for access to his or her health record. PHIPA requires retention of personal health information where a request for access is made.

Because the *Public Hospitals Act* (and other legislation) allows for the destruction of records after the end of specified retention periods, it is reasonable to assume that a request for access to personal health information must be made within the retention period in the *Public Hospitals Act*, or other legislation, such as the *Income Tax Act* where personal health information is contained in finance records.

In the absence of a retention period in PHIPA or its regulations, the retention periods in the *Public Hospitals Act* and other legislation continue to apply to records of personal health information.

PHIPA contains provisions concerning storage of personal health information and disposal of such information. Hospitals must ensure they securely store records of personal health information in their custody or control and protect these records against theft, loss and unauthorized use or disclosure and against unauthorized copying, modification or disposal. Hospitals must also dispose of records containing personal health information in a secure manner. Secure disposal involves permanently destroying the records by irreversible shredding, incinerating or pulverizing, (thus making them unreadable) or in the case of electronic or video records, erasing or over-writing the information. (See note concerning destruction of patient records at the end of the table relating to patient care records).

PHIPA requires hospitals to report annually to the Information and Privacy Commissioner (IPC) on the number of times the organization has - notified affected individuals of thefts, losses and unauthorized uses or disclosures of PHI in a calendar year. The regulations also require point-in-time reporting of privacy breaches to the IPC. Hospitals should consider aligning their record retention policies to facilitate these reporting requirements.

1.2.4 The Freedom of Information and Protection of Privacy Act (FIPPA)

FIPPA applies to records that came into the custody and control of a hospital on or after January 1, 2007. FIPPA provides a right of access via a freedom of information request to records under the custody and control of hospitals unless the record or information contained in it is subject to an exemption or exclusion. In addition, FIPPA contains protections for the privacy of individuals with respect to personal information about themselves in the custody or the control of institutions.

Organizational record retention policies aligned with FIPPA should:

- a) facilitate the retrieval and disclosure of responsive records according to the legislated timelines;
- b) protect personal information; and
- c) aid the hospital in efficiently completing day-to-day work and fulfilling its annual reporting obligations to external agencies.

For hospitals, this means understanding the key FIPPA concepts that should inform the development of their policies. The first of these is FIPPA's broad definition of a "record". According to FIPPA, a "record" is information that is recorded by any means, including, printed form, film, or electronic means or otherwise. For example, a record retention policy that is responsive to FIPPA must take into account records that are electronic (including email, audio and video recordings) as well as paper records such as letters, working and draft copies of reports and handwritten notes.

The second key concept is FIPPA's stated goal of protecting personal information. This means that additional considerations should be given as to how hospitals retain records containing personal information. "Personal information" is recorded information about an identifiable individual, with the exception of business contact information. It differs from personal health information insofar as personal information represents a broad category of information, of which personal health information is one type. FIPPA requires that personal information used by the hospital be retained for at least one year following its last use.

Hospitals are free to retain personal information for a longer period, provided that the information is still necessary for the purposes for which it was obtained and collected or for any other further retention period required by law.

FIPPA requires reasonable measures to preserve records to be developed, documented and put into place. While “reasonable measures” are not specified in FIPPA, the IPC has provided guidance suggesting that the size of the organization, the available resources and the format of the records will inform what would be considered reasonable practices in the circumstances. (<https://www.ipc.on.ca/wp-content/uploads/Resources/Bill8-New-Recordkeeping-Amendments.pdf>) The measures also must be in accordance with any recordkeeping or records retention requirements, rules or policies that apply to the institution.

After the retention period, and in accordance with the hospital’s retention policy, the personal information must be destroyed in a secure manner that preserves the privacy of the individual. Disposed records can/should be recorded on a “disposal record” that documents what personal information was disposed, the date of disposal, and the manner by which the records were disposed.

Lastly, FIPPA outlines annual reporting obligations to the Ministry of Public and Business Service Delivery (formerly Ministry of Government and Consumer Services) with respect to records. Every year, a hospital must review and update its Directory of Records, a comprehensive inventory of all the record types held by the hospitals in their various formats. The Directory of Records is intended to help requesters understand the types of records within a hospital’s custody or control and how the hospital retains those records.

Hospitals may wish to calibrate their retention policies so that this annual submission becomes an opportunity to regularly review existing records, record classification plans, retention and disposal schedules and other resources that describe hospital record-holdings of both hard and soft-copy records. This ongoing review will be helpful in ensuring that record retention policies are up-to-date and comprehensive, especially insofar as they facilitate the effective management of freedom of information requests.

In addition to the one-year minimum retention period for personal information, FIPPA also requires that records that are the subject to an open freedom of information request (or an appeal relating to that request) be retained at least until the access request has been satisfied. It is recommended that once appeals have been exhausted that the records be maintained for the appropriate retention period or a further five years. These two record retention requirements supersede any other retention requirements imposed on hospital records.

1.2.5 Specific Requirements related to Electronic Records

Many hospital records now exist in an electronic format. Under FIPPA, there is no substantive distinction as to how and how long physical records should be retained as opposed to electronic records. However, that is not the case of other legislation such as the *Public Hospitals Act*, *Medicine Act* or the *Income Tax Act*, for example, that make specific and distinct provisions relating to the maintenance and retention of electronic records. In developing their retention policies, hospitals should be aware of these provisions and ensure that their retention policies remain aligned with them.

Regulation 965 under the *Public Hospitals Act* permits storage or recording of information by electronic or optical means. Where the hospital does so, it must ensure that the records or information are secure from loss, tampering, interference or unauthorized use or access.

Similarly, the Canada Revenue Agency (“CRA”) recognizes records retained in an electronically readable format, as long as the records can be related back to the supporting source documents and are supported by a system that can produce accessible and usable copies. The CRA and the Canadian General Standards Board/Standards Council of Canada have published guides to electronic record keeping. Of particular relevance is [CRA information circular IC78_10R5 relating to Books and Records Retention/Destruction](#) for further guidance. The CRA also has a circular on [Electronic Record Keeping](#) and one on [Books and Records of Charities](#) which should be also be referred to.

In addition to the CRA, other regulators have relevant policies and statements on records retention generally and portions on electronic records specifically. There is the College of Physicians and Surgeons of Ontario (CPSO) [Policy Statement on Medical Records](#) and the IPC publication on [Records and Information Management](#).

Hospitals should also consider the admissibility of electronic documents in legal proceedings. Generally, the hospital will need to show that the electronic record and its copy are reliable, accurate, and have not been altered. To ensure the reliability, integrity and authenticity of electronic records as evidence in legal proceedings, the hospital may want to review the booklet, *Electronic Records as Documentary Evidence*, published by the Canadian General Standards Board/Standards Council of Canada.

1.2.6 The *Excellent Care for All Act*, (ECFAA)

The government passed the *Excellent Care for All Act* (ECFAA) in 2010. The intent of ECFAA is to make health care providers and executives accountable for improving patient care and enhance the patient experience, through requirements to have hospital board quality committees, to survey patients and practitioners, and to have patient relations processes, amongst other things.

ECFAA was amended in 2014 to create the Office of the Patient Ombudsman for Ontario. The Patient Ombudsman is responsible for the mediation, facilitation and investigation of complaints that cannot be resolved by the hospital's patient relations processes.

The Patient Ombudsman has extensive investigation powers, including hearing or obtaining information from anyone or making any other inquiries as she sees fit; requiring individuals to furnish the Patient Ombudsman with information relating to any matter being investigated and/or produce documents or things in the individual's possession; and the power to summon individuals and examine individuals under oath.

Hospitals are encouraged to consider the Patient Ombudsman's role and powers when determining appropriate retention periods for records related to patient complaints, quality of care, and risk management.

1.2.7 *Connecting Care Act*, 2019 (CCA)

The *Connecting Care Act*, 2019 (CCA) was proclaimed on June 6, 2019. The CCA introduced the authority for Ontario Health to appoint an investigator to investigate and report on the quality of the management of a health service provider (HSP) who receives funding from Ontario Health, quality of the care and treatment of persons by the HSP or any other matter relating to the HSP. An investigator may require a hospital to produce records including books of accounts, documents, bank accounts, vouchers, correspondence, payroll records, records of staff hours and records of personal health information. Hospitals are similarly encouraged to consider these production powers when determining retention periods related to records outlined under the CCA.

2.1 Overview of Guidelines

This updated Toolkit outlines the applicable legislation and major considerations with respect to seven categories of records:

- Corporate Records;
- Financial Records;
- Human Resources/Labour Relations Records;
- Patient Care Records;
- Quality and Risk Management Records;
- Research Records; and
- Transitory Records.

A brief summary of each category of record follows.

2.1.1 Corporate Records

The *Not-For-Profit Corporations Act* (NFPCA) prescribes the rules specific to not-for-profit institutions including hospitals. Unlike the previous *Corporations Act*, the NFPCA outlines in greater detail the records that a corporation must maintain under subsection 92. However, the retention period is only broadly spoken to in subsection 165, as it relates to the disposal of records after the dissolution of a corporation. Similar to the previous framework under the *Corporations Act*, hospitals can expect to maintain the outlined records indefinitely.

The federal *Income Tax Act* (ITA) also requires every registered charity, which includes many hospitals qualify, to keep records and books of account to enable the Minister of Revenue to determine whether there are any grounds for the revocation of its registration under the ITA. The ITA Regulations specify that these requirements include retaining corporate records such as governing documents and meeting minutes of the directors/executive and members. The recommended retention period for corporate documents set out below should exceed these requirements.

2.1.2 Financial Records

Unlike the *Corporation Act*, the NFPCA specifies a six (6) year retention period for accounting records.

The CRA requires registered charities and all organizations that are required to pay or collect taxes to retain books and records. However, the CRA does not specify the books and records to be kept. Generally, books and records are necessary to: (a) permit a determination of taxes payable or to be collected, withheld,

or deducted; (b) substantiate the qualification of registered charities; (c) verify charitable donations; and (d) be supported by source documents. Regulations to the *Income Tax Act* specify retention periods for certain records.

There are also record retention requirements under provincial legislation, for example, the *Employer Health Tax Act*. Generally, provincial legislation requires corporations to maintain adequate records to support determination of amounts payable, charged, collected and remitted. In addition, the Ontario Government has also established a general consent for the destruction of books and records held for Ontario tax purposes.

2.1.3 Human Resources Records

Human resources records as canvassed in this Toolkit include not only the standard employee records, but also those relating to employee health and safety and physician applications among others. Relevant retention periods for these kinds of records are outlined in statutes such as the *Employment Insurance Act*, the *Employment Standards Act* and even the *Income Tax Act* (where the employment records are also financial records). Because an employee's file may be comprised of different components each with its own retention period, hospitals may want to adopt a single retention period for employment files as a whole. This will support consistent implementation of retention practices across the organization.

2.1.4 Patient Care Records

Generally, hospitals retain patient care records for diagnosing, treating and caring for the patient or in some cases. In addition, patient records may be used when auditing or reviewing medical, nursing or other care, and for assessing compliance with applicable standards, for example, those set by Accreditation Canada.

There are several pieces of legislation that dictate retention periods for patient care records. For example, Regulation 965 under the *Public Hospitals Act* requires hospitals to retain medical records for a patient as well as notes; charts and other material relating to patient care (see sections 19-21 of the Regulation). This same regulation also contains requirements relating to destruction of patient care records.

Other legislation that applies to patient records includes the *Food and Drugs Act* and the *Controlled Drugs and Substances Act*. As a final note, the retention of patient records should

also take into account the applicable limitation periods to ensure that the hospital has preserved relevant material to defend the hospital, employees and staff in the event of a legal proceeding.

2.1.5 Quality and Risk Management Records

Until FIPPA, to the extent that quality and risk management records existed as a distinct category of hospital record, they were most often understood in the context of the *Quality of Care Information Protection Act, 2016* (QCIPA). However, FIPPA introduced a broader notion of quality of care records. A "quality of care record" means any record that is generated as part of a quality of care review process and therefore contains information about the quality of patient care. Such a record can be in any paper or electronic format, and the record can include:

- "quality of care information" (as that term is defined in the QCIPA) that is collected by, or prepared for, a quality of care committee under the Act (this information is not subject to FIPPA); and/or
- information from **other** quality of care reviews generated as part of any other quality of care initiative within a hospital.

"Quality of care records" encompasses all records that are generated as part of a hospital's quality reviews, which means that there may be overlap with other kinds of records discussed in this Toolkit, most especially Patient Care Records. Quality of care records may also include incident reports, interview notes, critical incident review summaries, risk management reports and hospital policies.

To date, there are no mandated retention periods for this category of records. However, as noted previously, quality records are almost always mixed records that contain personal information, personal health information as well as other kinds of information for which legislated retention periods have been specified.

Where that is the case, hospitals trying to determine the appropriate retention period for the mixed record may want to consider the primary function and content of the record and apply the relevant retention standards. In other words, it is the content of the record, not the form that should dictate the appropriate retention period, pursuant to the hospitals retention policies and legislation.

Otherwise, retention recommendations outlined in this Toolkit reflect reasonable practice given the quality and patient safety purpose of these records.

2.1.6 Research Records

Research records encompass a potentially broad array of information that relates to systematic investigation in a number of different scientific areas. For hospitals, these kinds of records may arise in the course of hospital teaching and research activities. It is important that hospitals understand the broadened scope of what might potentially constitute such records and modify their retention policies to suit.

2.1.7 Transitory Records

A “Transitory Record” is a record that has no ongoing operational information, evidential or historical value and includes notes, working papers and drafts, as well as convenience or duplicate copies of material – paper or electronic.

Some common examples of Transitory Records include:

- emails sent solely to schedule a meeting;
- routine announcements;
- posters or emails around internal events;
- duplicate copies;
- comments on draft documents and rough notes or calculations; and
- draft copies of a document retained after a final document is agreed upon.

In most instances, Transitory Records need not be retained after the task or event to which they relate has concluded.



3.1 Table of Records

 Where any of the records discussed below are subject to a FOI or PHIPA request, risk of potential litigation or notice of possible legal action, audit, inquest, investigation or proceeding, the recommended retention period is suspended for at least until such time as the action is completed.

3.1.1 Corporate Records

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
CORPORATE DOCUMENTS						
C1	Documents of Incorporation	Indefinitely	<i>Not-for-Profit Corporations Act</i> , s. 92	Life of hospital plus five (5) years	Subsection 165(2)) of the <i>Not-for-Profit Corporations Act</i> , provides that after the expiration of five (5) years after the date of the dissolution of the corporation, no responsibility rests on it or the liquidator, or anyone to whom the custody of the documents and records has been committed, by reason that the documents or records or any of them are not forthcoming to any person claiming to be interested in them.	May be of enduring interest
C2	Corporate By-laws and Special Resolutions	Indefinitely	<i>Not-for-Profit Corporations Act</i> , s. 92	Life of hospital plus five (5) years	Subsection 165(2)) of the <i>Not-for-Profit Corporations Act</i> (See rationale under C1 “Documents of incorporation”)	May be of enduring interest
C3	Register of Members	Indefinitely	<i>Not-for-Profit Corporations Act</i> , s. 92	Life of the hospital plus five (5) years	Subsection 165(2)) of the <i>Not-for-Profit Corporations Act</i> (See rationale under C1 “Documents of incorporation”)	May be of enduring interest

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
C4	Register of Directors	Indefinitely	<i>Not-for-Profit Corporations Act</i> , s. 92	Life of hospital plus five (5) years	Subsection 165(2)) of the <i>Not-for-Profit Corporations Act</i> (See rationale under C1 “Documents of incorporation”)	May be of enduring interest
C5	Notices under the <i>Corporations Information Act</i>	Life of the hospital	<i>Corporations Information Act</i> , s.5(2)	Life of the hospital	Statutory requirement	Subsection 5(2) of the <i>Corporations Information Act</i> requires a corporation to maintain a record of the information set out in notices and returns it has filed under this Act
C6	Board-Appointed Professional Staff By-laws	Indefinitely	<i>Not-for-Profit Corporations Act</i> , s. 92	Life of the hospital plus five (5) years	Subsection 165(2)) of the <i>Not-for-Profit Corporations Act</i> (See rationale under C1 “Documents of incorporation”)	May be of enduring interest
C7	Hospital Policies	n/a	n/a	Lesser of fifteen (15) years from when the policy is no longer in use or life of hospital plus five (5) years Clinical policies related to birth and babies: 33 years (calculated by 18 years to adulthood plus 15 years for the maximum limitation period)	Subsection 165(2)) of the <i>Not-for-Profit Corporations Act</i> (See rationale under C1 “Documents of incorporation”) <i>Limitations Act</i> , s. 4 and s. 15	May be of enduring interest Some hospitals may consider a shorter period (e.g., five (5) years) from when the policy is no longer in use if the fifteen (15) year period is too burdensome, provided they follow a consistent practice concerning retention

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
C8	Register of interests in real property, including any deeds, transfers or similar documents.	Indefinitely	<i>Not-for-Profit Corporations Act</i> , s. 92	Life of the hospital plus five (5) years	Subsection 92.1 of the <i>Not-for-Profit Corporations Act</i> (See rationale under C1 “Documents of incorporation”)	This requirement was added as a result of the 2016 provincial Budget and existing corporations, including hospitals, have until December 10, 2018 to comply with the new requirements.
MINUTES						
C9	Minutes of the Board and Executive Committee	Indefinitely	<i>Not-for-Profit Corporations Act</i> , s. 92	Life of hospital plus five (5) years	Subsection 165(2)) of the <i>Not-for-Profit Corporations Act</i> Income Tax Act Regulations subsection 5800(1)(d). (See rationale under C1 “Documents of incorporation”)	May be of enduring interest
C10	Minutes of Members’ Meetings (including Committees of Members)	Indefinitely	<i>Not-for-Profit Corporations Act</i> , s. 92	Life of hospital plus five (5) years	Subsection 165(2)) of the <i>Not-for-Profit Corporations Act</i> (See rationale under C1 “Documents of incorporation”)	May be of enduring interest
C11	Minutes of Standing Committees of the Board (not including Executive Committee)	Indefinitely	<i>Not-for-Profit Corporations Act</i> , s. 92	Life of hospital plus five (5) years	See comments Subsection 165(2)) of the <i>Not-for-Profit Corporations Act</i>	May be of enduring interest Section 5800(1)(d) of the regulations under the <i>Income Tax Act (Canada)</i> requires registered charities to retain minutes of meetings of the “executive” of a registered charity until two years after the date on which the registration of the registered charity is revoked. The term “executive” is undefined.

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
						<p>A conservative approach would be to retain Standing Committees Minutes for the same period as Board and Executive Committee minutes. Hospitals could adopt a shorter retention period for Standing Committee minutes by interpreting the term “Executive” to refer to the Board and Executive Committee only</p> <p>If committee minutes are referred to in board minutes, hospitals should retain the committee minutes with the Board minutes</p> <p>From a practical and risk management perspective, it is prudent for hospitals to retain minutes of Standing Committee meetings for a considerable period (e.g., fifteen (15) years or more), if not indefinitely, although the retention period may vary depending on the mandate of the committee</p> <p>It is worthwhile noting that business corporations incorporated under the Business Corporations Act are required by that Act to retain records containing meets of any committee of directors for at least the life of the corporation</p>
C12	Minutes of Meetings of Senior Management	n/a	n/a	3 years	See comments	Such minutes are often useful for Accreditation purposes

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
C13	Minutes of Other Committees	n/a	n/a	3 years	See comments	Such minutes are often useful for Accreditation purposes
OTHER						
C14	Executive Correspondence	n/a	n/a	<p>Transitory Records: delete once they have served their short-term purpose</p> <p>Non-Transitory Records: Date of correspondence plus minimum two (2) years up to fifteen (15) years or life of the hospital (see comments)</p>	Reasonable practice/ <i>Limitations Act</i> , s. 4 and s. 15	<p>Most emails are Transitory Records. An email that is not a Transitory Record should be retained according to the hospital's retention policy as indicated by the e-mail's content</p> <p>Generally, the subject matter or documents to which the correspondence refers will dictate the retention period. Thus, entries in these guidelines may be used as the basis for establishing a retention period for different categories of correspondence. May be of enduring interest</p>
C15	General Corporate Correspondence (including email)	n/a	n/a	<p>Transitory Records: delete once they have served their short-term purpose</p> <p>Non-Transitory Records: Date of correspondence plus minimum two (2) years to fifteen (15) years or life of hospital (see comments)</p>	Reasonable practice/ <i>Limitations Act</i> , s. 4 and s. 15	Comments for C14 (Executive Correspondence) apply

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
C16	Position Papers, Briefs, Key Speeches or Presentations, Media Consent Forms and Media Releases	n/a	n/a	Two (2) years to fifteen (15) years (see comments)	Reasonable practice/ <i>Limitations Act</i> , s. 4 and s. 15	Comments for C14 (Executive Correspondence) apply
C17	Record subject to a freedom of information request, privacy complaint, or appeal to the IPC	n/a	n/a	Current year plus five (5) years after the appeal period and judicial review period have expired	Reasonable practice, consistent with the Ontario Public Service requirements	<p>Hospitals should retain these records until a decision has been conveyed to the requester, and any appeals (or timelines for appeal) have been exhausted</p> <p>The Ontario Public Service retention period for freedom of information case files is “current calendar year” plus five years after the appeal period and judicial review period have expired</p> <p>The requirement is subject to any other further retention period required by law</p>
C18	Personal Information	One (1) year after last use	<i>Freedom of Information and Protection of Privacy Act</i> , s. 40. <i>Freedom of Information and Protection of Privacy Act</i> , Regulation 460, s. 5	At least one (1) year after last use	Statutory requirement	<p>Hospitals shall retain personal information for at least one year after use unless the individual to whom the information relates consents to its earlier disposal</p> <p>The minimum period of retention of personal information that is contained in a “telecommunication logger tape” in the custody or under the control of the institution is 45 days</p>

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
						Hospitals may consider retaining personal information for a longer period, provided that the information is still necessary for the purposes for which it was obtained and collected or for any other further retention period required by law.
C19	Procurement Documentation	Current year plus seven (7) years	<i>Broader Public Sector Procurement Directive, s. 7.2.23</i>	Current year plus seven (7) years	Statutory requirement	<p>For reporting and auditing purposes, hospitals are required to retain all procurement documentation, as well as other pertinent information. Hospitals are required to have a written policy for handling, storing and maintaining the supplier's confidential and commercially sensitive information</p> <p>Section 10.3.6 of the "Broader Public Sector Procurement Directive Implementation Guideline" sets out the types of documents to be retained</p>
C20	Commercial Agreements	n/a	n/a	<p>Life of the agreement plus minimum two (2) years</p> <p>Or where real property is concerned: Life of the agreement or ownership plus 10 (10)years</p>	<i>Limitations Act, s. 4 and s. 15; Real Property Limitations Act</i>	<p>Care should be taken to retain agreements with specific provisions (e.g., confidentiality and indemnity) that survive termination of the contract</p> <p>Agreements involving patient care should be kept for a longer period (i.e., between two (2) and fifteen (15) years from expiry/termination)</p>

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
C21	Litigation Files	n/a	n/a	Minimum of when the court action is finally disposed	Law Society of Upper Canada, "Guide to Retention and Destruction of Closed Client Files"	<p>Final disposition means that the matter is resolved by way of settlement or judgement and all applicable appeal periods are exhausted</p> <p>Some hospitals prefer to retain litigation files for a longer period</p>
C22	Insurance Policies	n/a	n/a	Variable, depending on policy	Reasonable practice/ <i>Limitations Act, s. 15</i>	<p>Some policies operate on a "claimsmade" basis, in which case the policy need be retained for only a limited period following termination</p> <p>Other policies operate on a "claimsincurred" basis, in which case the policy should be retained for the life of the hospital or minimum fifteen (15) years following expiry/ termination of the policy. Fire insurance policies can be kept for one (1) year following expiry/termination</p>
C23	Fire Safety Tests and Inspections	Test or inspection date plus two (2) years	<i>Fire Code</i> under the <i>Fire Protection and Prevention Act</i> , ss. 2.8.1.1, 2.8.2.1 and 9.4.1,	Test or inspection date plus two (2) years	Statutory requirement	<p>The retention period applies to written tests and corrective measures relating to the following:</p> <p>(a) fire safety plan; (b) portable fire extinguisher maintenance testing; (c) sprinkler system inspections; (d) emergency power system inspections; and (e) maintenance and testing of special extinguishing systems (f) fire alarm systems (g) any approved alternative solution to the Code</p>

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
						In addition, records for the required annual drill should be kept for one (1) year following the drill
C24	Elevator Log Book	Date of last entry plus minimum five (5) years	<i>Elevating Devices Regulation</i> under the <i>Technical Standards and Safety Act, s. 34</i>	Date of last entry plus minimum five (5) years	Statutory requirement	n/a
C25	Engineering Drawings, Blueprints	n/a	n/a	Life of the subject matter of the records plus fifteen (15) years.	<i>Limitations Act, s. 15</i>	May be of enduring interest
C26	Hospital Annual Report	n/a	n/a	Five (5) years	See comments	These documents may have historical value as comprehensive documentation of the corporate past including organizational initiatives, financials, strategic goals and corporate officers
C27	Accreditation Materials (including preparation, report and addendum, survey recommendations)	n/a	n/a	Year of accreditation cycle plus ten (10) years	See comments	These records may have value as a tool against which hospitals can measure progress on identified issues from Accreditation cycle to cycle

3.1.2 Financial Records

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
F1	Books of Account and Accounting Records relating to all financial and other transactions (including general ledger or other book of final entry)	Indefinitely	<p><i>Income Tax Act</i>, RSC 1985 s. 230</p> <p><i>Income Tax Act Regulations</i>, s. 5800</p> <p><i>Not-for-Profit Corporations Act</i>, s. 92</p>	Life of hospital plus five (5) years	<p>Subsection 165(2) of the <i>Not-for-Profit Corporations Act</i></p> <p>(See rationale under C1 “Documents of incorporation”)</p> <p><i>Connecting Care Act</i>, 2019, s. 26(9)</p>	<p>For general ledger or other book of final entry, section 230 and Regulation 5800 of the <i>Income Tax Act</i> stipulates a retention period of the life of the hospital plus two (2) years. Therefore hospitals should review their accounting records to best determine which retention period most appropriately applies</p> <p>Subsection 92(3) of the <i>Not-for-Profit Corporations Act</i> provides for the retention of all accounting records should be six years subject to any other Act or rule of a taxing authority that requires a longer retention period</p> <p>Note: the <i>Connecting Care Act</i>, 2019, authorizes Ontario Health to appoint an investigator to investigate and report on the quality of the management of a health service provider (HSP), quality of the care and treatment of persons by a HSP or any other matter relating to a HSP. Among the records that an investigator may require, include books of account.</p>

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
F2	Special Contracts or Agreements necessary to understanding general ledger entries	Life of hospital plus two (2) years	<i>Income Tax Act</i> , RSC 1985 s. 230 <i>Income Tax Act Regulations</i> , s. 5800	Life of hospital plus two (2) years	Statutory requirement	n/a
F3	Source Documents (i.e., records integral to the creation of financial statements and tax returns)	Six (6) years from end of tax year (fiscal period) to which they relate	<i>Income Tax Act</i> , RSC 1985 s. 230 <i>Income Tax Act Regulations</i> , s. 5800	Six (6) years from end of tax year (fiscal period) to which they relate	Statutory requirement	<p>This requirement applies to financial books and records not subject to the ‘life of hospital plus two (2) years’ rule or other specified retention periods</p> <p>Examples include: receipts, invoices, vouchers, cheques, banking information, correspondence, tax slips, tax returns and tax work sheets</p> <p>The category includes annual financial statements (and registered charity information returns), which may be of enduring interest</p> <p>Fixed asset vouchers should be kept for the life of the asset or the six (6) year period, whichever is longer</p>
F4	Duplicates of Charitable Donation Receipts (other than 10-year gifts) (see F5)	Two (2) years from end of calendar year to which they relate	<i>Income Tax Act</i> , RSC 1985 s. 230 <i>Income Tax Act Regulations</i> , s. 5800	Two (2) years from end of calendar year to which they relate	Statutory requirement	

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
F5	Donation Records (10-year gifts)	Two (2) years after revocation of charitable registration	<i>Income Tax Act</i> , RSC 1985 s. 230 <i>Income Tax Act Regulations</i> , s. 5800	Two (2) years after revocation of charitable registration	Statutory requirement	This applies to any donations subject to a donor direction that the property given be held for a period of not less than 10 years
F6	Records supporting HST/GST rebate or refund	Six (6) years from end of calendar year in which record was made	<i>Excise Tax Act</i> , s. 286	Six (6) years from end of the year to which the record relates	Statutory requirement	This requirement applies to records relating to the determination of entitlement to a rebate or refund of HST/GST
F7	Employer Health Tax Records (including source documents)	n/a	n/a	At least seven (7) years	<i>Employer Health Tax Act</i> , s. 12 Ontario Ministry of Finance Tax Information Bulletin	The Ministry of Finance's Tax Information Bulletin, <i>Retention/ Destruction of Books and Records</i> outlines several conditions that, if met, permit the destruction of certain records. One of those conditions is that the records must relate to the fiscal year that ended more than seven (7) years before the year of proposed destruction Before destroying records, hospitals should review these conditions in more detail to ensure that meet all the requirements
F8	Retail Sales Tax Records (including source documents)	n/a	n/a	At least seven (7) years	<i>Retail Sales Tax Act</i> , s. 16 Ontario Ministry of Finance Tax Information Bulletin	See comments for line F7 above Generally, the <i>Retail Sales Tax Act</i> does not apply for transactions on or after July 1, 2010

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
F9	OHIP Records	Indefinitely	<i>Health Insurance Act</i> , s 17.4	Date of record plus minimum ten (10) years	Consistent with retention period for patient care records	The <i>Health Insurance Act</i> requires hospitals to maintain records “as may be necessary” to establish that it provided an insured service, to verify it provided the service, and that the service was medically and/or therapeutically necessary
F10	Other Financial Records relating to patient care	n/a	n/a	Generally, current year plus minimum two (2) years	<i>Limitations Act</i> , s. 4 and s. 15	The hospital should set the retention period for other financial records on the likelihood of the hospital or a third party requiring access to the documents, whether for litigation or other purposes Examples of records which the hospital may want to retain include patient census and charge slips
F11	Payroll Documents (time sheets, payroll register, deduction register)	Six (6) years from the end of the last tax year to which they relate	<i>Income Tax Act</i> , RSC 1985 s. 230 <i>Income Tax Act Regulations</i> , s. 5800	Six (6) years from the end of the last tax year to which they relate	Statutory requirement CRA Guidance Document, <i>Keeping Records</i> , RC4409(E) Rev. 11	<i>Income Tax Act</i> retention periods apply because the records are integral to the creation of financial statements and tax returns to these records

3.1.3 Human Resources Records

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
HR1	Payment Records and Books of Account	Six (6) years following the year for which they are kept	<i>Employment Insurance Act (Canada), ss. 87(3)</i>	Six (6) years following the year in which the record was made	Statutory requirement <i>Connecting Care Act, 2019, s. 26(9)</i>	<p>Records must contain information, including the social insurance number relating to each employee to allow determination of premiums payable under the Act, or any premiums that should have been deducted or paid. Accounts and vouchers necessary to verify the information in the records must also be kept</p> <p>Note: the <i>Connecting Care Act, 2019</i>, authorizes Ontario Health to appoint an investigator to investigate and report on the quality of the management of a health service provider (HSP), quality of the care and treatment of persons by a HSP or any other matter relating to a HSP. Among the records that an investigator may require, include payroll records and records of staff hours worked.</p>
HR2	Canada Pension Plan Contributions	Six (6) years following the year for which they are kept	<i>Canada Pension Plan (Canada), ss. 24(2)</i>	Six (6) years from the end of the year in which the record was made	Statutory requirement	<p>Applies to records and books of account necessary to ascertain the Canada Pension Plan contributions that were or should have been made or other amounts that should have been deducted or paid. Accounts and vouchers necessary to verify the information in the records must also be kept</p> <p>Note: The <i>Ontario Pension Benefits Act</i> also imposes recordkeeping requirements on plan administrators. Most hospitals</p>

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
						are in HOOPP and therefore do not administer a pension plan, but there are a few exceptions.
HR3	Employee Records	Three (3) years after creation date	<i>Employment Standards Act, s. 15</i>	Three (3) years after the date to which the record relates	Statutory requirement <i>Connecting Care Act, 2019, s. 26(9)</i> (See comments in HR1)	Records to which this period applies include: pregnancy, parental, emergency and family leave information; wage statements; vacation (time and pay) statements; excess hours agreements; overtime averaging agreements; and hours worked (or excess hours worked, if the employee is salaried and not exempt from overtime pay)
HR4	Employee Information	Three (3) years after employee's departure	<i>Employment Standards Act, s. 15</i>	Three (3) years after employee's departure	Statutory requirement	This period applies to the following employee information: name, address, date of birth (if the employee is a student and under the age of 18), and start date of employment
HR5	Temporary Help Agency Employee Information	Three (3) years after the day or week to which the information relates	<i>Employment Standards Act, s. 74.4.2</i>	Three (3) years after the day or week in which a temporary help agency employee works in a hospital	Statutory requirement	A hospital who is a client of a temporary help agency is required to record the number of hours worked by each assignment employee assigned to perform work for the hospital for each day and each week.
HR6	Hiring and Interview notes	n/a	n/a	At least one (1) year after date of hire	Ontario Human Rights Commission recommendation	
HR7	Miscellaneous Employment Records and documents	n/a	n/a	Creation date plus minimum two (2) years	Reasonable practice	Examples of records and documents include: employment offer letters and contracts; performance reviews and discipline notices; information regarding raises, promotions and transfers; job descriptions; and employee complaints, responses and investigation notes

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
HR8	Human Resource Records that are Financial Records	Six (6) years from end of tax year (fiscal period) to which they relate	<i>Income Tax Act</i> , RSC 1985 s. 230 <i>Income Tax Act Regulations</i> , s. 5800	Six (6) years from end of tax year (fiscal period) to which they relate	Statutory requirement <i>Connecting Care Act</i> , 2019, s. 26(9) (See comments in HR1)	<i>Income Tax Act</i> retention periods apply because the records are integral to the creation of financial statements and tax returns to these records. These records include payroll records, cancelled pay cheques, exemption forms, HOOPP records, and T-4 forms and other taxation records (See table relating to financial records)
HR9	Physician Applications (rejected)	n/a	n/a	Two (2) years	<i>Limitations Act</i> , s. 4	If the application results in an appointment, the application constitutes part of the appointment record
HR10	Physician Appointment Records	n/a	n/a	End of appointment year plus six (6) years	Reasonable practice/ <i>Limitations Act</i> , s. 4 and s. 15	Physicians' appointments are generally made from yeartoyear. Except for incidents involving patient care or disciplinary consideration or action, the issues most likely to arise in respect of an appointment are the terms of the appointment, which involve primarily contractual issues, in respect of which two (2) years would be an appropriate retention period Incidents or disciplinary considerations that could have some relevance to a legal proceeding, inquiry or investigation (especially relating to patient care) should be retained longer, given the ultimate limitation period of fifteen (15) years under the <i>Limitations Act</i>

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
						<p>The seven (7) year recommendation is a balance between these considerations. Hospitals may wish to use it as the basis for a single retention period for appointment records. The hospital should consider extending this record retention standard to all board-appointed professional staff in the hospital so as to ensure consistency. See Chapter 11 of the OHA <i>Credentialing Toolkit</i> for more information</p>
HR11	Workplace Accident/ Incident Investigation Records	n/a	n/a	Creation year plus minimum six (6) years	Reasonable practice	<p>Under the <i>Workplace Safety and Insurance Act</i>, documents would include accident records, medical information, and correspondence with the Workplace Safety and Insurance Board (WSIB)</p> <p>Under the Act, a worker must file a claim within six (6) months after an accident or six (6) months after the worker learns he or she suffers from a disease</p> <p>The recommendation reflects considerations relating to latent or continuing conditions. This includes a worker, whether covered under the Act or not, who may not ‘discover’ the effects of an incident for several years</p>
HR12	Records relating to Workplace Harassment/Violence	n/a	n/a	Creation year plus minimum two (2) years	Reasonable practice	<p>May be of enduring interest</p> <p>The <i>Occupational Health and Safety Act</i> requires employers to institute proactive policies, programs and processes to mitigate the risk of workplace violence</p>

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
HR13	Minutes of Joint Health and Safety Committee	None specified	<i>Occupational Health and Safety Act, s. 9(22)</i>	Current year plus minimum six (6) years	Reasonable practice/ <i>Limitations Act, s. 4 and s. 15</i>	Because latent and continuing conditions may give rise to future liability, the recommendation covers the two (2) year limitation period under the <i>Limitations Act</i> and the recommended period for accident documents (see line HR 11). A more conservative period would be fifteen (15) years to reflect the ultimate limitation period under the <i>Limitations Act</i>
HR14	Material Safety Data Sheet	None specified	<i>Occupational Health and Safety Act, s. 37</i>	Date of expiry plus minimum two (2) years	<i>Limitations Act, s. 4 and s. 15</i>	Under the Act, a material safety data sheet expires three (3) years after its publication. Hospitals should consider longer retention periods for records that may involve latent or continuing conditions or issues, for example, environmental activity or exposures
HR15	X-ray worker	List of all x-ray workers: permanent Personal dosimeter records: 3 years	<i>Occupational Health and Safety Act, X-Ray Safety Regulation, s. 9 and 12.</i>	List of all x-ray workers: permanent Personal dosimeter records: 3 years	<i>Occupational Health and Safety Act, X-Ray Safety Regulation, s. 9 and 12.</i>	n/a
HR16	Occupational Health and Safety Records	None specified	<i>Occupational Health and Safety Act, s. 26</i>	Current year plus minimum six (6) years	Reasonable practice/ <i>Limitations Act, s. 4 and s. 15</i>	These would include records relating to storage, use and disposal of biological agents and records relating to worker exposure to chemical or biological agents Hospitals should consider a longer retention period for records that could be relevant for a legal claim or proceeding,

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
						<p>especially records that may involve latent or continuing conditions or issues, for example, environmental activity or exposures</p> <p>(Comments for line HR 13 apply)</p>
HR17	Notice of accidents and records relating to confined spaces, lifting or self-propelled mobile equipment, autoclave/sterilization machinery, and lifting equipment	One (1) year or such longer period as necessary to ensure that the two most recent reports or records are on file	<i>Occupational Health and Safety Act and Health Care and Residential Facilities Regulation, s. 4</i>	One (1) year or such longer period as necessary to ensure that the two most recent reports or records are on file	Statutory requirement	<p>Records of tests of lifting equipment should be kept for as long as equipment remains on premises and for one (1) year after the equipment is removed</p>
HR18	Occupational Health and Safety Awareness Training Records	Six (6) months	<i>Occupational Health and Safety Act and Occupational Health and Safety Awareness And Training Regulation (O. Reg. 297/13), s. 4</i>	End of employment year plus six (6) years	Reasonable practice/ <i>Limitations Act, s. 4 and s. 15</i>	<p>Employers must provide a worker or supervisor with written proof of completion or exemption, if a request is made within six (6) months of the worker or supervisor no longer performing work for the employer. As such, employers must keep the record of training for at least six (6) months after a worker or supervisor stops working for him or her to be in a position to comply with this requirement.</p> <p>Hospitals should consider a longer retention period for records that could be relevant for a legal claim or proceeding</p> <p>(Comments for line HR 13 apply)</p>

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
HR19	Security and Investigations (including notes, and reports, photographs, videos, and use of force reports)	2 years	<i>Private Security and Investigative Services Act and Recordkeeping Requirements for Licensed Business Entities Regulation, s. 1(2)</i>	Current year plus two (2) years, or until the conclusion of an ongoing matter	See comments	The retention period of two (2) years applies to all licensees that are business entities under the legislation. While this requirement doesn't directly apply to hospitals, hospitals, as registered employers under the Act should consider a retention period that is consistent with this legislative requirement
HR20	Documents relating to Diversity and Human Rights claims	n/a	n/a	Year of record plus minimum two (2) years	Reasonable practice/ <i>Limitations Act, s. 4 and s. 15</i>	Hospitals should consider up to a fifteen (15) year period where a legal claim or proceeding may arise

3.1.4 Patient Care Records

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
REGISTERS						
P1	Patient Register - In-Patient - Out-Patient - Emergency - Operating Room	n/a	n/a	Fifty (50) years	The patient register may be considered to form part of the medical records of in-patients or out-patients and should be retained for a period that is the latest retention period that could arise in respect of the medical records of each patient named in the register.	Regulation 965 under the <i>Public Hospitals Act</i> does not expressly require the retention of the patient register for a specified period Twenty-five (25) years would be the minimum retention period, which encompasses the retention period for medical records plus the ultimate limitations period under the <i>Limitations Act</i> Fifty (50) years represents a practical and conservative retention period
P2	Patient Records (medical record, notes, charts and other material), including slides made for microscopic examination from tissue removed from a patient on which a report has been made, other than normal blood smears. Medical Records and other notes, charts and other material relating to patient care are all “records of personal health information” and are subject to the same year retention period.					
A	Adult in-patient (18 years and older)	Minimum ten (10) years after discharge or death	<i>Public Hospitals Act</i> , Regulation 965, clause 20(3)(a)	Minimum ten (10) years after discharge or death	Statutory requirement	When setting the retention period, hospitals should consider the ultimate limitation period of fifteen (15) years under the <i>Limitations Act</i>
B	Adult out-patient (18 years and older)	Minimum ten (10) years after last visit or death	<i>Public Hospitals Act</i> , Regulation 965, clause 20(3)(b)	Minimum ten (10) years after last visit or death	Statutory requirement	See comments for line P2A above The medical record of an outpatient who visits a hospital solely for diagnostic procedures need only include the orders for the procedures, any consent to the procedures obtained in writing, and a record of the procedures

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
C	Patient less than 18 (in-patient or out-patient)	Minimum ten (10) years after patient's 18 th birthday	<i>Public Hospitals Act</i> , Regulation 965, clauses 20(3)(c) and (d)	Minimum ten (10) years after patient's 18 th birthday	Statutory requirement	See comments for line P2A above See comment above relating to medical records of out-patients
P3	Diagnostic imaging records - A hospital is not required to retain a videotape of a diagnostic imaging examination text unless the videotape constitutes the only diagnostic test imaging record of the examination or test.					
A	Adult (18 years and older)	Minimum five (5) years after the creation of the record Minimum ten (10) years for breast examination	<i>Public Hospitals Act</i> , Regulation 965, clauses 20(4)(a) and 20(5)(a)	Minimum five (5) years after the creation of the record Minimum ten (10) years for breast examination	Statutory requirement	See comments for line P2A above
B	Patient less than 18	Minimum five (5) years after patient's 18 th birthday Minimum ten (10) years for breast examination	<i>Public Hospitals Act</i> , Regulation 965, clauses 20(4)(b) and 20(5)(b)	Minimum five (5) years after patient's 18 th birthday Minimum ten (10) years for breast examination	Statutory requirement	See comments for line P2A above
P4	Minutes of committees relating to patient care (other than Standing Committees of the Board)	n/a	n/a	Year of record plus minimum two (2) years	Reasonable practice/ <i>Limitations Act</i> , s. 4 and s. 15	Examples of committees include medical records, patient care, infection control, and utilization committees. Some records may be of enduring value. Hospitals should consider up to a fifteen (15) year period where a legal claim or proceeding may arise

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
P5	Narcotic records, controlled drug records, and out-patient prescriptions	Not less than two (2) years from the creation of the record	<i>Controlled Drugs and Substances Act, Narcotic Control Regulations, s. 63(b)</i> <i>Food and Drugs Act, Food and Drug Regulations, G.05.001(2)(c)</i>	Year of record plus minimum (2) years*	<i>Limitations Act, s. 4 and s. 15</i>	The retention period recommended is based on the assumption that the hospital will retain a copy of the records as they relate to patient care in the medical record. If not, or in the event that the pharmacist or pharmacy personnel makes notations on the record, the narcotic record will be a new patient care record and should be retained for the appropriate period (see line P2 above) * Hospitals should consider up to a fifteen (15) year period where a legal claim or proceeding may arise
P6	Hospital Pharmacy Records related to patient care	Minimum 10 years from the last recorded pharmacy service provided to the patient for patients over the age of 18 years. Minimum 10 years after the day on which the patient reached or would have reached the age of 18 years for patients under the age of 18 years	<i>Drug and Pharmacies Regulation Act and General Regulation (O. Reg. 264/16), ss. 20, 21.</i>	Minimum 10 years from the last recorded pharmacy service provided to the patient for patients over the age of 18 years Minimum 10 years after the day on which the patient reached or would have reached the age of 18 years for patients under the age of 18 years	Statutory Requirement	The Ontario College of Pharmacists (OCP) has regulatory oversight of pharmacists and hospital pharmacies. Hospital pharmacies have specific record-keeping requirements pursuant OCP standards, relating to purchase, sale, acquisition, and movement of drugs. Pursuant to the <i>General Regulation under the Drug and Pharmacies Regulation Act</i>, pharmacy records relating to patient care must be kept for timeframes consistent with <i>Public Hospitals Act</i> requirements (see P2 above)

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
P7	Copy of physicians' orders	n/a	n/a	Year of record plus minimum (2) years*	<i>Limitations Act</i> , s. 4 and s. 15	<p>The retention period recommended is based on the assumption that the hospital will retain a copy of the orders as they relate to patient care in the medical record. If not, the order will be a new patient care record and should be retained for the appropriate period (see lines P2 and P3 above)</p> <p>* Hospitals should consider up to a fifteen (15) year period where a legal claim or proceeding may arise</p>
P8	Records relating to medical device reprocessing and sterilization (including sterilization and disinfection logs, education and training materials, hospital policies, contracts with external third parties, and mechanical printout records)	n/a	n/a	Variable, depending on record	Accreditation Canada CSA Standards: CSA-Z314.3-09 and CSA-Z314.8-08	<p>The CSA and Accreditation Canada have outlined comprehensive standards for the proper sterilization and disinfection of medical devices including record retention. According to the standards, some records, like those relating to disinfection/sterilization processes and endoscopy use linked to patient, must be kept permanently. Others, according to the hospital's retention policies</p> <p>Hospitals should consider up to a fifteen (15) year period where a legal claim or proceeding may arise</p> <p>Lastly, the reprocessing of medical devices is unregulated in Canada. Therefore, where hospitals internally or externally reprocess medical devices, these organizations should retain the appropriate records that reflect their due diligence efforts</p>

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Statute or Regulation	
P9	Destruction of Health Records (Certificate of Destruction and Destruction Log)	n/a	n/a	Variable (depends on hospital by-laws)	<i>Public Hospitals Act, Regulation 965, ss. 21(3)</i>	<p>Regulation 965 states that these records should be kept in accordance with hospital by-laws</p> <p>Given that these historical records may be of enduring interest to patients or patients' families, reasonable practice may be life of the hospital plus five (5) years</p> <p>The OHA Prototype Corporate By-law provide a twenty-five (25) year retention period for the statement</p>

Patient records and legal proceedings:

Where patient records are subject or relevant to litigation, the hospital should retain all relevant patient records at least until the matter is finally resolved by way of settlement or judgement and all applicable appeal periods are exhausted. If there is an investigation, inspection, inquest or other proceeding under the Regulated Health Professions Act, Health Insurance Act, or Coroners Act, the hospital must retain patient records and other records relating to the proceeding until the proceedings are completely at an end. Hospitals must not dispose of patient records if the patient to whom the record relates has made a request for access under the Personal Health Information Protection Act, 2004. The hospital must not dispose of the records until the patient seeking access has exhausted all available recourse under that Act.

Destruction of patient records:

Section 21 of Regulation 965 of the Public Hospitals Act requires the hospital Board of Directors to determine the procedure for the destruction of medical records and notes, charts and other material relating to patient care or photographs of any of them. The regulation requires that the administrator make and authenticate a written statement relating to the destruction of such records. The written statement must include: (a) the names of the patients whose records were destroyed; (b) the date and manner of the destruction; and (c) whether the destruction was consistent with the board procedures. Hospitals must keep this statement for as long as their by-laws require. The OHA Prototype Corporate By-law provides a twenty-five (25) year retention period for the statement.

3.1.5 Quality and Risk Management Records

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Rationale	
Q1	Patient/Visitor Incident Reports	n/a	n/a	Year of record plus minimum two (2) years	Reasonable practice/ <i>Limitations Act</i> , s. 4 and s. 15	Hospitals should consider up to a fifteen (15) year period where a legal claim or proceeding may arise
Q2	Patient/Visitor Complaints and Feedback (including privacy breaches)	n/a	n/a	Year of record plus minimum two (2) years	Reasonable practice/ <i>Limitations Act</i> , s. 4 and s. 15	Hospitals should consider up to a fifteen (15) year period where a legal claim or proceeding may arise
Q3	Quality of Care Reviews, Recommendations and Reports	n/a	n/a	Year of record plus minimum two (2) years	Reasonable practice/ <i>Limitations Act</i> , s. 4 and s. 15	Hospitals should consider up to a fifteen (15) year period where a legal claim or proceeding may arise However, a hospital may opt to retain these kinds of quality of care records for an even longer period given their historical value to the institution
Q4	Patient Satisfaction Survey Results	n/a	n/a	Five (5) years	Reasonable practice	Given that hospitals must survey patients annually under the <i>Excellent Care for All Act</i>; these may have historical value in identifying trends and in tracking the hospital's progress with respect to certain patient satisfaction initiatives
Q5	Employee Satisfaction Survey Results	n/a	n/a	Ten (10) years	Reasonable practice	Given that hospitals must survey employees every two years under the <i>Excellent Care for All Act</i>; these may have historical value in identifying trends and in tracking the hospital's progress with respect to certain to employee initiatives

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Rationale	
Q6	<p>Minutes of Committees related to the improvement of the quality of health care and directly related programs or services (other than Standing Committees of the Board)</p> <p>(This may include any records that contain information provided in confidence to, or records prepared with the expectation of confidentiality by such a committee.)</p>	n/a	n/a	Fifteen (15) years	Reasonable practice/ <i>Limitations Act</i> , s. 4 and s. 15	<p>Hospitals should consider up to a fifteen (15) year period where a legal claim or proceeding may arise</p> <p>Confidential documents should be marked confidential and treated accordingly. Confidential documents should not be widely distributed, left in public areas in the Hospital, or stored or destroyed insecurely</p>

3.1.6 Research Records

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Rationale	
R1	Research Data	Clinical Studies (i.e. registered with Health Canada): completion of study plus 25 years	<i>Food and Drugs Act, Food and Drug Regulations s. C.05.012(4)</i>	Clinical Studies (i.e. registered with Health Canada): completion of study plus 15 years Non-clinical studies: 5 years	Statutory requirement (clinical studies)	Canadian Institute of Health Research (CIHR), Policy on Access to Research Outputs, September 2007; Tri-Agency Financial Administration Guide, Responsibilities and Accountability (Archiving of Research Data – CIHR only)
R2	Investigator’s Brochure, drafts of the brochure and the rationale for each change and documentation supporting that change	Completion of study plus 25 years	<i>Food and Drugs Act, Food and Drug Regulations s. C.05.012(3) & (4)</i>	Completion of study plus 15 years	See also the “International Conference on Harmonization for technical requirements for registration of pharmaceuticals for Human use” Good Clinical Practice, Section 8: Essential Documents for the Conduct of a Clinical Trial	The Regulation cited is only applicable to clinical trials involving drugs; however this standard is recommended for clinical trials involving medical devices as well, since section 81 of the <i>Medical Device Regulations</i> does not suggest a retention period for related records
R3	Records respecting the enrolment of subjects, including their contact information	Completion of study plus 25 years	<i>Food and Drugs Act, Food and Drug Regulations s. C.05.012(3) & (4)</i>	Completion of study plus 15 years	See comments	The Regulation cited is only applicable to clinical trials involving drugs; however this standard is recommended for clinical trials involving medical devices as well, since section 81 of the <i>Medical Device Regulations</i> does not suggest a retention period for related records

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Rationale	
R4	Records respecting the shipment, receipt, disposition, return and destruction of the drug or device	Completion of study plus 25 years	<i>Food and Drugs Act, Food and Drug Regulations s. C.05.012(3) & (4)</i>	Completion of study plus 15 years	See comments	The Regulation cited is only applicable to clinical trials involving drugs; however this standard is recommended for clinical trials involving medical devices as well, since section 81 of the <i>Medical Device Regulations</i> does not suggest a retention period for related records
R5	Records respecting all research-related adverse events inside or outside Canada	Completion of study plus 25 years	<i>Food and Drugs Act, Food and Drug Regulations s. C.05.012(3) & (4)</i>	Completion of study plus 15 years	See comments	The Regulation cited is only applicable to clinical trials involving drugs; however this standard is recommended for clinical trials involving medical devices as well, since section 81 of the <i>Medical Device Regulations</i> does not suggest a retention period for related records
R6	Required undertaking from the investigator	Completion of study plus 25 years	<i>Food and Drugs Act, Food and Drug Regulations s. C.05.012(3) & (4)</i>	Completion of study plus 15 years	See comments	The Regulation cited is only applicable to clinical trials involving drugs; however this standard is recommended for clinical trials involving medical devices as well, since section 81 of the <i>Medical Device Regulations</i> does not suggest a retention period for related records

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Rationale	
R7	Study protocols, consent forms and drafts	Completion of study plus 25 years	<i>Food and Drugs Act, Food and Drug Regulations s. C.05.012(3) & (4)</i>	Completion of study plus 15 years	See comments	The Regulation cited is only applicable to clinical trials involving drugs; however this standard is recommended for clinical trials involving medical devices as well, since section 81 of the <i>Medical Device Regulations</i> does not suggest a retention period for related records.
R8	Research Ethics Board attestation of review and approval	Completion of study plus 25 years	<i>Food and Drugs Act, Food and Drug Regulations s. C.05.012(3) & (4)</i>	Completion of study plus 15 years	See comments	The Regulation cited is only applicable to clinical trials involving drugs; however this standard is recommended for clinical trials involving medical devices as well, since section 81 of the <i>Medical Device Regulations</i> does not suggest a retention period for related records
R9	Research Proposals	n/a	n/a	Seven (7) years	CIHR, Policy on Access to Research Outputs, September 2007; Tri-Agency Financial Administration Guide	Individual journals may require their own retention periods for source material. If the journal's retention period differs enter into the consultation process described in this policy to determine the appropriate retention within the hospital
R10	Research Publications	n/a	n/a	Year of study plus seven (7) years	CIHR, Policy on Access to Research Outputs, September 2007; Tri-Agency Financial Administration Guide	Journals in which research is published may also require that data and other documentation be retained in accordance with their policies

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Rationale	
R11	Financial Records related to research (including successful grant applications)	Year of expiry of the project plus seven (7) years	n/a	Year of expiry of the project plus seven (7) years	Tri - Tri-Agency Financial Administration Guide, Financial Matters	May be required for audit and tax purposes
R12	Agreements and contracts related to research	Year of end of study plus seven (7) years	n/a	Year of expiry of the project plus seven (7) years	Tri - Tri-Agency Financial Administration Guide)	If the contract relates to more than one study or is more generally related to research: the greater of 7 years after all related studies or the life of the contract plus 2 years Where the Agreement relates to commercializable intellectual property apply the retention period for Intellectual Property below
R13	Animal Care Committee records	n/a	n/a	Seven (7) years	See comments	These records are necessary for Canadian Council on Animal Care (CCAC) certification assessment. The CCAC may assess on a 3 year or a 5 year cycle; a 7 year retention period was selected to accommodate both assessment models
R14	Animal Care Facility Operations Records	Two (2) years	<i>Animals for Research Act, Research Facilities and Supply Facilities Regulation, s. 12</i>	Two (2) years from the date that the dog/ cat was last in the facility	Statutory requirement	This requirement applies only to research on dogs and cats, but it is recommended as a standard retention period for research on all animals. The Regulation requires retention of records of <u>all</u> animals for at least one year from the date the animals entered the facility

	RECORD	RETENTION PERIOD				COMMENTS
		Minimum Legal Requirement		Recommended Retention Period		
		Retention Period	Statute or Regulation	Retention Period	Rationale	
R15	Radiation Records	Year of license expiry plus three (3) years	<i>Nuclear Safety and Control Act, General Nuclear Safety and Control Regulations, s. 28</i> <i>Class II Nuclear Facilities and Prescribed Equipment Regulations, s. 21</i>	Year of license expiry plus three (3) years	Statutory requirement	Notice to the Commission is required for the destruction of documents related to the license submission and any reports to the Commission
R16	Conflict of Interest Disclosure Records	n/a	n/a	Year of end of study plus seven (7) years	Reasonable practice, Agency Financial Administration Guide, Reporting and Supporting Evidence,	
R17	Intellectual Property and Commercialization Records	n/a	n/a	End of period of intellectual property protection plus two (2) years	Reasonable practice, <i>Limitations Act, s. 4</i>	Where the intellectual property is sold hospitals should consider retaining the relevant records for two (2) years from date of sale
R18	Research Misconduct Records, investigations and proceedings	n/a	n/a	Year of completion of the inquiry or investigation plus seven (7) years	<i>U.S. Federal Regulations (Public Health Service Policies on Research Misconduct), 42 C.F.R., Part 93, s.93.317(5)(b)</i>	Hospitals should give some consideration to the requirements for these types of records in the United States

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