



Pocatello Free Clinic

Our community. Our health.

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Records Retention and Destruction Policy and Procedure

Purpose

The purpose of this policy is to establish guidelines and protocols for the retention, storage, and destruction of records maintained by the Pocatello Free Clinic (PFC) in order to:

- Comply with federal and Idaho state laws and regulations
- Protect patient confidentiality and privacy
- Support operational, financial, and legal requirements
- Reduce unnecessary storage of outdated records
- Ensure appropriate and secure destruction of records when retention periods expire

Scope

This policy applies to all clinic records, including:

- Patient medical records
- Financial and billing records
- Administrative records
- Personnel records
- Volunteer records
- Electronic records
- Emails and electronic communications
- Paper files

This policy applies to all clinic staff, volunteers, board members, and contractors.

Definitions

- *Record*: Any document, electronic file, or other material that contains information related to clinic operations.
- *Retention Period*: The required length of time a record must be maintained.
- *Secure Destruction*: The process of permanently destroying records so that information cannot be reconstructed or retrieved, regardless of format (paper, email, digital, etc.).
- *Legal Hold*: A suspension of normal destruction procedures when records may be relevant to litigation, investigation, or audit.

Policy

PFC shall retain records only for the period necessary to:

- Comply with applicable laws
- Meet operational needs
- Support patient care
- Protect the clinic from legal risk

Records that have reached the end of their retention period shall be securely destroyed unless they are subject to a legal hold.

All destruction must protect patient privacy and confidentiality in compliance with the Health Insurance Portability and Accountability Act (HIPAA).

Record Retention Schedule

Unless otherwise required by law, the clinic will follow the retention periods below.

Patient Paper Medical Records

Patient medical records are permanently stored on our electronic health record system. At the end of every day, any paperwork with patients' protected health information is placed in a locked shredding console (a locked bin that is emptied by a vendor for shredding) for removal by a secure shredding service.

Financial Records

- Accounting records, ledgers, invoices: seven years
- Tax filings and supporting documentation: seven years

Personnel Records

- Employee files: seven years after termination
- Payroll records: seven years

Volunteer Records

- Volunteer applications and records: five years after service ends

Board and Governance Records

- Board minutes and bylaws: Permanent

Insurance and Incident Reports

- Incident reports and liability records: 10 years

Contracts and Agreements

- 7 years after expiration or termination

Email Communications

- Routine operational emails: 3 years
- Emails related to patient care: retained with medical record

6. Storage and Security

The clinic shall ensure that all records are:

- Stored in secure locations
- Accessible only to authorized personnel
- Protected from unauthorized access, theft, or damage

Security measures may include:

- Locked file cabinets
- Restricted electronic access
- Password protection
- Encryption for electronic medical records

Electronic systems must comply with HIPAA security requirements.

Destruction of Records

When records reach the end of their retention period, they shall be destroyed using secure methods.

Paper Records

- Cross-cut shredding
- Certified document destruction services

Electronic Records

- Secure deletion or wiping of storage devices
- Destruction of physical media when necessary

Destruction must ensure that confidential information cannot be reconstructed or accessed.

Legal Hold

If the clinic becomes aware of:

- Pending litigation
- Government investigation
- Audit
- Legal inquiry

All destruction of relevant records must immediately stop.

The Executive Director or designated compliance officer will issue a “Legal Hold Notice” identifying records that must be preserved.

Responsibilities

Executive Director

- Ensures implementation and oversight of this policy.

Clinical Coordinator/ Compliance Officer

- Maintains retention schedule
- Coordinates record destruction
- Oversees HIPAA compliance

Staff and Volunteers

- Follow retention guidelines
- Protect confidentiality of records
- Report concerns regarding records management

Policy Review

This policy shall be reviewed annually by clinic leadership and updated as necessary to comply with changes in:

- Federal regulations
- Idaho state laws
- Clinic operational needs

Violations

Failure to comply with PFC’s Records Retention and Destruction Policy and Procedure may result in:

- Disciplinary action, including training when appropriate
- Termination of employment or volunteer privileges
- Legal consequences where applicable

This Records Retention and Destruction Policy and Procedure complies with federal requirements as well as Idaho requirements as outlined in relevant codes and statutes. Most recently reviewed and updated: March 2026.