



# PSYCHIATRIC HEALTH FACILITY POLICY AND PROCEDURES

COUNTY OF SANTA BARBARA  
ALCOHOL, DRUG AND MENTAL HEALTH SERVICES

## Section - MEDICAL RECORDS

Effective: 4/6/2011

Policy- STORAGE OF MEDICAL RECORDS #P16

Revised: 4/6/2011

PHF CEO's Approval

Date: 4/6/2011

Executive Medical Staff Chair's Approval

Date: 4/6/2011

Committee Chair's Approval

Date: 4/6/2011

Form Ref.

### POLICY:

It is the policy of the Santa Barbara County Mental Health Plan (SBC MHP) to comply with all relevant federal and state laws and regulations, as well as all contractual requirements, regarding medical records, as well as relevant professional standards and practices.

Specifically, medical records are always stored in such a manner that the privacy and security of the records is maintained per law and regulation, and in keeping with professional standards and practices.

Medical records which are in current use, or which relate to consumers whose admissions have recently been closed but have a reasonable possibility of being re-opened, are stored at program sites. When a program determines that a record no longer needs to be stored at the program site, the record is transferred to the MHP Medical Records program. Eventually, depending on available time and storage capacity, physical records are converted to electronic format and the physical records are destroyed by shredding.

All inactive medical records created after 1995 have been or will be converted to electronic format for permanent archiving. Such electronic records will be secured against loss, defacement, tampering or use by unauthorized persons, and will be available on a read-only basis to authorized users of the Clinician's Gateway electronic health record system.

### PROCEDURE:

#### A. Consumers With an Open Admission to a Program

1. The physical record of a consumer with an open admission to a specific program will be stored at the program site.
2. During business hours for the program, such records must be stored either:
  - a. Under the direct control and supervision of one or more program staff.
  - b. In a locked room, or in a locked container which is not easily portable.

- i. Storage in a an easily portable container (e.g., portable file box, carrying case, or briefcase) does not provide sufficient security. Additional security must be provided.
3. Outside business hours for the program, such records must be stored in a locked drawer or cabinet, which must be in a locked room.
  - a. Program administrators are responsible for determining which staff shall have access to rooms, drawers, and cabinets in which physical medical records are stored.

**B. Consumers With No Open Admission to a Program**

1. The administrator responsible for each program, in consultation with Medical Records staff and in compliance with regulatory and contractual requirements, will determine if and when to transfer storage of physical records of consumers whose admission to the program has been closed to the MHP Medical Records on-site storage facility.
2. While a consumer's physical records are in the custody of a program, the procedures for Consumers With an Open Admission will be followed.
3. If a consumer's physical records are transferred to another facility, the Policy and Procedure regarding transportation of PHI will be followed.

**C. Storage Outside Program Sites**

1. When a consumer's medical records are transferred from a program site to Medical Records, the Medical Records Administrator or designee ensures that the records are stored according to relevant laws, regulations, and contractual requirements.
  - a. The Medical Records Administrator or designee may choose to transfer physical records to an electronic format using the MHP IMAVISOR or other software which protects the privacy and security of the PHI.
    - i. When conversion to electronic format has been verified to be complete and accurate, the physical records are destroyed by shredding.
    - ii. Converted records are available through the MHP Clinician's Gateway electronic health record system on a read-only basis.
  - b. Pending conversion to electronic format, physical files are stored at a secure site under the custody and control of the Medical Records program.

**D. Off-Site Storage**

1. Prior to 2007, some physical medical records were stored in an off-site secure storage facility operated by a contractor, Iron Mountain. The privacy and security of such records is the responsibility of Iron Mountain while in their physical custody.
  - a. When records are delivered to the custody of the MHP, the MHP is responsible for the privacy and security of those records.
2. As time permits, the Medical Records Administrator or designee arranges for specific records to be transported from the Iron Mountain facility to an ADMHS site, where the physical records are converted to electronic format and then destroyed.

**ASSISTANCE:** Medical Records Administrator