

Guidance on Retention and Off-site Storage of Physical Records Containing Personally Identifiable Information and Protected Health Information

1. Purpose

The purpose of this document is to outline the roles and responsibilities for the retention and off-site storage of physical records which contain personally identifiable information (PII) and/or protected health information (PHI). Physical records include, but are not limited to, paper records, audio tapes, video tapes, and photographs.

2. Scope

This guidance is applicable to all Stanford University departments.

3. Key Terms

- A. *Personally Identifiable Information*: Includes any information that permits an individual to be directly or indirectly identified, including name, address, email address, social security number, and phone number, alone or in combination with other information, where the individual has not previously authorized or made public the release of that information
- B. *Protected Health Information*: Individually identifiable health information, including demographic information, that is created or received by a HIPAA covered entity and that relates to the past, present, or future physical or mental health of an individual, provision of health care to an individual, or past, present, or future payment for the provision of health care to an individual

4. Roles and Responsibilities

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| A. Records Owner | <ul style="list-style-type: none"> • Identify all record types under departmental responsibility, e.g., financial, personnel, student, medical, research, etc. • Establish a records retention schedule per regulatory, University, and departmental requirements for the record types • Identify which records can be digitized for electronic storage. Ensure all electronic archives meet the requirements of the HIPAA Privacy and Security Rules. • Implement a process for tracking when a record's retention period has expired • Implement a process for approving the destruction of records with expired retention periods |
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| | <ul style="list-style-type: none"> • Identify appropriate destruction methods for the records (e.g., pulverizing paper, dot shredding, physically destroying hard drives, disk sanitization) • Identify departmental roles with Records Custodian responsibilities and provide appropriate training |
| B. Records Custodian | <ul style="list-style-type: none"> • Implement the retention schedule established by the department • Create and maintain a detailed inventory of records, including a thorough description of the type of information contained in the records, prior to off-site storage • Per departmental approval, destroy records with expired retention periods and obtain certificates of destruction from vendor. Use only Procurement-approved records management vendors. The list of approved vendors may change; consult Procurement for assistance. • Create and maintain a list of all destroyed records with the destruction date • Immediately report the loss or unauthorized access of records containing PII/PHI to the University Privacy Office |
| C. Procurement | <ul style="list-style-type: none"> • Maintain a list of Stanford vendors contracted for physical and electronic records storage • Negotiate, write, and execute a business associate agreement (BAA) with storage vendors if none already exists. Consult the University Privacy Office for assistance with BAA negotiation, as needed |
| D. University Privacy Office | <ul style="list-style-type: none"> • Advise on record storage and destruction privacy concerns and issues • Support Procurement with BAA negotiation, as needed • Review and investigate all privacy incidents involving unauthorized access of moderate and high risk data including PII/PHI |

5. Additional Guidance on Records Management

Administrative Guide

- [2.1.3 Personnel Files and Data](#)
- [3.1.5 Retention of Financial Records](#)
- [7.4.1 Health and Safety Training and Communication](#)

Dean of Research

- [Record Retention Reference Guide](#)

Environmental Health and Safety

- [10.1 Training Records](#)
- [10.3 Medical Records](#)
- [Respiratory Protection Records](#)
- [10.5 Exposure Records](#)

Graduate Academic Policies and Procedures

- [8.3.1. Retention of Student Records](#)

Human Research Protection Program

- [8.2 Record Retention](#)

Research Policy Handbook

- [1.9 Retention of and Access to Research Data](#)

University Privacy Office

- [Know Your Data](#)
- [Physical Offsite Storage Reference Guide](#)
- [Fundraising](#)