



## **SYSTEM-WIDE MEDICAL EDUCATION POLICY**

### **Records Content, Access & Retention**

**No. 215**

<b>Subject:</b>	<b>Records Content, Access &amp; Retention</b>
<b>Scope:</b>	<b>Interns, Residents &amp; Fellows (House Officers)</b>
<b>Supersedes:</b>	All previous policies and procedures regarding this subject and scope
<b>Effective:</b>	2/17/10
<b>Requirements of:</b>	Accreditation Council for Graduate Medical Education (ACGME) American Osteopathic Association (AOA) Council on Podiatric Medical Education (CPME)
<b>Approved:</b>	HFAH GMEC, HFH GMEC, HFMH GMEC, HFWH GMEC
<b>Date:</b>	9/28/16

### **Purpose**

To ensure appropriate and consistent documentation, access and retention of House Officers' graduate medical education records.

### **Policy**

The Medical Education Office maintains personnel records related to House Officers' participation in graduate medical education programs. Educational records are maintained by the program office<sup>1</sup>.

### **Definitions**

**Personnel Record:** A record that identifies the House Officer, to the extent that the file is used or has been used, or may affect or be used relative to that House Officer's participation in the graduate medical education program including, but not limited to, qualifications, promotion, transfer, additional compensation, or disciplinary action.

**Educational Record:** A record that contains evaluations, in-service examinations, presentations, conference documentation between House Officer and mentor or program director, performance improvement plans or other such education-related materials.

**Peer Review Committee:** Michigan Compiled Law 333.21515: Confidentiality of records, data and knowledge. "The records, data, and knowledge collected for or by individuals or committees assigned a review function described in this article are confidential and shall be used only for the purposes provided in this article, shall not be public records, and shall not be available for court subpoena." Merely submitting information to a peer review committee does not mean that the information is within the protection of the peer review statute. For the information to be deemed "peer review" information it must have been collected by or for the peer review committee or individual authorized to conduct peer review. Information submitted to a peer review committee after a subpoena or request for information will not be protected

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<sup>1</sup> For osteopathic programs, both personnel and educational records are maintained in the Medical Education Office.

under this law. Documents and information potentially privileged under Michigan's peer review laws is reviewed on a case-by-case, and document-by-document basis.

### **Procedure**

1. Each House Officer must have two separate records, a personnel record and an educational record. These records are to be kept in separate file folders but may exist side by side in the same file cabinet or in different areas depending on program needs.
2. **Personnel records** shall include documents related to the House Officer's participation in the graduate medical education program; the following applicable documents will be included:
  - Application materials (minus letters of recommendation)
  - Curriculum Vita (CV)
  - Medical School diploma
  - ECFMG Certificate and DS2019, if applicable
  - Licenses; DEA Number if holding permanent license
  - House Officer (Graduate Physician Trainee) Agreements
  - Proof of permanent residency or name change, if applicable
  - Documentation of Leaves of Absence, if applicable
  - Information relating to federal regulation sanctions, if applicable
  - Performance Improvement documentation, in accordance with Medical Education Policy #213: Performance Improvement, if applicable
  - Graduate medical education program certificates (diplomas)
3. **Educational records** shall include documents related to the House Officer's academic performance. The educational record is to be organized by competency. Examples of documents to be included in the educational record are:
  - Formative evaluations
  - Summative evaluations
  - In-service exam results
  - Procedure logs
  - Rotation schedules
  - Records of training experiences
  - Records of research or scholarly activities
  - Performance Improvement documentation, in accordance with Medical Education Policy #213: Performance Improvement, if applicable
  - Documentation related to discussions between a House Officer and a Program Director, Assistant Program Director, faculty member or Department Chair, if applicable
  - Documentation from faculty, peer (de-identified), or support staff regarding the House Officer, if applicable
  - Final Verification Form or letter
4. All information in both the personnel record and the educational record are to be kept throughout the time that the House Officer participates in the HFHS graduate medical education program.

5. Files will be kept in a secure environment, keeping them safe from fire, water, or other such damage to the greatest extent possible. Whenever possible, all or part of the personnel and education records will be maintained in an electronic format, on a shared drive/server and/or within the electronic residency management system which is backed-up on a regular schedule.
6. House Officers may review their personnel and educational records while participating in their graduate medical education program as long as the review is conducted in the presence of a designated departmental staff member. House Officers may make copies of any documents within the files. Documents for which the House Officer had previously signed a waiver allowing them to remain confidential (e.g. professional references, official transcripts provided) may not be accessed.
7. Personnel and educational records are retained a minimum of seven years after graduation.
8. Seven years after completion, withdraw, transfer or dismissal from a residency program, records may be purged of all documents not required by HFHS finance to substantiate training for CMS reporting or material needed to verify satisfactory completion of the training program for credentialing verification. Retained documents may be merged into a single file. An asterisk (\*) indicates documents also maintained in the Henry Ford Hospital GME Office files. Examples of documents to be retained are:
  - Graduate medical education program certificates (diplomas)\*
  - Application materials (minus letters of recommendations and transcripts)\*
  - House Officer (Graduate Physician Trainee) Agreements\*
  - Curriculum Vita (CV)\*
  - Medical School Diploma\*
  - ECFMG Certificate and DS2019, if applicable \*
  - Proof of permanent residency or name change, if applicable\*
  - Documentation of Leaves of Absence, if applicable \*
  - DEA Number if holding permanent license\*
  - Information relating to federal regulation sanctions, if applicable \*
  - Summative evaluations, if applicable \*
  - Procedure logs
  - Rotation schedules
  - Records of training experiences
  - Materials required by individual Resident Review Committees or Boards, if applicable
  - Performance Improvement documentation, in accordance with Medical Education Policy #231: Performance Improvement, if applicable \*
  - Final Verification Form or letter, if applicable \*
9. A House Officer may request materials that are not retained in the departmental records, except for confidential documents. House Officers may request copies of retained documents.

10. Requests for materials from a record 30 days or more after completion of the program must be presented in writing. Copies will be stamped “unofficial” and sent to the House Officer with an applicable reproduction and mailing fee.