

# SCHOOL WELLNESS PROGRAM POLICY & PROCEDURE ESSENTIAL ELEMENTS: RECORD RETENTION

## THIS DOCUMENT IS TO BE USED AS A GUIDANCE TOOL IN DEVELOPING RECORD RETENTION POLICIES AND PROCEDURES FOR SCHOOL WELLNESS PROGRAMS.

#### **PURPOSE:**

Policies and procedures for the retention and destruction of School Wellness Program (SWP) medical records, fiscal records and program records. Records are maintained in compliance with applicable governmental and regulatory requirements. Policies ensure adequate mechanisms are in place to protect student data with respect to security and confidentiality.

### **DEFINITIONS:**

*Medical Records:* All documents, regardless of physical format, that hold demographic and medical information about a patient. This includes (but not limited to) the following: Nursing notes, nursing care plans, emergency care plans, Individualized Health Care Plans, **Medication Authorization Forms, Medication Administration logs**, treatment and medication orders from the primary care/specialty care provider, medical reports, injury reports, information related to the delegation of care, screening records, immunization records, 3200 forms, records of consultation with the parent, providers, school staff.

*Fiscal Records:* Budget records that show how expenditures were planned; voucher or expenditure records, which indicate the purposes for which funds were spent; and accounting records, which classify and summarize expenditures.

*Program Records*: Records of program implementation and evaluation that may include annual and quarterly reports, satisfaction surveys, grant applications, and other documents.

### PROCEDURES INCLUDE:

*Medical Records:* Medical records shall be retained according to sponsored agency policy.

#### Medical Record Retention Guidance

Medical records, in general, need to be stored until the student reaches adult status, plus 10 years (all records should be saved until the child reaches 28 years of age). In the case of Special Education, that would be age 26, so all records could potentially be saved until the child is anywhere from 28 to 36 years of age.

Note: When nurses are administering medications that the student brought from home under a *Medication Authorization Form* and documenting on a *Medication Log* this would be considered a medical record. If a 3200 form is referenced in nursing documentation then it should be retained in the medical record (or a copy if there is another location it is stored per fiduciary policy).

*Fiscal Records:* Maintain adequate fiscal records and files including source documentation to support all expenditures made under the terms of this agreement, as required. The Contractor must assure that all terms of the agreement will be appropriately adhered to and that records and detailed documentation for the project or program identified in this agreement will be maintained for a period of not less than seven (7) years after the close of the fiscal year or until litigation and audit findings have been resolved.

*Program Records:* Maintain adequate program records and files, including source documentation to support program activities and all expenditures made under the terms of this agreement, as required. Assure that all terms of the agreement will be appropriately adhered to and that records and detailed documentation for the project or program identified in this agreement will be maintained for a period of not less than three (3) years after the close of the fiscal year or until litigation and audit findings have been resolved.

#### **REFERENCES**:

American Academy of Pediatrics (2019). Managing the Practice Retention of Pediatric Medical Records. Retrieved from: <u>https://www.aap.org/en-us/professional-resources/practice-transformation/managing-practice/Pages/Retention-of-Pediatric-Medical-Records.aspx</u>

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