

COP402

DOCUMENT RETENTION POLICY AND PROCEDURE

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1. POLICY INTRODUCTION

This policy provides for the systematic review, retention and destruction of documents received or created by National Ambulance (the '**Company**') in connection with the transaction of the Company's business. It specifies the length of time for which documentation ¹ should be retained for purposes of review by internal and external parties, including, but not limited to, shareholders, auditors (external and / or internal), government entities, regulatory agencies and / or other organizations who have a legal or other right of oversight over the Company (the '**Interested Persons**').

The Documentation Retention Policy and Procedure covers all records and documents, regardless of physical form. It contains guidelines for how long certain documents should be retained and how records should be destroyed. The policy is designed to ensure compliance with the regulations of the United Arab Emirates, to eliminate accidental destruction of records and to facilitate the Company's operations by promoting efficiency and freeing up storage space.

This policy is relevant to the Risk Evaluation and Management, Policies and Objectives, Implementation Monitoring and Reporting, and Auditing and Inspections Management System Components.

2. SCOPE

This policy not only covers documents, but also any record of information, no matter how recorded. This includes paper documents, computerized or electronic records, including e-mails, and information stored in personal electronic devices (for example, smartphones, electronic patient care records etc.), as well as video and audio recordings. This policy refers to both corporate and clinical documents.

3. ROLES AND RESPONSIBILITIES

It is the policy of National Ambulance

- To comply with all applicable legal and regulatory duties to retain documents
- To maintain the highest standards of data security, storage and integrity
- To possess all documents required for normal business purposes, including administration of ongoing business relationships.
- The Chief Executive Officer (CEO) is responsible for development of this policy and for delegating the implementation, monitoring, review and revision activities required for this policy.

National Ambulance directs and expects all officers, directors, employees, contractors and / or volunteers to follow the rules and procedures set forth in this document. The definition of 'Documents' is contained in the 'Scope' paragraph earlier in this document.

No officer, director, employee, contractor and / or volunteer of National Ambulance shall knowingly destroy a document with the intent to obstruct or influence the investigation or proper administration of any matter within the jurisdiction of any Interested Person, as defined earlier in this document. This policy covers all records and documents of the National Ambulance

All Executive members mentioned below must carry out their roles with regard to implementation and administration of this policy in accordance with the table below.

¹ Defined by one Internet resources as '*Material that provides official information or evidence or that serves as a record*'

Documentation	Responsibility
Accounting and Finance documents, whether stored in paper or electronic format	Chief Financial Officer
All other forms of information unrelated to Accounting and Finance	Chief Administrative Officer
All Clinical Documentation	Medical Director
All Dispatch / Operations Documentation	Chief Operations Officer

For Medical Records, reference is made to DoH *Medical Record / Health Information Retention and Disposal Policy* PPR/HCP/MRHI/07 May 2007.

- NA facilities are required to maintain medical records / health information for specified period of time. Minimum retention requirements are absolute and detailed in 4.11.
- Scanning / other reproduction methods and off-site storage systems may be adopted as retention options. ○ The off-site storage system must ensure the same level of access, safety and security of the records / information as provided by NA facilities.
- Destruction of records / information must be performed in accordance with the disposal schedule defined in this Policy.
- DoH inspectors may visit National Ambulance sites for inspection with regard to this policy for retention and disposal of medical records. Where non-compliance is identified, DoH may impose disciplinary action against that facility for any identified breaches.
- Access on behalf of a patient or deceased must be by legally authorized persons in accordance with UAE laws, and includes any use of the record concerning the patient or deceased, or access to the record for any purpose such as in the provision of a report to another healthcare professional or facility or inspection by the patient or deceased's next of kin. Access in response to release of information, requests for research or for the education of healthcare professionals is not counted as "access on behalf of the patient" and must be subject to the applicable UAE laws and respective DoH Policies and Standards.
- There must be bi-annual meetings between the management of healthcare facilities and outsourced companies (if applicable to the facility) to discuss the ways of destruction of medical record / health information and also ensure improvement in the process.

The Knowledge Management Department is responsible for establishing appropriate record retention and disposal management practices, protocols and procedures as per the following:

- Implement record retention and disposal practices
- Ensure that record management, retention and disposal procedures are consistent with the policy
- Educate staff within the department as well as other facility units and departmental staff in:
 - Understanding sound record retention and disposal practices
 - Ensure the confidentiality and privacy of records / information during all processes including the weeding / transferring to the offsite location
 - Ensure that storage systems (offsite and onsite) are equipped with environmental control, applicable safety, privacy and security measures. If commercial storage system is utilized, regular site visits to such companies / sites must be conducted to confirm safety, privacy and confidentiality of records.
 - Medical Record / Health Information Retention and Disposal Schedule.
- National Ambulance reserves the right to revise and / or terminate this policy at any time.

4. DOCUMENT RETENTION REQUIREMENTS

4.1. ACCOUNTING AND FINANCE DOCUMENTS

Documentation	Retention Period
Accounts Payable ledgers and schedules (including, but not limited to, LPOs issued, supplier invoices and statements received, payments issued (whether by cheque, electronic transfer or other method)), credit notes received, etc.)	Six Years
Accounts Receivable ledgers and schedules (including, but not limited to, invoices issued, payments received, balances written off and recovered, etc.)	Six Years
Annual Audit Reports and Financial Statements	Permanently
Annual Audit Records, including working papers and other documents that relate to the audit	Six Years
Annual Plans and Budgets	Six Years
Bank Reconciliations	Six Years
Bank Statements	Six Years
Employee End of Service Benefit calculations	Six Years
Employee Expense Claims	Six Years
Employee Security Fund balances	Six Years
Fixed Asset records, including the Fixed Asset Register (date of acquisition, estimated useful life, estimated residual value, depreciation rates, depreciation method, proceeds on disposal, profit / loss on disposal, etc.)	Six Years
General Ledger	Six Years
Intangible Asset records, including information such as date of acquisition, estimated useful life, estimated residual value, amortization rates, amortization method, proceeds on disposal, profit / loss on disposal, etc.)	Six Years
Inventory records (representing the items used as training materials and other inventory items)	Six Years
Petty Cash Claims and Payments, including supporting documentation	Six Years
Related Party balances and transactions, whether receivable or payable, including intercompany confirmations of the balances and transactions between sister companies	Six Years
Reserve movements, whether that be the Legal Reserve or other statutory reserve, or other types of reserves as required by International Accounting Standards International Accounting Standards	Permanently
Share Capital records, such as names of the shareholders, % ownership, changes in the ownership structure, dates of changes in the ownership structure, any changes to the Share Capital (increases or decrease), and other records impacting the Share Capital balance	Permanently

4.2. CONTRACTS

Documentation	Retention Period
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Contracts with clients for pre-hospital care services	Six Years beyond the date of the final service provided under the contract
Supplier contracts, i.e. for the provision of goods and services	Six Years beyond the date of the final service provided by the supplier under the contract

4.3. CORPORATE RECORDS

Documentation	Retention Period
Memorandum of Association, including all amendments made thereto	Permanently
Shareholders Agreement, including any amendments made thereto	Permanently
Details of the shareholding in the company, including any changes made thereto	Permanently
Minutes of meetings of the Board of Directors	Ten Years from the date of the meeting
Minutes of meetings of various committees, for example the Finance and Audit Committee and similar	Ten Years from the date of the meeting
Power of Attorneys for Authorized Signatories	Ten Years following the resignation of the Authorized Person
Other 'Corporate Documents' not specifically defined above	Ten Years from the date last shown on the relevant document

4.4. CORRESPONDENCE AND INTERNAL MEMORANDA

Documentation	Retention Period
Relevant correspondence with shareholders, regulators, external parties, suppliers and similar	Five years from the date last shown on the relevant document
Internal Memoranda	Five years from the date last shown on the memorandum

4.5. ELECTRONIC DOCUMENTS

Documentation	Retention Period
Backups of the 'N' drive	Five years from the date of the last file saved on the server
E-mail correspondence, whether internal and / or external communication	Five years from the date of the last e-mail included in the backup file

4.6. INSURANCE RECORDS

Documentation	Retention Period
Motor Vehicle Insurance	Five Years from the date of expiration of the policy

Office Secure Insurance	Five Years from the date of expiration of the policy
Public Liability Insurance	Five Years from the date of expiration of the policy
Medical Malpractice Insurance	Five Years from the date of expiration of the policy
Workmen's Compensation Insurance	Five Years from the date of expiration of the policy
Group Life and Personal Accident Insurance	Five Years from the date of expiration of the policy

4.7. LEGAL FILES AND PAPERS

Documentation	Retention Period
Ongoing legal matters	Permanently
Settled legal matters	Ten Years from the date of settlement of the legal matter
External legal reviews	Five Years from the date of the report of the external legal review

4.8. PAYROLL DOCUMENTS

Documentation	Retention Period
Monthly Payroll	Five Years following the month in which the payment is made
Payroll deductions	Five Years following the month in which the deduction is made
Payments to staff made outside of payroll	Five Years following the month in which the payment is made

4.9. PERSONNEL RECORDS

Documentation	Retention Period
Personnel Files of each staff member	Five Years following the final date of employment of the staff member
Personnel Files of each Emirati Staff	Permanently

4.10. DISPATCH RECORDS

Documentation	Minimum Retention Period of Patient related information from date of last recording in Dispatch record	Disposal Schedule
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All Patient related Information as per section 4.1.1	As below	As below
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4.11. MEDICAL RECORDS

Type of Medical Record/Health Information (if applicable)	Minimum Retention Period of Medical Record / Health Information from date of last attendance	Disposal Schedule
Records of Royal Patients	Indefinite	Do not destroy
Records of VIP Patients	Indefinite	Do not destroy
Records of Nationals (Emirati)	Indefinite	Do not destroy
Records of Expatriates (excluding medico legal cases)	25 Years	Destroy after completion of 25 years from last attendance/visit or last access on behalf of the patient
CGF137 Patient Care Records Request Form (filled)	25 Years	Destroy after completion of 25 years from last attendance/visit
Death and Medico – Legal Cases	Indefinite	Do not destroy
Medical Imaging: (X-Rays, CT Scan, MRI, Ultrasound, etc.) for Nationals	Indefinite	Do not destroy
Medical Imaging: (X-Rays, CT Scan MRI, Ultrasound, etc.) for Expatriates	25 Years	Destroy after completion of 25 years from last attendance/visit
Birth Registers	Indefinite	Do not destroy
Death Registers	Indefinite	Do not destroy
Admission and Discharge Registers	Indefinite	Do not destroy
Outpatient Visit Registration	Indefinite	Do not destroy
Medico Legal Registers	Indefinite	Do not destroy
Operation Theatre, Narcotic, Infection control Registers	Indefinite	Do not destroy
Medical Imaging /Lab/other Investigations Registers	Indefinite	Do not destroy
Vaccination Registers	Indefinite	Do not destroy
Daily Statistics Reports	3 Years	Destroy after the completion of 3 years
Monthly Statistics Reports	3 Years	Destroy after the completion of 3 years
Yearly Statistics Reports	Indefinite	Do not destroy

4.12. EDUCATIONAL RECORDS

Documentation	Retention Period
All educational records for DOH CME, AHA, NAEMT	Destroy after the completion of 4 years

5. RELEVANT LEGISLATION

International, federal or local legislation and circulars relevant to this Policy. Full detail on this legislation can be found in QHP109 Legal Register.

Code, Name of Legislation	Jurisdiction
Code, Name of Legislation, Year here	Jurisdiction here

6. RELATED POLICIES AND FORMS

List related policies and procedures to the created/updated policy.

Policy & Procedure /Form
COP401 Information Management Policy
ITP101 Information Technology Policy
ITP106 Data Backup Policy
COF312 Records Destruction Approval Form

7. FEEDBACK

Any feedback or suggestions for improvement to this Policy, Processes or Procedures can be submitted to qhse@nationalambulance.ae

8. DOCUMENT CONTROL AND OWNERSHIP

A review and update of this document will take place as necessary, when changes occur that identify the need to revise this Policy such as changes in roles and responsibilities, release of new legislative or technical guidance, or identification of a new policy area.

This document ownership for editing is identified as:

- Chief Executive Officer

This controlled document is managed / overseen by [Procurement and Tendering Committee and/or Audit and Risk Management Committee and/or HR and Compensation Committee].

Change Brief

Version No.	Date	Changes
1	13 January 2014	First Version

2	29-May-2014	Migrated to Corporate Services
3	14-Jan-2016	Updated for JCI 2 nd Edition
4	February 2020	Due to review, added the educational records.
5	September 2020	Updated Personnel Record section (Personnel Files of each Emirati Staff) (ADHICS) Added Document Destruction Process Move related policies to the related policies table Changes HAAD to DoH Replaced Etihad Towers with Facilities Change the format to match the Policy and Procedure Template Item 5 Document Destruction is removed Creation of COF312 Records Destruction Approval Form
6	July 2021	Changes on the retention period for Medical Records (Records of Expatriates (excluding medico legal cases) & Medical imaging (X-rays, CT Scan, MRI, Ultrasound, etc.) for expatriates) from 7 years to 25 years Removal of "Document Destruction" from the table of contents Addition to 4.11 Medical Records - CGF137 Patient Care Records Request Form (filled) to be retained for 25 years Re-arrangements of the items/format of the document Add Appendix A: Record Destruction Procedure After Policy review committee Add the SOP destruction as appendix Revised the COF312 Records of Destruction remove the procedure and put it in the COP402 Document Retention Policy and Procedure

CEO Approval

Board Member Verification

APPENDIX A: RECORD DESTRUCTION PROCEDURE

This SOP is drafted to ensure that National Ambulance complies with ADHICS and DoH Standard on Patient Healthcare Data Privacy and outlines the destruction process.

STORAGE OF RECORDS:

The storage area should comply with relevant health, safety, and security requirements:

- Physical Records:
 - Restricted documents: hard copies of restricted documents must be stored in public work areas and key work areas that are demarcated with walls to restrict non employees from accessing these areas as detailed in QHP213 QHSE Work Location Management Policy.
 - Confidential documents: hard copies of confidential records must be stored in secure areas with limited access and control measures such as areas with biometrics access/ lock. Areas where hard copies of patient care records are stored must be monitored by CCTV as detailed in QHP213 QHSE Work Location Management Policy.
- Electronic Records: must be stored on trusted servers with a high level of information security control.

The above storage conditions apply for both active documents and documents that surpass their retention period due to obligatory or legal reasons. Validity of records should be checked by departments on annual basis and should be verified by department heads.

DESTRUCTION OF RECORDS:

The destruction of records process should be discussed and approved prior to starting the process, and the Records Destruction Approval Form COF312 should be filled and signed.

1. General Corporate Records – Destruction Process:

- The records requested for destruction should be as per the scheduled period identified in COP402 Document Retention Policy and Procedure.
- All destructions must be authorized by the Department Manager and Relevant Department Executive.
- The records must not be subject to any current outstanding claims, investigation, audit, or legal cases.
- Records containing confidential, sensitive, or privileged information such as patient records and personal information must be securely destroyed.
- Destroying method used should be identified and mentioned in the COF312. Examples; shredding, , and secure electronic disposal.
- IT Department is responsible for any secure electronic disposal.

2. Clinical Records – Destruction Process:

- The Clinical Services/Governance function must oversee and approve any clinical records destruction processes and provide any relevant training to the managers /staff who will participate in the destruction process.
- The records requested for destruction should be as per the scheduled period and should be identified in COP402 Document Retention Policy and Procedure.
- The Medical Director or his delegates must authorize all destructions.
- The records must not be subject to any current outstanding claims, investigation, audit, or legal cases.
- Records containing confidential, sensitive, or privileged information such as patient records and personal information must be securely destroyed.
- Destroying methods should be identified and mentioned in the COF312. Examples; shredding, combustion, or secure electronic disposal
- IT Department is responsible for any secure electronic disposal under the supervision of the Medical Director and his delegates.

Instructions:

Before starting any destruction related process, the following should be considered.

1. The records listed are scheduled to be destroyed, as indicated in COP 402 Document Retention Policy and Procedure.
2. All destructions must be authorized by the Department Manager and Relevant Department Executive.
3. The records are not subject to any current outstanding claims, investigation, audit, and legal cases.
4. Records containing confidential, sensitive, or privileged information such as patient records and personal information must be securely destroyed.
5. Destroying Methods Examples; Shredding, Recycling, and Secure Electronic Disposal.
6. IT Department is responsible for any secure electronic disposal.
7. The name and the details of the person who performed the destruction and the destruction date to be mentioned.

A copy of this COF312 Record of Destruction to be scan and save as PDF after destructions completed.