

St. Thomas University Records Management Policy

Purpose

The purpose of St. Thomas University's Records Management Policy is to ensure the responsible management of the University's records to:

- protect information and safeguard privacy in compliance with privacy legislation
- support the efficient operation of the University by ensuring appropriate access to reliable, accurate, and complete records
- preserve evidence of the University's activities for purposes of planning and accountability

Scope

Any record in the custody of or under the control of St. Thomas University except for teaching materials, academic research information, and records whose management is governed by a Collective Agreement or by Senate policies. For example, the management of student academic work retained by faculty (such as written assignments, test, and exams) is determined by Senate and outside of the scope of this policy."

Definitions

Record: a record of information in any form, including information that is written, photographed, recorded or stored in any manner, on any storage medium or by any means, including by graphic, electronic or mechanical means, but not including electronic software or any mechanism that produces records. (Adapted from the Province of New Brunswick's *Right to Information and Protection of Privacy Act*)

Identifying information: Information that identifies an individual or which it is reasonably foreseeable in the circumstances could be utilized, either alone or with other information, to identify an individual. (RTTIPA)

Personal information: Recorded information about an identifiable individual, including but not limited to: name, home address, email address, home telephone; personal health information; information about age, gender, sexual orientation, marital status, or family status; information about ancestry, race, nationality or national or ethnic origin; information about the individual's education, employment or occupation or educational, employment or occupational history; or identification number assigned to the individual. This would include, but not be limited to, such personal information gathered for activities related to the University's programs and administration (such as recruitment, admission, registration, academics, degree granting, and advancement) as well as regular operational practices of faculty and staff. (Adapted from RTTIPA and the *STU Policy Statement on Privacy and Protection of Information*)

General Policy

1. All University records as defined above are the property of the University, unless otherwise specified in a collective agreement.
2. Records will be protected from inappropriate access, alteration, destruction or usage.
3. The retention of records, regardless of media or location, will be scheduled so that records are retained only for as long as required by:
 - a. bona fide operational needs
 - b. relevant provincial or federal legislation (e.g. Canada Revenue Agency requirements)
4. Unless otherwise identified in the Records Retention Schedule, records must be retained by the department in which they were received or created. For internal communications at the University when both sender/creator and recipient are University employees, the sender/creator is responsible for ensuring the retention of the record.
5. Each Unit is responsible for:
 - a. developing and maintaining a records retention schedule in keeping with the principles above for the records for which it is responsible
 - b. regularly reviewing the retention schedule and, once the retention period has elapsed, disposing of or transferring records in a manner appropriate to the risk of misuse and level of sensitivity and confidentiality associated with the records.

Data Classification and Record Retention Schedule

In keeping with the *Right to Information and Protection of Privacy Act* and the University's *Policy on Privacy and Protection of Information*, all units are required to develop, maintain, and follow a Records Retention Schedule to ensure that records are retained only as long as required and disposed of in a manner appropriate to the risk of misuse and level of sensitivity and confidentiality associated with the records.

The Records Retention Schedule must be comprehensive, encompassing every type of record created, maintained, or stored by the unit regardless of media, and should include the following information: 1) Record Type, 2) Media, 3) Classification, 4) Access, 5) Retention Period, 6) Disposition.

RECORD TYPE: Record type can be a broad, aggregated category, such as "committee documents," but each specific record categorized under a given type must have the same classification, access, retention period, and disposition. Exceptions should be identified and assigned a separate type. For example, "committee documents" could be classified as "Private unless otherwise noted," with committee documents classified as "Restricted" or "Public" given a separate entry.

MEDIA: Record types should be categorized as "Paper," "Electronic," or both. Provide separate entries only when the classification, access, retention period, or disposition differs between media.

CLASSIFICATION: Records should be categorized in one of three classifications based on level of risk, sensitivity, and impact to the University should the record be disclosed, altered, or destroyed without authorization:

- **Restricted:** Records should be classified as Restricted when the unauthorized disclosure, alteration, destruction, or use of that record could cause a significant level of risk to the University. Examples of Restricted records include personal information protected by provincial or federal privacy legislation, personal identifying information, sensitive proprietary University information, and records protected by confidentiality agreements.
- **Private:** By default, all institutional records not explicitly classified as Restricted or Public should be treated as Private records. This includes records such as reports with proprietary University information not containing personal information or sensitive or confidential information; internal policy and procedure documents; or routine internal correspondence not containing sensitive, confidential or identifying information.
- **Public:** This includes data for which there is no expectation of privacy or confidentiality, such as information available on the STU website, information gathered from or available from public sources, or publicly conferred academic credentials and awards.

ACCESS: Each record type must include a list of the titles of those positions and/or roles with access to the record type, whether or not such access is exercised on a regular basis. Do not include employee names.

RETENTION: When determining retention period, please note the following:

- The retention period should reflect the general principle that records should only be retained for as long as required by bona fide operational needs or legislation.
- You are not normally required to retain copies of records someone else has a responsibility to retain, such as minutes of a committee you do not chair, or emails created and sent by another employee within the University. However, you must dispose of them in accordance with the Retention Policy.
- Records used to make decisions that directly affect an individual must be retained for a reasonable period so that the individual to whom the information relates has a reasonable opportunity to obtain access to it.

Unless otherwise specified, the retention period should be calculated from the most recent date among the following:

- the time the relevant record is created or received;
- the last date the relevant record is used in the course of a faculty, staff, or service provider's duties to the University, or to make any determination about a student or other individual at the University; and
- in the case of any record evidencing a contract, agreement or continuing obligation, the expiration, termination or completion of such contract, agreement or obligation.

One of seven possible retention periods should be identified for each record type:

- **Do not retain** – for transactional data or temporary working files that are not needed once the process, project or report is completed.
- **1 month**
- **1 year**
- **3 years**
- **7 years**
- **Until superseded** - for records that are regularly updated or revised.
- **Permanent retention** – for records that are to be retained as accessible indefinitely in the unit work space. Do not use this for records to be archived, either physically or electronically.

DISPOSITION: One of five possible dispositions should be identified for each record type:

- **Secure Destruction:** By default, records classified as Restricted require Secure Destruction and should be destroyed so that information cannot be practically read or reconstructed. For physical (paper) documents, this means that personal or confidential data should be destroyed with a cross-cut shredder or deposited in a secure shredding box for later secure shredding. For electronic documents, personal or confidential data should be destroyed with the appropriate software for overwriting electronic data or disk degaussing technology. Depending on the sensitivity of the information contained, some records classified as Private may also require Secure Destruction.
- **Destruction:** Records not requiring secure destruction or archiving may be disposed of in unsecured waste or recycle bins, in the case of paper records, or deleted, in the case of electronic data.
- **Archive:** Records no longer required for daily operations but that have been identified as having a permanent value to the University should be marked for Archiving. In the case of physical records, this could involve transferring the records to a secure storage location. ITS will assist in archiving electronic records.
- **Transfer:** Operational requirements may dictate the transfer of physical records from one office to another (such as when an applicant becomes a student), and/or the transfer of stewardship from one data steward to another. In such cases, the Retention Schedule should specify the unit to which the records and/or stewardship are to be transferred.
- **Not Applicable:** The “Not Applicable” disposition is used for record types slated for Permanent Retention.