

Record Retention Policy #0.24

I. Purpose of Policy

The purpose of this policy is to delineate the way in which ACGME-accredited programs will maintain resident/fellow and applicant records.

II. Policy Statement

Resident/Fellow records provide a comprehensive record of trainee activities in a GME training program. Resident/Fellow records are learner/employee records and are used to verify completion of training requirements.

Programs must maintain resident/fellow records in New Innovations. Additional files may be kept in hospital or healthcare institution network files. Resident/Fellow case/procedure logs must be de-identified of any Protected Health Information (PHI) (e.g. patient names and medical record numbers).

Records may not be destroyed if any litigation, claim, negotiation, audit, open records request, administrative review, or other action involving the record is initiated before the expiration of a retention period for the record until the completion of the action and the resolution of all issues that arise from it.

Programs are required to obtain and retain resident/fellow records for a minimum of seven (7) years after graduation from the program in case of subsequent legal action, if any, unless otherwise noted. For residents/fellows who do not complete the program or who are not recommended for Board certification, programs should keep the entire file.

Resident/Fellow records must be available for review by the ACGME Accreditation Field Representative at the time of a site visit.

Programs must follow record retention guidelines maintaining minimum content set by the ACGME and KCU-GME Consortium, and must minimally maintain the following in New Innovations at all times:

- resident agreement of appointments/contracts
- primary and preferred email
- current address
- previous training verification or certificate of completion
- final Milestone report and list of completed rotations for transfer residents/fellows
- evaluations from multiple evaluators, including self-evaluations, peer evaluation, patient evaluations, nurse evaluations, and faculty evaluations
- evaluations by the Clinical Competency Committee, such as Milestone evaluations
- records of the resident's/fellow's rotations and other training experiences

- records of the resident's/fellow's surgical and procedural training as applicable
- medical school graduation documentation, including graduation certificates from any previous GME training completed in another training program
- copy of Education Commission on Foreign Graduate Medical Education (ECFMG) certification for international medical graduates
- a written statement of permission from the Program Director or copy of moonlighting approval form for residents/fellows engaged in moonlighting
- documentation of current medical licensure
- documentation of required added training for the program, such as life support certifications (BLS, ACLS, PALS, etc.)
- documentation of scholarly activity and quality improvement projects, including records of presentations, abstracts, and publications
- documentation of any disciplinary actions, including remediation, probation, suspension, termination, withdrawal, or non-renewal of resident agreement of appointment/contract
- other content as determined by the Program Director and/or KCU

The following files for all residents/fellows who successfully complete the program must be retained indefinitely in New Innovations, and accessible to KCU, in order to accommodate future requests for verification of program completion:

- a final summative evaluation;
- records of the resident's/fellow's rotations, training experiences, and procedures, as applicable to the specialty; and,
- documentation of disciplinary action, if any.

<p>Approval by GMEC: 06.02.2023; 05.11.2022; 06.04.2021; 06.05.2020; 05.03.201; 01.11.2019; 06.18.2018; 03.08.2018; 06.02.2017; 05.27.2016; 07.01.2015</p>
