

UNIVERSITY OF MARYLAND MEDICAL CENTER GRADUATE MEDICAL EDUCATION POLICY AND PROCEDURE MANUAL	PAGE: 1 of 6	PROCEDURE NO: GMS - AA
	EFFECTIVE DATE: July 1, 2020	
SUBJECT: Record Access and Retention Policy		
APPROVALS: Graduate Medical Education Committee: June 25, 2020		

1. Purpose

UMMC, as the Sponsoring Institution, is responsible for protecting the security and accuracy of resident/fellow (i.e. trainee) information and training program files. The trainee files provide a comprehensive record of the trainee's activities in a graduate medical education (GME) training program. Records are learner and employee records and are used to verify completion of training requirements. The purpose of this policy is to provide guidance to the programs regarding maintenance and retention of these records.

2. Scope

This policy applies to all graduate medical education residency and fellowship training programs that the University of Maryland Medical Center (UMMC) sponsors.

The term "trainee" in this policy refers to both specialty residents and subspecialty fellows.

Program refers to a graduate medical education program that is recognized and sponsored by the University of Maryland Medical Center and under the administrative oversight of the GME office, Graduate Medical Education Committee and the DIO, including all ACGME- accredited graduate medical education programs, program accredited by other organizations, and equivalency-accredited programs approved and recognized by the GMEC.

Records refer to documents in paper or electronic formats, including but not limited to internal and external databases used for program management (ex. ERAS, NRMP, San Francisco, Post-doctoral Dental Matching Programs, Residency Management Systems, Certifying Board Portals, ACGME or other GME program registries)

3. Responsibility

3.1 It is the responsibility of all GME Program Directors, Program Coordinators, Trainees, UMMC management, School of Medicine officials, other institutional training sites and their officials to comply with this policy. Each training Program Director is required to maintain permanent accurate program files for each trainee that includes, at a minimum, the required documents outlined in the UMMC GME Resident/Fellow Records and Program Document Retention Grid (Attachment A).

3.2 Each training Program Director is required to maintain file confidentiality in a secure location in either hard copy or electronic formats. Secure storage, electronic file back-up and recovery protocols must be in place and consistently followed in order to prevent unauthorized access, unlawful use, corruption, destruction or accidental loss.

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4. Procedure

UMMC and its Program Directors collectively assure confidential complete training files are maintained for each trainee. For evaluations, all UMMC GME programs must use the UMMC GME-approved web based, secure residency management system. The files are permanent and may not be destroyed

4.1 FILE Access

- 4.1.1 Access to the files must be limited to only authorized personnel – the program director, program coordinator, the trainee, and the GME administrative director or designee, the Designated Institutional Official (DIO), when indicated. Others may be allowed access as designated by the program director for specific purposes to meet and carry out the requirements of the educational program (ex. CCC chair for evaluations, faculty mentor for feedback), credentialing, verification of training, or accreditation purposes (ex. site visits). In specific circumstances, the contents of the files must be disclosed in order to meet the operational needs of the hospital including requests by Human Resources and UMMC legal counsel as required by law. Others may be allowed access with written permission/formal consent from the trainee for credentialing purposes.
- 4.1.2 A trainee must have timely access to performance evaluations and feedback. Upon request, a trainee or graduate shall be provided with timely access to their file under direct supervision of the program director, or person designated by the program director, with the exception of items for which the trainee has waived the right to review (ex. letters of recommendation, references) and any other documents that are privileged, confidential, and proprietary or otherwise protected under the law.
- 4.1.3 The Program Director, GME administrative director or designee may disclose the file or portions of the file to individuals with a business need for information (e.g.: for matters relating to education in the program or the quality of patient care in the program, credentialing or privileging activity, or regulatory audits.) GME legal counsel should be consulted to assist with requests for records related to litigation or claims.

4.2 FILE Maintenance

- 4.2.1 The Program Director and Program Coordinator should review the trainee files and program administrative files, at a minimum of once, during an academic year, for completeness.
- 4.2.2 Files must be reviewed in advance of an accreditation site visit to ensure that the contents are complete and up to date.

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

4.2.4 GME programs should periodically review file access, security processes, and passwords including removing access for those who no longer have a role in the program.

4.3 Verification of Training:

Primary verification of graduate medical education is important to credentialing of physicians for further training and practice. Such verification for residents/fellows who have completed all or a portion of training must be accurate and timely.

4.3.1 Special Circumstances:

1. Files of Trainees who transition to Faculty or other employment positions should be maintained in accordance with this policy.
2. For trainees who matriculate to the program but do not successfully complete the program, records must be permanently retained.

4.3.2 Records of Unsuccessful Applicants:

Unsuccessful applicant files are defined as the files and supporting documents (ex. interviewer evaluations, correspondence) of the applicants/candidates that were received and selected for consideration by the program but did not matriculate into the program. Files of unsuccessful applicants will be retained by the program for two years after recruitment has ended and final candidates have matched/accepted for the academic year being filled. Access to unsuccessful applicant files must be limited only to authorized personnel.

4.3.3 Archival:

Records for trainees from programs that are no longer sponsored by UMMC or programs that are administratively withdrawn must be maintained by the original sponsoring department and by the medical staff office.

5. Breach of Policy

In the event of a breach of the policy and after an assessment of the event, the responsible individual(s) will receive counseling, remediation, and as indicated, have limited access and/or permanent removal of access to trainee and program records.

UMMC GME-sponsored programs will comply with the residency management system's (ex. MedHub) administrative access policies based upon assigned roles.

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In the event of externally reported violations or investigations (ex. AAMC, ERAS, NRMP, other Matching Programs, Professional Organizations or other regulatory agencies), UMMC GME programs and personnel will comply with the investigation, policies and procedures.

Attachment A.

UMMC GME Resident/Fellow Records and Program Document Retention Grid:

Type of Record	Active Record	Permanent Record	Notes
Application to Program, including letters of recommendation, transcripts, CV, Interview Evaluation Forms			
Medical School Graduation Documentation or ECFMG certification			
Verification/Certification of Prior Training			
Offer/Appointment Letter			
Contracts			
Licenses (training or permanent) & Permits: DEA, NPI, Employment authorization			
Other:			
Exams & Certifications			
USMLE, COMPLEX or other required Score/Exam Transcripts			
ITE Scores			
Board Scores & Certification			
Required added training, ACLS, PALS, NALS, ATLS, Moderate Sedation			
Other:			
Education Program			
Rotations, Block diagrams, assignments and other training experiences			
Procedure/Operative Logs or Patient Case Logs (PHI redacted)			
Scholarly Activities, Research Projects, Quality Improvement & Patient Safety projects			

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including records of presentations, abstracts, publications			
Honors, Awards, Grants, Scholarships			
Other:			
Evaluation			
Evaluations from multiple evaluators including self-evaluations as specified in program requirements			
Periodic Evaluation Feedback (min. freq. semiannually) as discussed with the trainee by the program director or designee			
Individualized Learning Plan			
Records of educational or disciplinary actions as pertinent to the trainee			
Annual Competency Based Evaluation -- form used for promotion to the next training level			
Final Milestones Reports & Reports to Certifying Boards			
Final Summary (Summative) Evaluation with Competencies – form used for completion of training program and graduation			
Certificate of Completion			
Other:			
Other Documents as Required by Program or Specialty			
Moonlighting, Extra Sessions Requests Approval			
Medical Leave & Health Related Documents			
Other:			
Program Administrative Records			
Accreditation Records Accreditation applications, annual accreditation reports, correspondence, accreditation decisions, GMEC special reviews, action plans, reports			

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Meeting minutes – CCC, APE/PEC, Self-Study, education/curriculum/research committee			
Program Curriculum Records – schedules, attendance records			
Evaluations: Program, Rotation, Faculty			
Program Specific Policies & Procedures			
Affiliation Agreements			
Other:			