San Francisco Department of Public Health



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San Francisco Department of Public Health

Policy & Procedure Detail*

Policy & Procedure Title: G.1.0 Retention, Storage and Destruction of Protected Health Information	
Category: Privacy	
Effective Date: 10/1/2008	Last Reissue/Revision Date: 11/1/2021
DPH Unit of Origin: Office of Compliance & Privacy Affairs	
Policy Contact - Employee Name and Title; and/or DPH Division:	
Office of Compliance & Privacy Affairs (OCPA)	
Contact Phone Number(s): (855) 729-6040	
Distribution: DPH-wide If not DPH-wide, other distribution:	

1. Purpose of Policy

The purpose of this policy is to establish a process for the retention, storage, and destruction of protected health information (PHI) in accordance with applicable sections of The Joint Commission standards, Title 22 of the California Code of Regulations, the Confidentiality of Medical Information Act, and the Health Insurance Portability and Accountability Act (HIPAA).

2. Policy

It is the policy of San Francisco Department of Public Health to ensure the secure storage and retention of PHI in all forms and media for the period of time specified by California statute (10 years minimum) and for longer periods when necessary for continuing patient care or to meet legal, regulatory, or accreditation requirements.

3. Procedures

- I. Retention of Protected Health Information (PHI)
 - A. PHI is retained for the period of time specified by Federal and California statute (10 years minimum).
 - B. PHI may be retained for longer periods of time when required by law, when necessary for continuing patient care, or to meet longer retention periods stipulated for minors.
 - C. If a DPH facility, division, or unit ceases operation or changes ownership, DPH administration will be provided written documentation of arrangements to preserve or transfer all associated PHI.

^{*}All sections in table required. Updated 3/2014

Title of Policy: Retention, Storage and Destruction of PHI

- II. Storage of Protected Health Information
 - A. Storage of PHI is maintained in DPH facilities in secured housing open only to DPH employees and University of California at San Francisco (UCSF) employees working at DPH facilities.
 - B. Storage of PHI outside of DPH facilities is in approved, HIPAA-compliant facilities with which DPH has signed Business Associates agreements.
- III. Destruction of Protected Health Information
 - A. Destruction of PHI in paper-based formats is accomplished through shredding only through a contracted vendor who has signed a Business Associate Agreement.
 - B. Destruction of devices and/or media storing PHI in digital formats is accomplished through procedures stipulated in DPH IT Security policies.

Last Revision Date: 11/1/2021 Last Reviewed Date: 9/11/2023