VA | U.S. Department of Veterans Affairs

Records Management Training for ORD FY-2018

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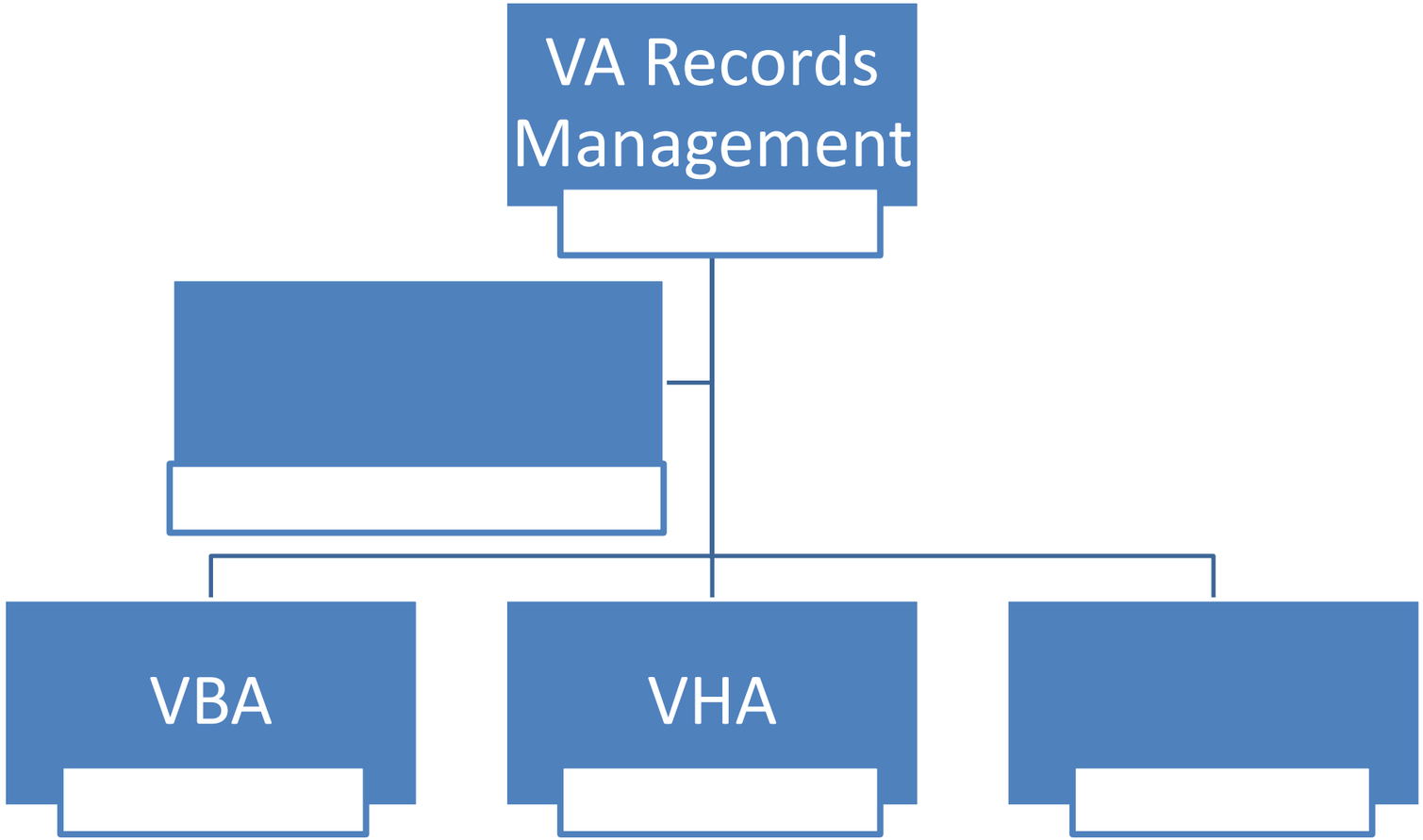
VHA
Records
Officer

I CARE
DEPARTMENT OF VETERANS AFFAIRS

- VA Records Structure
- Define what is a record
- Identify basic categories of records
- Determine the significant differences among records, non-record material and personal papers
- Record Management areas of concern
- Key position responsibilities
- Define File Plan/Records Inventory

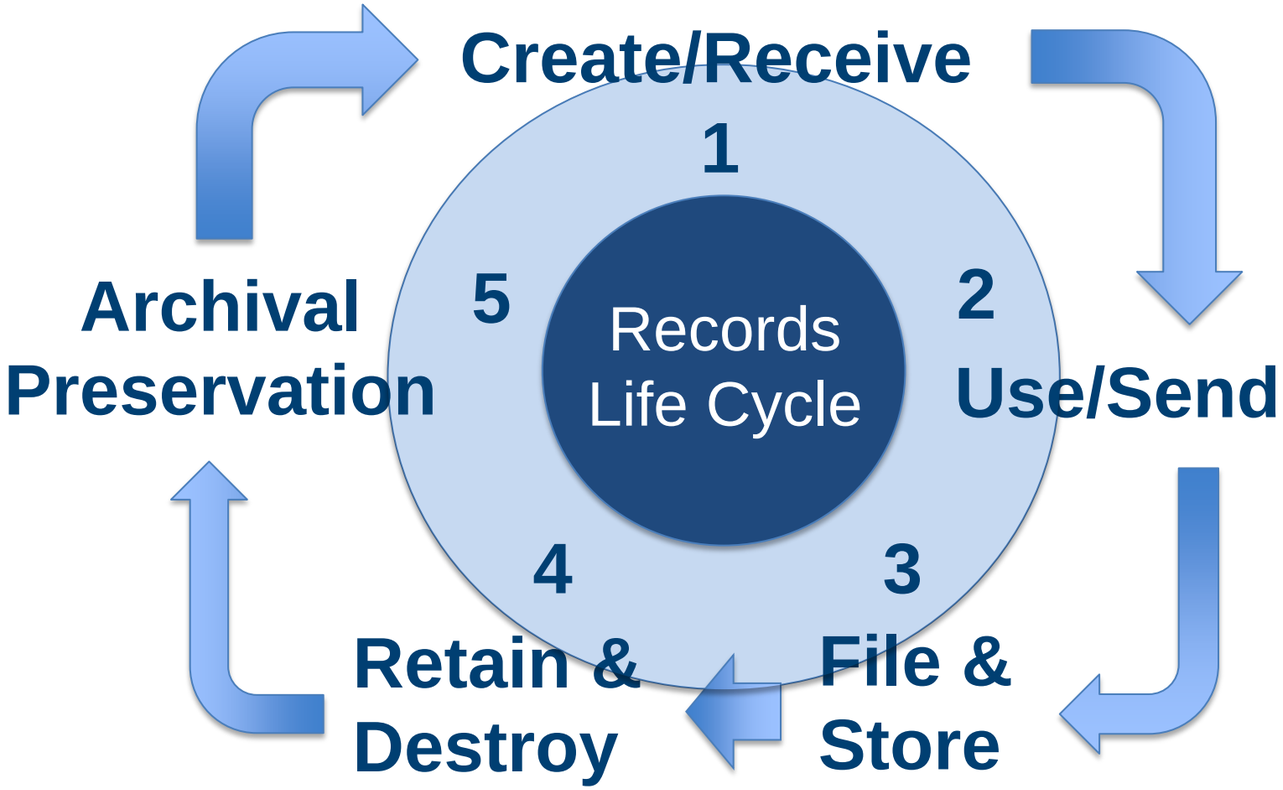
Records Program Structure



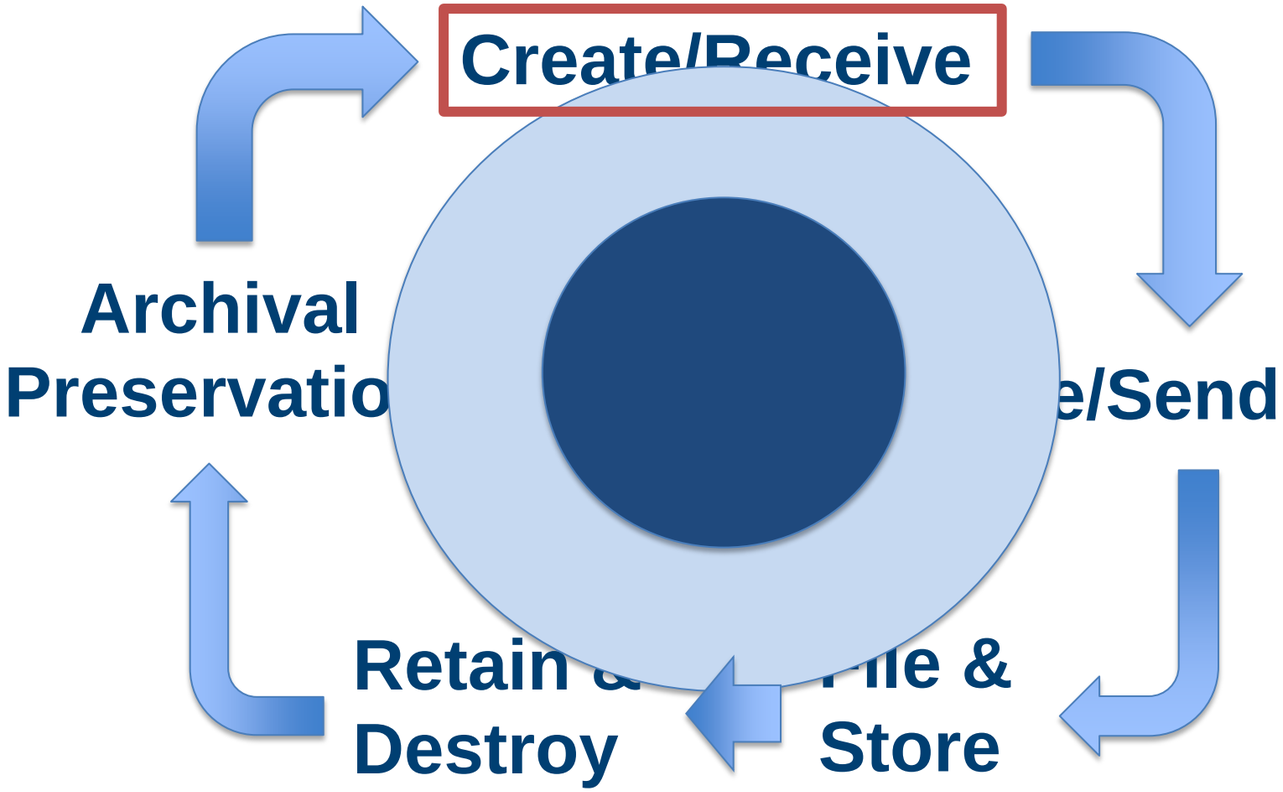
What is a Record

All media forms to include, but not limited to, books, papers, maps, photographs, machine readable material, or other documentary materials, regardless of physical form or characteristics, made or received by an agency of the U.S. Government under Federal Law or in connection with **transactions of public business**… (44 U.S.C. 3301)

VHA Records Life Cycle



VHA Records Life Cycle



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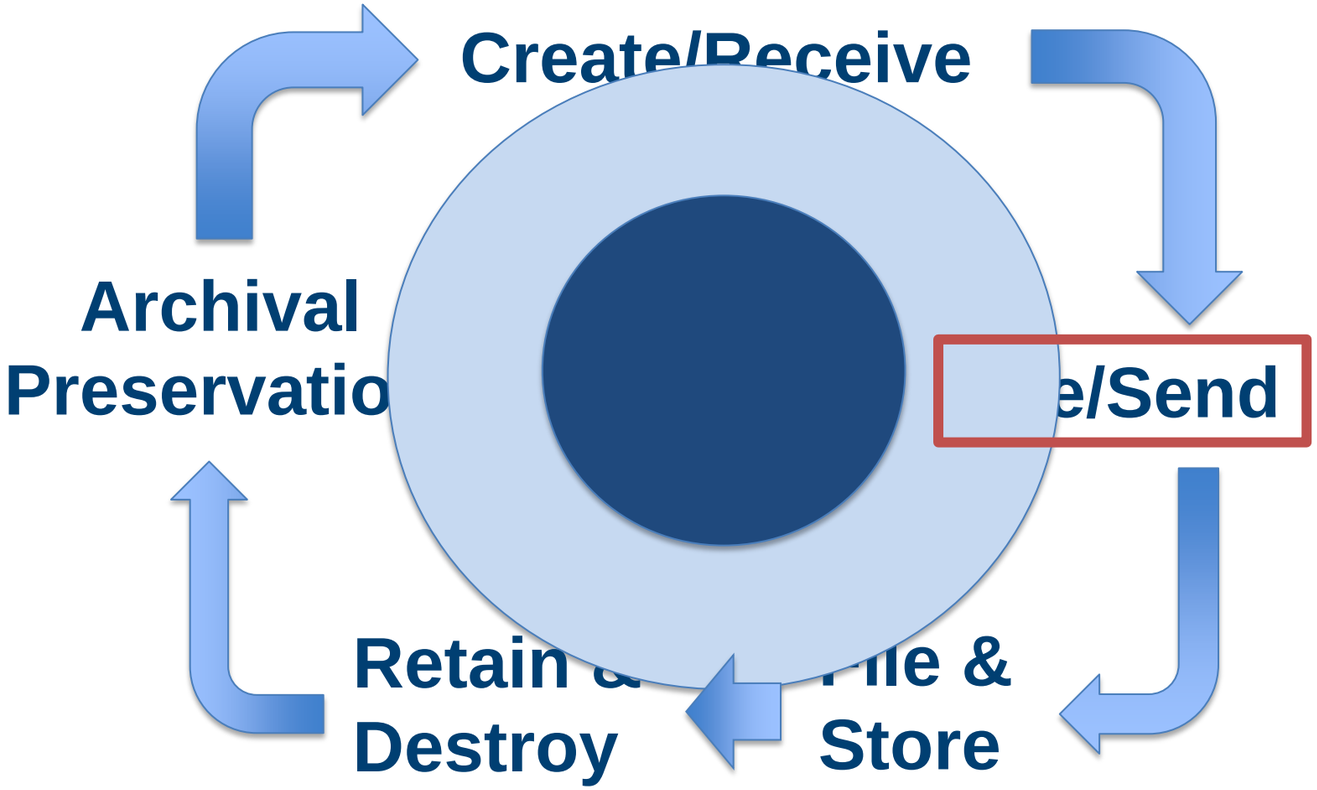

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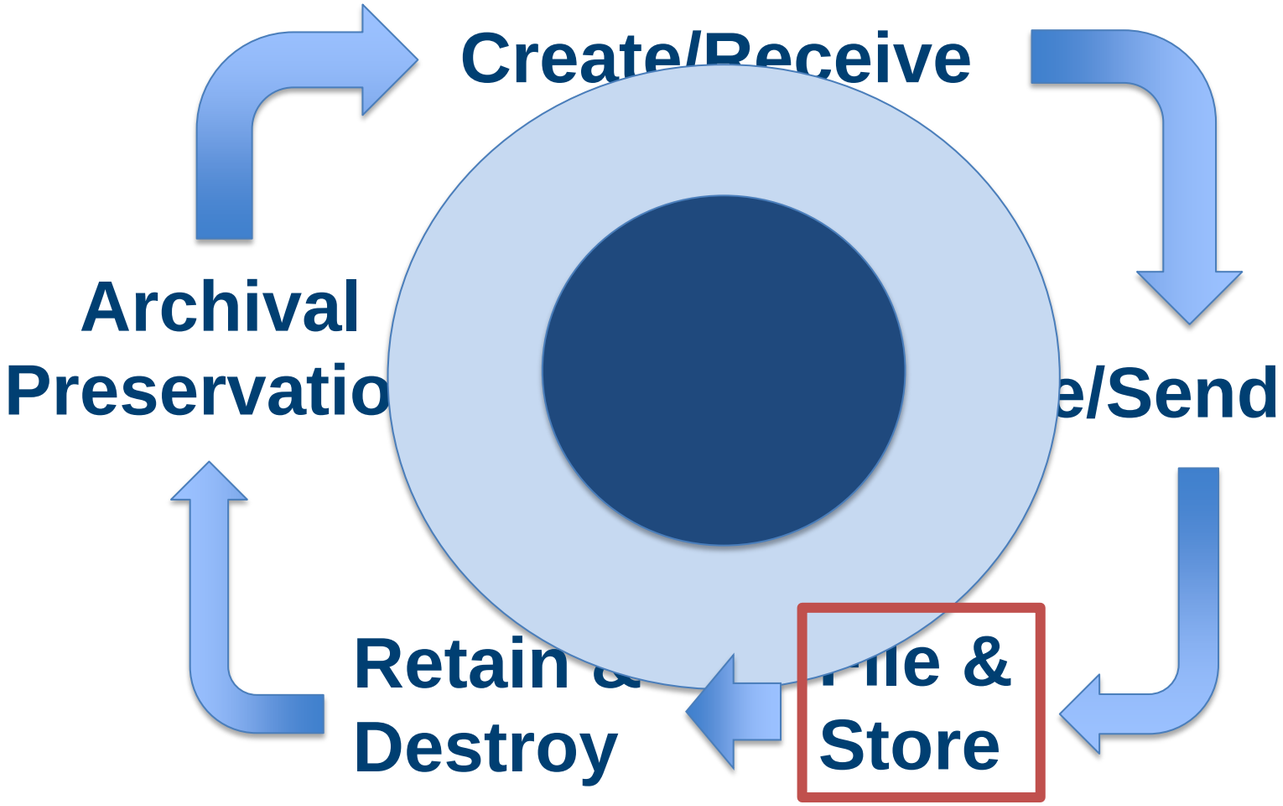

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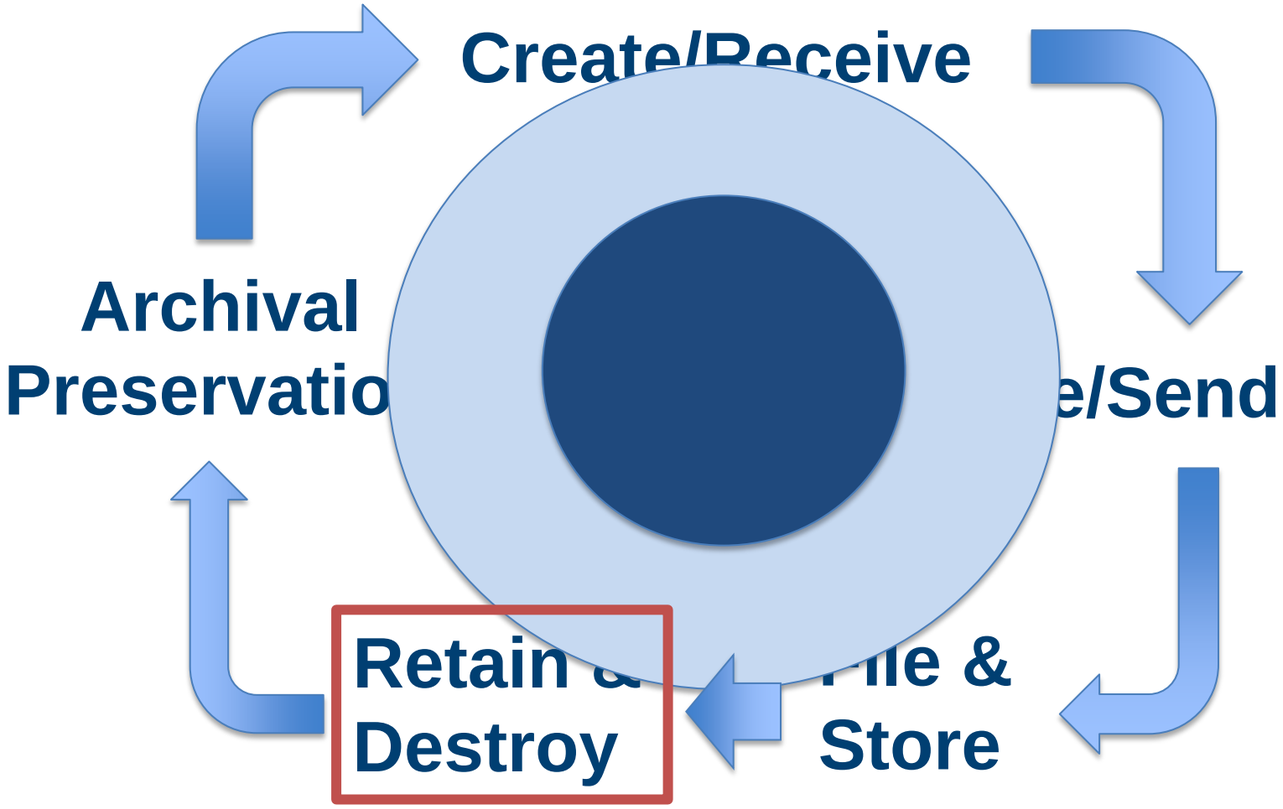

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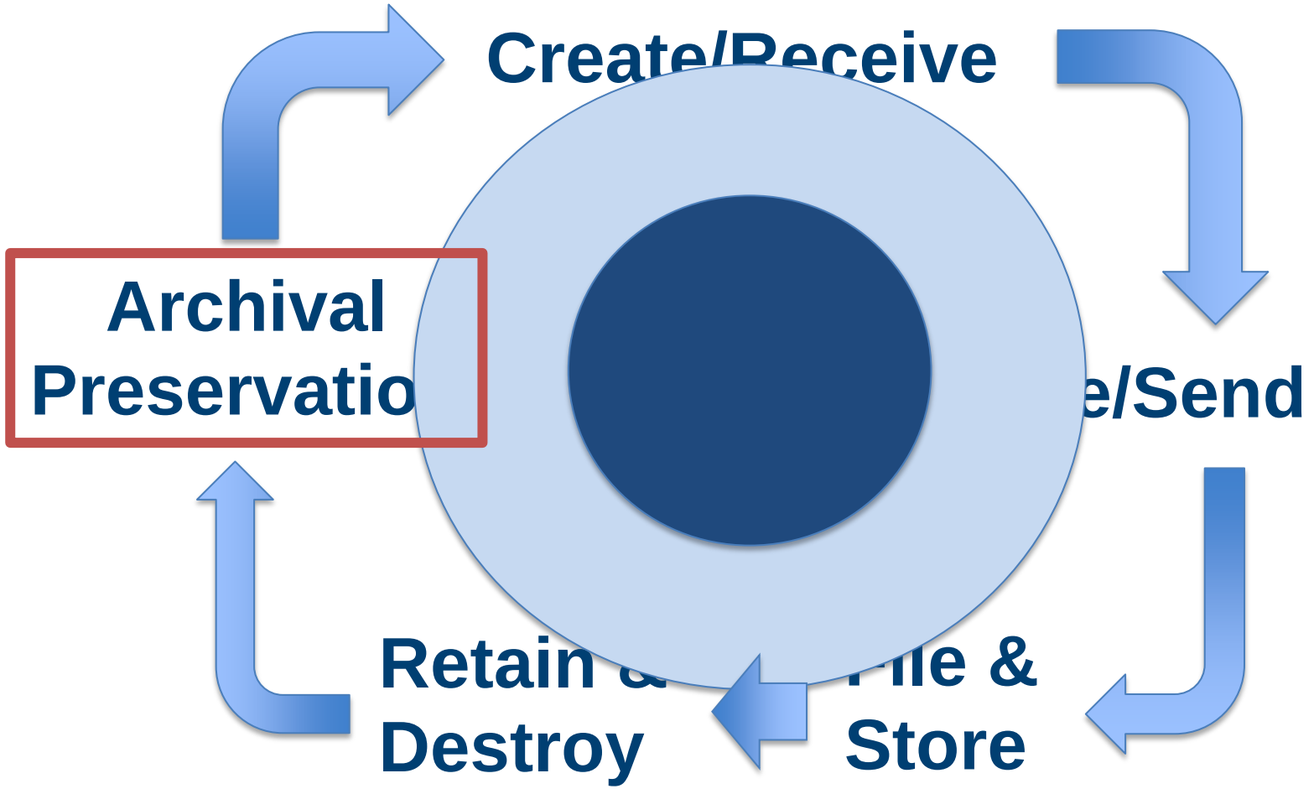

Records Categories

Records documenting the VHA unique, mission-related activities

Records documenting the VHA routine housekeeping support activities. Known as General Records Schedule GRS

- Paper Records
- Electronic Records
- Photographic Records
- Computer Punch Cards
- Cartographic Records
- Architectural Records
- Audiovisual Records
- Microform Records

Temporary, Permanent & Unscheduled Records

Records approved by NARA for destruction after a specified retention period

Records determined to have sufficient value to be preserved by NARA

Records whose disposition has yet to be determined by NARA. These records default to Permanent

Non-Record Material

Non-record materials are excluded from legal definition of records by 44 U.S.C. 3301 and fall into some of the following categories:

- Personal Papers
- Extra copies of documents
- Library and museum material, stocks of publications, catalogs, trade journals, & other publications
- Documents received that provide information but are not connected to the transaction of agency business
- Routing slips & tickler files

Leaving Federal Service

Government employees are required to take steps to ensure all Federal records are properly managed and preserved. Records must be appropriately identified and captured from:

- ❑ Email, social media, or electronic messaging accounts
- ❑ All internal and external advisory boards, committees, or councils in which you participated
- ❑ Reports to Congress and/or the President, speeches, testimonies, or major correspondence

Leaving Federal Service (Continued)

Any removal of information is subject to review by officials from your agency. Approval should be granted only if all of the following conditions are met:

- Removal would not adversely impact the official records of the agency
- Removal would be at no cost to the agency
- Materials do not contain classified national security information
- Information removed is not subject to the Privacy Act of 1974 (5 U.S.C. 552a)
- Disclosure of the information removed is not otherwise prohibited by law

Areas of Concern

- Personal E-mails
- Record Storage
- File Plans and Record Inventory
- Protection of Electronic Information Systems, Share Files and SharePoint Records

Use of Personal E-Mails

- In April 2015 the VA CIO, published a memorandum forbidding the use of personal e-mail to conduct government business.
- Fact Sheet was Created by the VHA records Management Council
- In January 2018 the VA OGC, published another memorandum again limiting the use of personal e-mail accounts to emergencies only. It also added additional requirements for IM's and text messaging.
- Note; current OGC memorandum provided.

Records Storage

- VA including VHA must meet NARA guidelines on the storage of Active and Inactive records.
- VHA records storage can be divided into 6 categories:
  - Inactive records, off-site storage
  - Inactive records, on-site storage
  - Active records, off-site storage
  - Active records (low-usage), on-site storage
  - Active records (high-usage), on-site storage
  - Temporary/transit records storage
- Note; Records Storage Fact Sheet Provided.

File Plan and Record Inventory

- Each Program Office, VAMC, Service Line, Department, Division, work Center and Office must have a file plan & Record Inventory.
- Responsibility for the completion of file Plan & Record Inventory falls on the supervisor, local records liaison and facility Records Manager.
- This is a living document, as record types are added and deleted the file plan and record inventory is updated. This provides the type of records, location and total amount of records by cubic feet.
- An official formal review is conducted annually these actions must be document
- These documents are inspection items and will be inspected by the NARA, VA IG, and VHA Privacy compliance Assessment team

Managing Share Files and SharePoint

- The VA does not have an Electronic Records Management Archives (ERMA) for unstructured records such as word.doc, EXCEL Spread Sheets, and or PowerPoints.
- By Default Share Files and SharePoint have become the storage point for electronic records.
- There is a need to reduce duplicate records, we do not need 50 copies of the same PowerPoint/create PowerPoint Libraries
- Create naming conventions for file names.
- Note; Share files and SharePoint Fact Sheet Provided.

Record Control Schedule 10-1

- All VHA Records Schedules are maintained within Record Control Schedule (RCS 10-1).
- All ORD and ORO primary program record schedules are found in Chapter 8 of RCS 10-1.
- Other administrative record types are maintained in other locations of RCS 10-1 such as personnel/employee, travel claims, training records.

Examples of ORD Records Part 1

8300

VA Field Facility Research Program

This section covers records relating to the administration of intramural research programs and conduct of individual research projects at VA field facilities, some of which are funded by VA research appropriation. The research programs at each VA field facility are a decentralized program under the facility's direction. Policies for the administration of research programs and conduct of research are set by ORD.

Examples of ORD Records Part 2

8300.1. Documentation of Required Activities.
These files include, but are not limited to: documentation of required education by research staff; protocol activities including documents created or used in submitting protocols for funding, approval status from required research review committees, status (e.g., active or completed) of protocols, and protocol funding source; and research related agreements, such as memorandums of understanding and Cooperative Research and Development Agreements (CRADAs).

Temporary; cutoff at the end of the fiscal year after final action or when superseded. Destroy 6 years after cutoff. (DAA-0015-2015-0004 item 0027)

8300.2. Research Accreditation.
Records related to acquiring and maintaining accreditation for components of the facility's research program. The accreditations are for such components as the HRPP and the animal research program. Records include, but are not limited to: initial and renewal applications; annual and interim reports; tracking of accreditation visits and outcomes; and correspondence to/from the Accrediting Organization.

Temporary; cutoff at the end of the fiscal year after accreditation cycle ends. Destroy 2 years after cutoff. (DAA-0015-2015-0004, item 0028)

Examples of ORD Records Part 3

8300.3. Research Publications.
Copies of publications resulting from funded and approved research activities.

Temporary; cutoff at the end of the fiscal year after publication. Destroy 6 years after cutoff. (DAA-0015-2015-0004, item 0029)

8300.4. Veterinarian Medical Unit Files.
Records include, but are not limited to, sanitation records, daily room checks, feed/bedding invoices, temperature tapes (for the cage washes and autoclaves), health surveillance reports, HVAC performance data, cage cards, mortality reports, pest control reports, animal order invoices, quality assurance records (RODAC plates, ADP tests, etc.) and related documentation.

Temporary; cutoff at the end of the fiscal year after final action. Destroy 3 years after cutoff. (DAA-0015-2015-0004, item 0030)

Examples of ORD Records Part 4

8300.5. Research Biosafety and Biosecurity Program Files.
Records related to research laboratory inspections, emergency response planning, information on chemicals or other hazardous substances, inventory of chemicals and other agents in use in research laboratories, and laboratory safety and security policies.

Temporary; cutoff at the end of the fiscal year after final action. Destroy 3 year(s) after cutoff. (DAA-0015-2015-0004, item 0031)

8300.6. Research Investigator Files.
Research records maintained by the investigator that span the entire lifecycle of the project and the records required by regulations such as the investigator's regulatory file. Records include, but are not limited to:

- Research protocol and all amended versions of the protocol; grant application; review committee correspondence (e.g., Institutional Review Board, Institutional Animal Care and Use Committee, Research & Development Committee) including documents approved by the review committees;
- Correspondence with ORD, regulatory entities, sponsor and/or funding source, correspondence;
- Case report forms and supporting data (including, but not limited to, signed and dated informed consent forms and HIPAA authorization forms);

There are another 10 or so items under this schedule.

Examples of ORD Records Part 5

Continue of 8300.6

- Monitoring and audit reports such as Data Safety Monitoring Board Reports and audits by oversight entities;
- Documents related to budget and funding;
- Other forms required by policy and regulation.

Temporary; cutoff at the end of the fiscal year after completion of the research project. Destroy 6 years after cutoff, may retain longer if required by other Federal regulations. (DAA-0015-2015-0004, item 0032)

Note; Dr. Cuccherini created an informational sheet involving the use of the new ORD Records Schedules.

Records Management Training

VA's Talent Management System (TMS) has created a records management training course that includes;

- Identify the scope and responsibilities of records management
- Recall the legal requirements for federal records management
- Identify what comprises a record
- Identify the records life cycle
- Identify records management roles and responsibilities at VA
- Recall how to locate more information when needed

Do you have questions or need special assistance in taking this training? Send an email to vaitwd@va.gov.

Records Management for Records Officers and Liaisons

Access this course on VA's Talent Management System

TMS # 3873736

Additional Information Points of Contact

- Matthew Staden, VHA Records Officer
  (202) 461-5509 Matthew.Staden@va.gov

- Jennifer Gary, VHA Program Office Records Manager
  (202) 461-6310, jennifer.gary@va.gov

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CHAPTER 8

OFFICE OF RESEARCH AND DEVELOPMENT

8000-8999

The Veterans Health Administration's (VHA) research program is an intramural program administered by the VHA Office of Research and

Development (ORD) and conducted at Veterans Administration (VA) medical facilities nationwide under the authority of Title 38 United States Code (U.S.C), 7303. Federal records and copies of working documents are produced within ORD and by all VA medical facilities conducting research. These records relate to the administration of the research programs and the conduct of research.

8000

General Program Records

This section covers records relating to ORD's general administration and operation of VA's intramural research programs and the conduct of research.

8000.1. ORD Subject Files.

Records generated by ORD related to management functions of organizational planning and structure, general policy and program matters, and informal discussions with Veterans Affairs (VA) officials on issues of concern or special interest. These records contain information on programs, activities, protocols, operations, budgets, position statements and related subject areas.

Temporary; cutoff at the end of the fiscal year after final action. Destroy no sooner than 3 years but no later than 6 years after cutoff. (DAA-0015-2015-0004, item 0001)

8000.2. Program Management Files.

Records generated by ORD services and programs in the course of ongoing program operations that are not covered elsewhere in the VHA Records Control Schedule. These files relate to program scope and responsibilities; program reviews and evaluations; extra-agency partnerships; scientific achievement award programs; infrastructure support activities; balancing research portfolios and budgets; establishing review boards; conducting staff meetings; and other program management activities.

[**NOTE:** Excluded are general administrative and routine housekeeping records, which are covered under the General Records Schedule and issued by NARA.]

Temporary; cutoff at the end of the fiscal year after final action. Destroy no sooner than 3 years but no later than 6 years after cutoff. (DAA-0015-2015-0004, item 0002)

8000.3. Congressional Relations Files.

Official reports prepared by ORD for Transmittal to members of Congress, Congressional Committees, or Congressional Staff.

PERMANENT. Cutoff at the end of the fiscal year after the material is presented to Congress. Transfer to NARA in 10 year blocks when youngest record is 20 years old. (DAA-0015-2015-0004, item 0003)

[**NOTE**: Transfer electronic records to the NARA for pre-accessioning 10 years after cutoff Transfer to the NARA for accessioning.]

8000.4. Briefing Records.

Materials prepared by ORD for the Under Secretary for Health, the Secretary of Veterans Affairs, or other VA officials to describe issues of concern or special interest, including materials for face-to-face briefings, presentations, activity reports, and issue briefs.

PERMANENT. Cutoff at the end of the fiscal year after the material is presented to the Under Secretary of Veterans Affairs or other VA officials. Transfer to NARA in 10 year blocks 20 years after youngest record closes. (DAA-0015-2015-0004, item 0004)

[**NOTE**: Transfer electronic records to the NARA for pre-accessioning 10 years after cutoff.]

8000.5. Field Correspondence Files.

Records documenting inquiries from medical field facility research offices, such as formal guidance related to interpretation of policy, required waivers for specific types of research and from specific policy requirements, review of policies or procedures being implemented by facilities, reports from the field on compliance matters that are duplicative of reports received by the Office of Research Oversight (ORO), and related matters.

Temporary; cutoff at the end of the fiscal year when superseded or obsolete. Destroy 1 year after cutoff or when no longer needed for administrative or reference purposes. (DAA-0015-2015-0004, item 0005)

8000.6. Education, Training and Outreach Files.

Materials developed by ORD to provide education, training, and information to specific audiences or the general public concerning ORD's areas of responsibility.

Temporary; cutoff at the end of the fiscal year when superseded or obsolete. Destroy 1 year after cutoff or when no longer needed for administrative or reference purposes. (DAA-0015-2015-0004, item 0006)

8050

Technology Transfer

This section covers records relating to ORD's implementation and administration of the Federal Technology Transfer Act of 1986. ORD is responsible for translating the results of worthy discoveries made by employees of VA into practice.

8050.1. Invention Disclosure Case Files.

Case files include a description of the invention, circumstances surrounding the invention, a certification form describing the use of Federal resources and related correspondence.

a. Invention disclosure for which a patent application was filed and issued.

Temporary; cutoff at the end of the fiscal year upon expiration of the patent. Destroy 2 years after cutoff. (DAA-0015-2015-0004, item 0007)

b. Invention disclosure for which no patent application was filed or no patent issued.

Temporary; cutoff at the end of the fiscal year upon expiration of the disclosure. Destroy 25 years after cutoff. (DAA-0015-2015-0004, item 0008)

8050.2. Patent Case Files.

Case files related to the application of a patent, patent prosecution, patent defense and patent infringement.

Temporary; cutoff at the end of the fiscal year upon expiration or abandonment of the patent. Destroy 5 years after all patents in that patent family expire. (DAA-0015-2015-0004, item 0009)

8050.3. Cooperative Agreement Files.

Agreements that address the management of jointly owned inventions, such as Cooperative Technology Administration Agreements and Inter-institutional Agreements, and related correspondence.

Temporary; cutoff at the end of the fiscal year after final action. Destroy 2 years after cutoff. (DAA-0015-2015-0004, item 0012)

8050.4. VA Confidential Disclosure Agreements.

These records consist of documents that address VA providing confidential information to another entity or receiving confidential information from another entity.

Temporary; cutoff at the end of the fiscal year upon expiration of the agreement. Destroy 5 years after cutoff. (DAA-0015-2015-0004, item 0011)

8050.5. Technology Transfer Agreements.

Agreements that transfer rights to intellectual property and/or materials to or from VA and to or from third parties, such as license agreements, material transfer agreements, government use licenses and related agreements.

Temporary; cutoff at the end of the fiscal year when the terms of the agreement expire. Destroy 2 years after cutoff. (DAA-0015-2015-0004, item 0012)

8050.6. License Transmittal Files.

Transmittals related to licenses including annual reports due under the license, royalty payments to VA, royalty distributions by VA to inventors and others, and all other correspondence connected to licenses.

Temporary; cutoff at the end of the fiscal year after final action. Destroy 2 years after cutoff. (DAA-0015-2015-0004, item 0013)

8100

Non Profit Research and Education Corporations (NPC)

This section covers records relating to ORD's oversight and guidance of Non Profit Research and Education Corporations (NPC) established at VA medical centers. NPCs exist to provide VA medical centers with flexible funding mechanisms to support VA's research program. This funding mechanism is other than those funds received by VA from VA's Congressional appropriation. NPCs associated with the VA are non-

government entities created pursuant to title 38 U.S.C. 7361-7366. NPC business records are not subject to disclosure under the Freedom of Information Act (FOIA).

8100.1. Annual Reports from NPCs.

NPCs are required to submit an annual report that details their operations, activities and accomplishments during the previous year. The annual report consists of, but is not limited to, signed certification, independent auditor's report, audited financial statements, IRS Form 990 or 990EZ with schedules, and related revenue and expense information.

Temporary; cutoff at the end of the fiscal year when all annual reports are received from NPCs. Destroy 6 years after cutoff. (DAA-0015-2015-0004, item 0014)

8100.2. Audit Case Files.

Files related to the audit of NPCs by independent auditors and government auditors to ensure internal controls are in place to protect its assets and operate in compliance with all applicable laws and regulations. Records include, but are not limited to: a final review report; on- and off- site reviews; questionnaires; reviews of board minutes, annual reports and any corrective action plans submitted by NPCs; documentation of reportable or significant adverse events; and related correspondence

Temporary; cutoff at the end of the fiscal year when report is completed. Destroy 6 years after cutoff. (DAA-0015-2015-0004, item 0015)

8150

Intramural Research Funding

This section covers records relating to ORD's administration and management of VA appropriated funds to promote research, ensure adequate resources, and support other research-related activities connected to VA research programs that benefit Veterans. All requests for research-related awards are submitted by VA facilities to ORD for funding consideration.

8150.1. Requests or Solicitations for Research.

Documents developed by ORD to request proposals or solicitations for scientific research and related program components.

Temporary; cutoff at the end of the fiscal year when the request or solicitation is superseded, obsolete, or withdrawn. Destroy 5 years after cutoff. (DAA-0015-2015-0004, item 0016)

8150.2. Approved or Funded Case Files.

All proposals, applications or nominations submitted by VA facilities that are approved and funded. Records include, but are not limited to: the original submission with funding requirement; recommendation by the Merit Review Board; approved plans and protocols; clearances and authorizations; progress reports and project modifications; committee reports and site visit reports; and related correspondence and documents as applicable to each funding program.

[**NOTE**: This schedule superseded the authority of NCI-15-82-7, Item No. 12 A-1]

Temporary; cutoff at the end of the fiscal year the proposed research project is completed. Destroy 6 years after cutoff, may retain longer if necessary. (DAA-0015-2015-0004, item 0017)

8150.3. Not Approved, Withdrawn or Appealed Case Files.

All proposals, applications or nominations submitted by VA facilities not approved for funding, withdrawn, or funding decision appealed. Records include, but are not limited to: the original submission, supporting documents, recommendation by the Merit Review Board, evaluation and decision connected to an appeal, and related correspondence with the VA facility.

Temporary; cutoff at the end of the fiscal year after final decision or action. Destroy no sooner than 3 years but no later than 5 years after cutoff. (DAA-0015-2015-0004, item 0018)

8150.4. Merit Review Federal Advisory Committee Act (FACA) Committee Files.

Records related to advisory committees established by agency authority and subject to the FACA that engage in scientific peer review of VA research-related activities. Records include, but are not limited to: Federal Register Notices, original and renewed committee charters, nomination packages, conflict of interest statements, membership rosters, meeting agendas and minutes, certificates of appreciation, and related documents. These records are maintained by the individual service areas and programs in ORD.

Temporary; cutoff at the end of the fiscal year when the original, renewed or amended committee charter expires. Destroy 10 years after cutoff. (DAA-0015-2015-0004, item 0019)

[NOTE 1: For advisory committees subject to FACA that do not engage in scientific peer review, please refer to the General Records Schedule issued by NARA.]

[NOTE 2: Request an exception to GRS 26 for the permanent portion of the FACA records.]

8200

VA Central Institutional Review Board (IRB) and VA Central Office (VACO) Human Research Protection Program (HRPP)

This section covers records relating to VA's adoption and implementation of the Federal Policy (Common Rule) for the Protection of Human Subjects (1991) that requires assurances and IRB approval of human subjects research conducted by VA to protect the rights and welfare of human research subjects. ORD is responsible for the review, management and oversight of the VA Central IRB and Human Research Protection Program (HRPP) for VA Central Office.

8200.1. VA Central IRB Protocol Files.

Files related to the review and oversight of human subjects research protocols submitted by VA investigators to the VA Central IRB. Records include, but are not limited to: the application to the VA Central IRB; research protocol and amendments; case report forms; informed consent template and HIPAA Authorization template; reports of adverse events, complaints and deviations from IRB-approved protocol; data and safety monitoring reports; research findings to date; and all relevant documents and related correspondence between the VA Central IRB and the investigators in the review of an associated protocol.

a. Protocols Approved by VA Central IRB.

Temporary; cutoff at the end of the fiscal year after the research project has been completed or terminated. Destroy 6 years after cutoff. (DAA-0015-2015-0004, item 0020)

b. Protocols Disapproved by VA Central IRB or Withdrawn by the Investigator.

Temporary; cutoff at the end of the fiscal year after the research project has been disapproved or withdrawn. Destroy 3 years after cutoff. (DAA-0015-2015-0004, item 0021)

8200.2. VA Central IRB Operating Files.

Files related to the ongoing operations of the VA Central IRB.

a. Implementation Records.

Records include, but are not limited to: agreements by VA facilities to use the VA Central IRB as the IRB of record; standard operating procedures, policies and educational materials; documents assessing the effectiveness of the IRB and compliance with all regulatory requirements; and related correspondence not specific to an individual protocol.

Temporary; cutoff at the end of the fiscal year after final action, expiration, or when superseded. Destroy 3 years after cutoff. (DAA-0015-2015-0004, item 0022)

b. Committee Records.

Records include, but are not limited to: VA Central IRB membership rosters, appointment letters, committee minutes, curricula vitae, training records and related documentation.

Temporary; cutoff at the end of the fiscal year after final action, expiration, or when superseded. Destroy 6 year(s) after cutoff. (DAA-0015-2015-0004, item 0023)

8200.3. VACO Human Research Protection Program (HRPP) Files.

Files related to the operations of the Human Research Protection Program (HRPP) for VA Central Office and its Federal-wide Assurance. Records include, but are not limited to: assurance application submitted to ORO and HHS Office of Human Research Protection (OHRP) for review and approval; documents related to the registration of the VA Central IRB; VACO HRPP site visit reports from entities such as the Food and Drug Administration (FDA), OHRP, Inspector General, and ORO; reports of remedial plans and corrective actions taken to address any deficiencies; and all related documentation that demonstrates efforts to come into compliance with applicable policy and regulations.

Temporary; cutoff at the end of the fiscal year after final action, expiration, or when superseded. Destroy 7 years after cutoff. (DAA-0015-2015-0004, item 0024)

8250

Human Research Protection Program (HRPP) Accreditation

This section covers records relating to ORD's oversight of HRPP accreditation activities in VA facilities. Accreditation of a HRPP is obtained through the Accrediting Organization, which is an independent body that has developed standards of performance to

assess compliance with the prevailing ethical, professional, and regulatory guidelines for the conduct of human subjects research.

8250.1. Accreditation Application Case Files.

Documents obtained or created by ORD, such as: initial and renewal applications; annual and interim reports; debriefing interview notes, agendas and minutes of meetings with the Accrediting Organization; tracking of accreditation visits and outcomes; and correspondence to/from the Accrediting Organization, HRPPs and affiliated institutions related to obtaining and maintaining HRPP accreditation.

Temporary; cutoff at the end of the fiscal year after accreditation cycle expires. Destroy 3 years after cutoff. (DAA-0015-2015-0004, item 0025)

8250.2. Accrediting Organization Contract Files.

Files related to management of the Accrediting Organization under contract with VA to administer HRPP accreditation in VA facilities. Records consist of, but are not limited to: evaluation of contract performance including deliverables, reports, and problems or issues conveyed to the Accrediting Organization regarding their assessment of individual field facility HRPP's; and other correspondence to/from the Accrediting Organization.

Temporary; cutoff at the end of the fiscal year when the contract expires. Destroy 7 years after cutoff. (DAA-0015-2015-0004 Item 0026)

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VA Field Facility Research Program

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8300.1. Documentation of Required Activities.

These files include, but are not limited to: documentation of required education by research staff; protocol activities including documents created or used in submitting protocols for funding, approval status from required research review committees, status (e.g., active or completed) of protocols, and protocol funding source; and research related agreements, such as memorandums of understanding and Cooperative Research and Development Agreements (CRADAs).

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Copies of publications resulting from funded and approved research activities.

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- Correspondence with ORD, regulatory entities, sponsor and/or funding source, correspondence;
- Case report forms and supporting data (including, but not limited to, signed and dated informed consent forms and HIPAA authorization forms);
- Documentation on each subject including informed consent, interactions with subjects by telephone or in person, observations, interventions, and other data relevant to the research study;
- Data collected during the research including photos, video recordings, and voice recording, all derivative data, and derivative databases;
- Lists of all subjects entered in the study and the cross-walk connecting the subjects name with the code used for each subject; subject compensation records;
- Reports of adverse events, complaints and deviations from IRB-approved protocol;
- Data analyses;
- Codes and keys used to de- identify and re-identify subjects' PHI;
- Reports (including, but not limited to, abstracts and other publications);
- Research study correspondence not involving ORD, Office of Research Oversight (ORO), sponsor, or funding source;
- Correspondence and written agreements with the funding source or sponsor, ORD and applicable oversight entities such as IRB, Research and Development (R&D) Committee, VA Office of Research and Oversight (ORO), VA Office of Human Research Protections (OHRP) and FDA;
- Research study correspondence not involving ORD, Office of Research Oversight (ORO), sponsor, or funding source;
- Signed and dated forms submitted to regulatory agencies;
- Investigator's brochure;
- Records related to the investigational drugs such as drug accountability records;
- Monitoring and audit reports such as Data Safety Monitoring Board Reports and audits by oversight entities;
- Documents related to budget and funding;
- Other forms required by policy and regulation.

Temporary; cutoff at the end of the fiscal year after completion of the research project. Destroy 6 years after cutoff, may retain longer if required by other Federal regulations. (DAA-0015-2015-0004, item 0032)

[**NOTE**: If the investigator leaves VA, all research records are retained by the VA facility where the research was conducted. If the grant is ongoing and the investigator leaves one VA facility to go to another VA facility, the investigator must obtain approval for a copy of relevant materials to be provided to the new VA facility's research office. The investigator is not the grantee, nor does the investigator own the data.]

8300.7. Research Review Committee and Subcommittee Protocol Files.

Committee and subcommittee files related to the review and oversight of research protocols submitted by VA investigators for research conducted at the field facility. The committees and subcommittees include, but are not limited to, the Research & Development (R&D) Committee, the Institutional Review Board (IRB), the Institutional Animal Care and Use Committee (IACUC), the Subcommittee on Research Safety, and the Institutional Biosafety Committee. Records include, but are not limited to, the application to the VA Central IRB; research protocol and amendments; case report forms; reports of adverse events, complaints and deviations from the approved protocol; data and safety monitoring reports; research findings to date; and all relevant documents and related correspondence between the committee and the investigators in the review of an associated protocol.

a. Protocols Approved by the Committee or Subcommittee.

Temporary; cutoff at the end of the fiscal year after the research project has been completed or terminated. Destroy 6 years after cutoff. (DAA-0015-2015-0004, item 0033)

b. Protocols Disapproved by the Committee or Subcommittee or Withdrawn by the Investigator.

Temporary; cutoff at the end of the fiscal year after the research project has been disapproved or withdrawn. Destroy 3 years after cutoff. (DAA-0015-2015-0004, item 0034)

8300.8. Research Review Committee or Subcommittee Operating Files.

Files related to the ongoing operations of the review committees or subcommittees.

a. Implementation Records. Records include, but are not limited to: agreements by VA facilities to use a review committee or subcommittee from the affiliated university or other entity; standard operating procedures, policies and educational materials; documents assessing the effectiveness of the review committees or subcommittees and compliance with all regulatory requirements; and related correspondence not related to specific protocols received or created during the course of VA Central IRB operations.

Temporary; cutoff at the end of the fiscal year after final action, expiration, or when superseded. Destroy 3 years after cutoff. (DAA-0015-2015-0004, item 0035)

b. Review Committee or Subcommittee Records. Records include, but are not limited to, membership rosters, appointment letters, curricula vitae, training records, meeting minutes and related documentation.

Temporary; cutoff at the end of the fiscal year after final action, expiration, or when superseded. Destroy 6 years after cutoff. (DAA-0015-2015-0004, item 0036)

8500

Office of Research Oversight (ORO)

Public Law 108-170, Veterans Health Care, Capital Asset, and Business Improvement Act of 2003 established by statute in the Veterans Health Administration an "Office of Research Oversight."

ORO serves as the primary advisor to the Under Secretary for Health on matters of compliance, assurance, and technical assistance in human subject protections, laboratory animal welfare, research safety, research laboratory security, research information security, facility research compliance officer education, research misconduct, and government suspension and debarment for research impropriety. ORO conducts a variety of oversight activities to fulfill its mandate.

8500.1. Case Records Containing Official Determinations.

ORO records, including case reports and electronic databases containing official determinations (e.g., findings and required actions) related to ORO's compliance oversight, technical assistance, and quality assurance activities.

PERMANENT. Cutoff 7 years after relevant ORO actions are completed or 7 years after all relevant claims for or against VA are finalized, whichever is later. Transfer electronic records to NARA for pre-accessioning 5 year(s) after cutoff. Transfer to NARA 25 year(s) after cutoff. (DAA-0015-2015-0002, item 0001)

[NOTE: This schedule superseded the authority of XLVII-12, NARA job # (N1-0015-07-003, item 4)]

8500.2. Evidential Records.

Records that provide critical evidence in support of ORO determinations and/or actions that may be disputed or subjected to litigation.

Temporary; destroy 7 years after all relevant ORO actions are completed or 7 years after all relevant claims for or against VA are finalized, whichever is later. (DAA-0015-2015-0002 item 0002)

8500.3. Policy and Guidance Records.

Directives, handbooks, guidance, training materials, and standard operating procedures developed by ORO.

Temporary; destroy 7 years after documents are rescinded or superseded or 7 years after all relevant claims for or against VA are finalized, whichever is later. (DAA-0015-2015-0002 item 3)

[NOTE: This schedule superseded the authority of XLVII-13, NARA Job # (N1-015-07-3, item 11)]

8500.4. Formal Briefing Records.

Materials prepared by ORO for the Under Secretary for Health, the Secretary of Veterans Affairs, or other VA officials to describe issues of concern or special interest, including materials for formal face-to-face briefings, presentations, activity reports, and issue briefs.

PERMANENT. Cutoff at end of year in which documents are delivered to the relevant official or all relevant claims

for or against VA are finalized, whichever is later. Transfer electronic records to NARA for pre-accessioning 5 year(s) after cutoff. Transfer paper to NARA in 5 year blocks 25 year(s) after youngest record in block is 5 years old. (DAA-0015-2015-0002 item 004)

[**NOTE**: This schedule superseded the authority of XLVII-4 NARA Job# (N1-015-07-3, item 3)]

8500.5. Congressional Relations Records.

Quarterly and annual reports to Congress as required by statute, special reports created at the request of Congress, written testimony, and supporting materials for face-to-face briefings of Members of Congress and Congressional staff.

PERMANENT. Cutoff annually after documents are delivered to Congress. Transfer to NARA in 5 year blocks 15 year(s) after closure of youngest record in block. (DAA-0015-2015-0002 item 0005)

[**NOTE**: This schedule superseded the authority of XLVII 8a/8b NARA Job # (N1-015-07-03, items 6a and 6b)]

8500.6. Transitory Records with Limited Historical Value.

All records not specifically covered under other subsections of this manual.

Temporary; destroy when no longer needed. (DAA-0015-2015-0002 item 0006)

[**NOTE**: This schedule superseded the following schedule in the past RCS 10-1; XLVII-3a, XLVII-5a, XLVII-6, XLVII-7a, XLVII-10, XLVII-13a & 13b, XLVII-15a of NARA Job # (N1-15-07-3, items 1a, 3a, 4, 5a, 9, 12a & b and 14a)]

8500.7. Duplicate Records.

Duplicate copies of records retained by ORO.

Temporary; destroy when no longer needed. (DAA-0015-2015-0002 item 0007)

[**NOTE**: Superseded authority XLVII-17 of old RCS 10-1]

8500.8. Reference Documents.

Materials retained solely for reference or informational purposes.

Temporary; destroy when no longer needed. (DAA-0015-2015-0002 item 0008)

[**NOTE**: Superseded authority XLVII-14 of old RCS 10-1]

8600

VHA Office of Research Oversight Research Case Files

Public Law 108-170, Veterans Health Care, Capital Asset, and Business Improvement Act of 2003 established by statute in the Veterans Health Administration an "Office of Research Oversight." ORO serves as the primary advisor to the Under Secretary for ·Health on matters of compliance and assurance in human subject protections, laboratory animal welfare, research safety and security, and research impropriety and misconduct. ORO conducts a variety of oversight activities to fulfill its responsibilities and legislative mandate. ORO is organizationally structured under the Office of the Under Secretary for Health, Veterans Health Administration (VHA), VHA Central Office, Department of Veterans Affairs (VA). ORO provides program directions through its Central Office and strategically located Regional Offices. ORO oversees VHA's research misconduct program and is responsible for the oversight of suspensions and Government wide debarments for research impropriety.

8600.1. Research Misconduct Case Records Involving Allegations Referred for an Inquiry and/or Investigation. (see note below 1c)

a. Research Misconduct Case Records with Significant Historical Value that are Maintained by ORO Involving Allegations that are Referred for an Inquiry or Investigation. Records with significant historical value that are maintained by ORO in the course of ORO's oversight of research misconduct cases, including, but not limited to, submitted written allegations, threshold determinations/preliminary assessments of allegations, final (issued) Inquiry and Investigation reports, Inquiry and Investigation report attachments and exhibits that are deemed significant by ORO, final (corrected) transcripts or recordings of interviews conducted during an Inquiry or Investigation, copies of research records or relevant sections thereof, final (issued) notifications and decisional letters, written appeals, and case information sheets (or equivalent case summary documents).

PERMANENT. Transfer to FRC 7 years after the case is closed or 7 years after all claims for or against VA related to the matter are finalized, whichever is later. Transfer to NARA in 5 year blocks 25 year(s) after case closure. (DAA-0015-2014-0001 item 0001)

b. Research Misconduct Case Records with Minimal Historical Value that are Maintained by ORO Involving Allegations Referred for an Inquiry and/or Investigation. Records with minimal historical value that are maintained by ORO in the course of ORO's oversight of research misconduct cases, including, but not limited to, transitory or working papers such as draft versions of documents, e-mail correspondence, telephone logs, notes, and other records not specifically covered by Item XLVII-1a.

Temporary; destroy 7 year(s) after case is closed or after all claims for or against the VA related to this matter are finalized, whichever is later. (DAA-0015-2014-0001 item 0002)

c. Research Misconduct Case Records Maintained by VA Medical Centers and VHA Offices Other than ORO Involving Allegations Referred for an Inquiry and/or Investigation. Records created and maintained in the course of responding to allegations of research misconduct, including, but not limited to, submitted written allegations, threshold determinations/preliminary assessments of allegations, Inquiry and Investigation reports, all Inquiry and Investigation report attachments and exhibits, transcripts or recordings of interviews conducted during an Inquiry or Investigation, case-related evidence, copies of research records, notifications and decisional letters, and written appeals.

Temporary; destroy 7 year(s) after the case is closed or after all claims for or against VA related to the matter are finalized, whichever is later (DAA-0015-2014-0001 item 0003)

[**NOTE**: This item has superseded item XLVII-1 in old RCS 10-1 manual, NARA Job # N1-015-06-1, Item 1.]

8600.2. Research Misconduct Case Records Involving Allegations that are Not Referred for an Inquiry and/or Investigation.

a. Research Misconduct Case Records Maintained by ORO. Records maintained by ORO in the course of ORO's oversight of research misconduct cases, including, but not limited to, submitted written allegations, threshold determinations/preliminary assessments of allegations, copies of research records or relevant section thereof, final (issued) notifications and decisional letters, case information sheets (or equivalent case summary documents), draft versions of documents, e-mail correspondence, telephone logs, notes, and other records.

Temporary; destroy 7 year(s) after case is closed or' after all claims for or against VA related to the matter are finalized, whichever is later. (DAA-0015-2014-0001 item 0004)

b. Research Misconduct Case Records Maintained by VA Medical Centers and VHA Offices Other than ORO. Records created and maintained in the course of responding to allegations of research misconduct, including, but not limited to, submitted written allegations, threshold determinations/preliminary assessments of allegations, case-related evidence, copies of research records, and notifications and decisional letters.

Temporary; destroy 7 year(s) after case is closed or after all claims for or against VA related to the matter are finalized, whichever is later. (DAA-0015-2014-0001 item 0005)

8600.3. Case Records Maintained Throughout VHA for Government-wide Suspensions and Debarments Based on Research Impropriety.

This item pertains to records that are created and/or used as a result of a recommendation to suspend or debar individuals from participating in Government-wide non-procurement activities based on research impropriety. The records are maintained by various VHA offices and at various locations, including VA medical facilities, VISN offices, ORO Central and Regional Offices, and VA Central Office.

[**NOTE**: Where applicable, the records are protected from disclosure by exemptions to the Freedom of Information Act (5 United States Code (U.S.C. 552(b)), the Privacy Act (5 U.S.C. 552a), 38 U.S.C. 5701, 5705, and 7332, and the HIPAA Privacy Rule (45 CFR Parts 160 and 164).]

a. Suspension and Debarment Case Records with Significant Historical Value that are Maintained by ORO. Records with significant historical value that are created or maintained by ORO in the course of ORO's oversight or making of recommendations to institute a Government-wide suspension or debarment based on research impropriety, including, but not limited to, the underlying written recommendation for suspension Electronic Records or debarment, final (issued) reports and other documents resulting from a fact finding process that support the recommendations and decisions, transcripts or recordings of interviews and

proceedings; documentary evidence deemed significant for retention by ORO, final (issued) notifications and decisional letters, written requests for reconsideration of decisions, and case information sheets (or equivalent case summary documents).

PERMANENT. Transfer to FRC 7 years after the case is closed or 7 years after ·all claims for or against VA related to the matter are finalized, whichever is later. Transfer to the NARA in 5 year blocks 25 year(s) after case closure. (DAA-0015-2014-0001 item 0006)

b. Suspension and Debarment Case Records with Minimal Historical Value that are Maintained by ORO. Records with minimal historical value that are maintained by ORO in the course of ORO's oversight or making of recommendations to institute a Government-wide suspension or debarment based on research impropriety, including, but not limited to, transitory or working papers such as draft versions of documents, e-mail correspondence, telephone logs, notes, and other records not specifically covered by Item XLVII-18a.

Temporary; destroy 7 year(s) after the case is closed or after all claims for or against VA related to the matter are finalized, whichever is later. (DAA-0015-2014-0001 item 0007) [**NOTE**: This item superseded item XLVII-18a.]

c. Suspension and Debarment Case Records Maintained by VA Medical Centers and VHA Offices Other than ORO. Records created and maintained in the course of recommending or instituting a Government wide suspension or debarment based on research impropriety, including, but not limited to, the underlying written recommendation for suspension or debarment,

d. Reports and other documents resulting from a fact-finding process that support the recommendations and decisions, transcripts or recordings of interviews and proceedings, documentary evidence, notifications and decisional letters, and written requests for reconsideration of decisions.

Temporary; destroy 7 year(s) after the case is closed or after all claims for or against VA related to the matter are finalized, whichever is later. (DAA-0015-2014-0001 item 0008)

September 2015

Health Information Management
Office of Informatics and Analytics

Fact Sheet
VHA Requirements for Records Storage

BACKGROUND

Veterans Administration Medical Centers (VAMCs), Program Offices, and Veterans Integrated Service Networks (VISNs)are required to maintain and store many different types of VA records. The VAMC Records Manager is responsible for meeting the records storage requirements for all facility-generated records. These records may include but are not limited to: patient and employee health records, financial records, facility drawings, and research protocol records. Records can be further subdivided into categories: active or inactive and temporary or permanent. This Fact Sheet explains the requirements for VHA records storage. Additional information on records may be found in VHA Records Control Schedule (RCS) 10-1 or the National Archives and Records Administration (NARA) General Records Schedule (GRS).

GUIDANCE

The requirements for records storage are determined by the National Archives and Records Administration (NARA) in 36 CFR 1234. Due to the technical nature of 36 CFR 1234, if further clarification is needed, it is suggested that VAMC Records Managers refer vendors, facility engineering and safety managers to the NARA standards.

VHA records storage can be divided into 6 categories:
1. Inactive records, off-site storage
2. Inactive records, on-site storage
3. Active records, off-site storage
4. Active records (low-usage), on-site storage
5. Active records (high-usage), on-site storage
6. temporary/transit records storage

1. INACTIVE RECORDS, OFF-SITE STORAGE: These are records that are no longer required for their original purpose such as patient care or a business need but cannot be destroyed due to the requirements of VHA RCS (RCS) 10-1 or GRS. These records are normally stored at an off-site facility in one of three places: Department of Veterans Affairs Records Center & Vault (RC&V) located in Neosho, Missouri; National Archives & Records Administration (NARA) Federal Records Centers (FRC); and/or commercial off-site records storage a center that meets the records storage standards. (Examples of these records are closed inactive health records, financial records, and long-term temporary records that have not aged out.)

- For the VA Records Center and Vault User's Guide see https://vaww.rrs.aac.va.gov/.
- For NARA Federal Records Centers see http://www.archives.gov/frc/.
- For commercial off-site storage facilities an agency must provide documentation to NARA that the 36 CFR 1234 records storage standards are met. Required documentation consists of:

    1. A completed 36 CFR 1234 inspection checklist
    2. A report under seal of a licensed fire protection engineer that the facility complies with the standards
    3. A personal statement from the facility Records Manager certifying that the facility under consideration is 36 CFR 1234 compliant

The facility Records Manager shall request that a representative of the commercial facility being considered complete the inspection checklist and ask for a fire engineer's report that speaks to the points noted in 1234.32(3). The documents should be sent by the vendor to the facility Records Manager who subsequently sends them to NARA. The personal statement can be in the e-mail message block that also transmits the checklist and fire engineer's report to NARA. [See File 3 of NARA's online Records Storage Facility Standards Toolkit]

REQUIREMENT: Annually the facility Records Manager will ensure that a commercial records storage facility continues to meet the 36 CFR 1234 requirements by conducting a site visit to determine if any change to where the records are stored has occurred since the last visit. Examples include a change to the structure, any change to the climate control or fire suppression systems, or if additional storage space was added to the building. The Temporary Records Storage Basic Checklist (Attachment A) can be utilized for documentation of monitoring of the basic requirements for commercial off-site records storage. Additionally, the Records Manager and/or service line/program office is required to maintain a finding aid to locate and retrieve all inactive records in off-site records storage facilities (RC&V, NARA facilities, or a commercial facility). Examples of finding aids include box inventory listings maintained by accession number and transfer of health records utilizing the VistA Record Tracker software.

NOTE: The NARA web-site outlines the required documents for obtaining permission to use Commercial off-site storage. The request package will be sent to the VHA Records Management Program Office, Health Information Management, Health Information Governance (10P2C) for routing through the VA Records Management Office to NARA.

Department of Veterans Affairs
Health Information Governance (10P2C) Health Information Management
Attn: VHA Records Officer
810 Vermont Avenue NW
Washington, DC 20420

2. INACTIVE RECORDS, ON-SITE STORAGE: The primary difference between inactive records stored off-site versus on-site is the location of the storage facility. Storing inactive records on-site is not recommended. Such areas are typically called records staging or holding areas. These areas are traditionally at the highest risk of loss due to the fact that these records are not in active use and often times are not being monitored. These records can be exposed to environmental changes, pests (insects) and vermin (mice, rats, and other rodents) for a prolonged period of time before being discovered. [See File 4 of NARA's online Records Storage Facility Standards Toolkit.]

REQUIREMENT: If the VAMCs, program offices, and VISNs store inactive records on-site, the area must meet the requirements of 36 CFR 1234.10, .12 and .14 as appropriate. Inactive records maintained in on-site storage shall continue to be listed on the facility master, as well as service-line/program office records inventory and file plans. The Temporary Records Storage Basic Checklist (Attachment A) can be utilized for documentation of monitoring of on-site records storage.

NOTE: It is highly recommended that VAMCs, program offices and VISNs utilize either the Department of Veterans Affairs Records Center & Vault (RC&V) or NARA Federal Records Centers (FRCs) for storing inactive records off-site.

3. ACTIVE RECORDS, OFF-SITE STORAGE: There are times when it makes financial sense to store active records in off-site storage. The VA Records Center & Vault (RC&V) in Neosho, Missouri does not accept active records. NARA Federal Records Centers (FRC) and commercial records centers will accept active records. Storing active records can become costly if the records must be pulled back to the VHA facility on a regular basis and then returned to the storage facility. Considerations: (1) how often are the records needed at the VHA facility; (2) are the records affected by a current records hold/freeze; (3) how difficult is the process to return the records to the facility; (4) distance to the facility; (5) necessity to purge inactive records and ship to long-term storage, etc.

REQUIREMENT: If active records are stored off-site in a NARA Federal Records Center (FRC) or a commercial records center, these facilities must meet the 36 CFR 1234 requirements. If a commercial records center is utilized, the facility Records Manager must provide documentation to NARA that the 36 CFR 1234 records storage standards are met. The required documentation includes:

1. A completed 36 CFR 1234 inspection checklist
2. A report under seal of a licensed fire protection engineer that the facility complies with the standards
3. A personal statement from the facility Records Manager certifying that the facility under consideration is 36 CFR 1234 compliant

The Records Manager shall request that a representative of the commercial facility being considered complete the inspection checklist and ask for a fire engineer's report that speaks to the points noted in 1234.32(3). The materials shall be sent by the vendor to the facility Records Manager who subsequently sends the materials to NARA. The personal statement can be in the e-mail message block that also transmits the checklist and fire engineer's report to NARA. [See File 3 of NARA's online Records Storage Facility Standards Toolkit.]

Annually the facility Records Manager will ensure that a commercial records storage facility continues to meet the 36 CFR 1234 requirements by conducting a site visit to determine if any change to where the records are stored has occurred since the last visit. Examples include a change to the structure, any change to the climate control or fire suppression systems, or if additional storage space was added to the building. The Temporary Records Storage Basic Checklist (Attachment A) can be utilized for documentation of monitoring of the basic requirements for commercial off-site records storage. Active records stored at either a NARA FRC or a commercial facility shall continue to be listed on the facility master, as well as service line/program office records inventory and file plan.

4. ACTIVE RECORDS (LOW-USAGE), ON-SITE STORAGE: These are active records stored in locations with the sole purpose of storing records. These areas are un-manned with limited employee access. These records are normally located outside the view of employees to ensure security and safety of the records. These records can include such records as research protocol records or financial records, which are long term temporary records. Low-use, active records maintained in on-site storage are traditionally at a high risk of loss due to lack of oversight and control of the records. These records can be exposed to environmental changes, as well as pests (insects) and vermin (mice, rats, and other rodents) for a prolonged amount of time prior to being discovered.

REQUREMENT: Records storage spaces shall have security devices such as locks and alarm systems to limit access to authorized personnel only. The storage area should have sprinklers for fire protection. It is not a requirement that a facility-based file room or office space meet the requirements of 36 CFR 1234.10, 12 and 14; however the space shall meet the requirements of:

§ 1234.10, a 1 & 2, c, e, f, h, l, m
§ 1234.12, a, l, m,
§ 1234.14, a, b, c, d

The facility/program office Records Manager is required to monitor active records in all low-use on-site storage spaces at least once a week and be able to provide documentation of weekly checks for compliance. The Temporary Records Storage Basic Checklist (Attachment A) can be utilized for documentation of monitoring of on-site records storage.

NOTE: Active records (low usage) shall not be stored on-site in the following locations:

- Basement mechanical rooms with steam pipes, sewer lines or water pipes
- Out-buildings or buildings and rooms with no environmental controls (HVAC systems)
- A flood plain or below sea level (if the facility is below sea level or on a flood plain, ensure that records are stored on a higher floor)

5. ACTIVE RECORDS (HIGH-USAGE), ON-SITE STORAGE: These are records commonly located in central file rooms for health and radiological records or in office space in filing cabinets.
REQUIREMENT: Records storage spaces shall have security devices such as locks and alarm systems to limit access to authorized personnel only. The storage area should have sprinklers for fire protection. It is not a requirement that a facility-based active file room or office space meet the requirements of 36 CFR 1234.10, 12 and 14; however the space shall meet the requirements of:

§ 1234.10, a 1 & 2, c, e, f, h, l, m
§ 1234.12, a, l, m,
§ 1234.14, a, b, c, d

NOTE: The Temporary Records Storage Basic Checklist (Attachment A) can be utilized for documentation of monitoring of on-site records storage. Active records (high-usage) shall not be stored on-site in the following locations:

- Basement mechanical rooms with steam pipes, sewer lines or water pipes
- Out-buildings or buildings and rooms with no environmental controls (HVAC systems)
- A flood plain or below sea level (if the facility is below sea level or on a flood plain, ensure that records are stored on a higher floor)
- On pallets on dirt floors.

6. TEMPORARY/TRANSIT RECORDS STORAGE: These are locations where records are placed while being processed for transfer and/or waiting to be transferred to off-site storage to one of three places: Department of Veterans Affair Record Center & Vault (RC&V) Neosho, Missouri; NARA Federal Records Centers (FRC); or a commercial records storage center. The purpose of these temporary locations is to have space to process these records, not for long-term records storage.

REQUIREMENT: Records shall not be maintained in a temporary/transit records storage area for more than 90 days. A temporary/transit records storage area should be within the facility, not on loading docks, out-buildings, basements with steam pipes or any other environmental hazard that can harm the records being stored. The Temporary Records Storage Basic Checklist (Attachment A) can be utilized for documentation of monitoring of on-site records storage in temporary/transit records storage areas.

NOTE: Privacy requirements still apply to all records with Personal Identifiable Information (PII) and Personal Health Information (PHI) in addition to the NARA requirements found in this Fact Sheet. This especially applies to access limitations like locks and alarm systems.

RETRIEVAL OF INACTIVE RECORDS FROM RC&V OR NARA FRCs: Previously retired records retrieved from either the RC&V or a NARA FRC for ROI, litigation purposes, etc. shall be returned to the storage facility for interfiling with the same accession they were retired in as soon as possible. Records retrieved for litigation or records freeze may have to be maintained long-term at the facility, however once the litigation hold or freeze is lifted, the records shall be returned for interfiling within the same accession they were retired in.

REQUIREMENT: Records Managers (or designees) shall develop a process to track records retrieved from either the RC&V or a NARA FRC in order to ensure the records are returned for interfiling. The VHA Records Officer receives notification from the storage facilities of any VHA records which are retrieved by facilities or program offices and maintained for longer than 90 days.

REFERENCES

- VA Handbook 6300.1, Records Management Procedures
- VA Handbook 6300.2, Procedures for the Vital Records Program
- VA Handbook 6300.8 Procedures for Shipment of Records to the Department of Veterans Affairs (VA) Records Center & Vault in Neosho, Missouri
- VHA Directive 6300, Records Management
- VHA Records Control Schedule (RCS) 10-1
- VA Records Center & Vault Users' Guide: https://vaww.rrs.aac.va.gov/
- NARA Records Storage Toolkit: http://www.archives.gov/records-mgmt/storage-standards-toolkit/

Prepared by:
VHA HIM Records Management Office

ATTACHMENT A:

TEMPORARY RECORDS STORAGE BASIC CHECKLIST

(See 36 CFR 1234 for Full Requirements)

Complete one checklist for each on-site & commercial off-site location

Date Inspected:	**Service/Office Storing Records:**
Storage Inspected by RM / Liaison (Names):	**Point of Contact (Name/Phone #):**
Facility On-Site Storage: ☐ Yes ☐ No ***Note: Facility On-site storage includes garages, warehouses, storage rooms, basements, sheds, etc.*	**Site/Location:** **Bldg #:** **Room #:** **Box Count:**
Commercial Off-Site Storage: ☐ Yes ☐ No *** Note: NARA Federal Records Centers & the VHA Records Center & Vault (RC&V) are not categorized as commercial off-site storage facilities.*	**Facility Name:** **Address:** **Date of RM / Liaison Site Visit:** **Box Count:**

For Commercial Off-Site Records Storage

1. Does the commercial off-site storage facility meet 36 CFR 1234 records storage standards? ☐ Yes ☐ No
2. Records Manager maintains copies of documentation indicating the storage facility meets 36 CFR 1234 Subpart B (i.e. 36 CFR 1234 checklist)? ☐ Yes ☐ No
3. NARA Approval Memo Maintained by Records Manager: ☐ Yes ☐ No

   Date of NARA Memo/Email:
4. Records Manager coordinates the storage/disposition of records with the commercial facility? ☐ Yes ☐No
5. Records Manager maintains a detailed inventory of boxed records stored at the commercial facility? ☐ Yes ☐No
6. Do records stored at the commercial facility contain PHI/PII? ☐ Yes ☐No

   If Yes, have the Records Manager and Privacy Officer coordinated with the Contracting Officer to ensure a Business Associate Agreement is in place? ☐ Yes ☐No

Link to NARA Toolkit for Records Stored in a Commercial Records Storage Facility:

http://www.archives.gov/records-mgmt/storage-standards-toolkit/file3.html

For Facility On-Site & Commercial Off-Site Records Storage

RECORD MAINTENANCE REQUIREMENTS:

Approved Records Boxes Utilized? ☐ Yes ☐ No

VA Form 7468 on Boxes? ☐ Yes ☐ No

Records Off the Floor? ☐ Yes ☐ No

Organized, Readable, Properly Packed and Retrievable Boxes? ☐ Yes ☐ No

Evidence of Mold? ☐ Yes ☐ No

Evidence of Water Damage? ☐ Yes ☐ No

Are records comingled with Non-Records? ☐ No

Records listed on Inventory/File Plan? ☐ Yes ☐ No

Records maintained per RCS 10-1/GRS? ☐ Yes ☐ No

** If records are maintained longer than schedules allow, state reason (i.e. records freeze, litigation hold, etc):

FACILITY/ENVIRONMENTAL REQUIREMENTS

Limited Access: ☐ Yes ☐ No

Floor Load Limit Sign: ☐ Yes ☐ No

Floor-to-Ceiling Walls: ☐ Yes ☐ No

Water/Sewer Pipes: ☐ Yes ☐ No

Water Leaks: ☐ Yes ☐ No

Evidence of Pests: ☐ Yes ☐ No

Relative Humidity < 70% ☐ Yes ☐ No

Extreme Heat: ☐ Yes ☐ No

Climate Controlled: ☐ Yes ☐ No

Fire Suppression: ☐ Yes ☐ No

Outside 100 yr. Flood Plain: ☐ Yes ☐ No

OVERALL FINDINGS:

☐ **Compliant**

☐ **Noncompliant - Report to Executive Leadership**

(If there are noncompliant findings, list remediation actions below and when they have been corrected)

Notes:

Department of
Veterans Affairs

Memorandum

Date: JAN - 2 2018

From: Deputy Secretary (001)

Subj: Proper Use of Email and Other Messaging Services

To: Under Secretaries, Assistant Secretaries, and Other Key Officials

1. This memorandum and its attachment supersede the attached memorandum dated April 24, 2015, and are intended to advise all VA personnel, including employees, contractors, trainees, and volunteers, that the use of non-official accounts or devices to conduct official agency business is prohibited.

2. VA records, including those generated by electronic communications, must remain within a secure VA information system, be managed in accordance with the applicable records management requirements, and employ, if appropriate, VA-approved encryption. Records are defined by the Federal Records Act as "all recorded information . . . made or received by a Federal agency . . . in connection with the transaction of public business and appropriate for preservation by that agency . . . as evidence of the organization, functions, policies, decisions, procedures, operations, or other activities of the . . . Government or because of the informational value of the data in them." 44 United States Code § 3301(a)(1)(A).

3. To ensure proper preservation of records generated by email, VA users conducting agency business must use, whenever feasible, official email accounts, such as an email address with @va.gov as the domain name. VA users may not conduct agency business through the use of non-official email accounts, such as Gmail or Yahoo. If, however, circumstances make use of a non-official email account unavoidable, the user must:

a. Copy the user's official email address so that the message is sent simultaneously to the official account at the moment of transmission; or

b. Forward a complete copy of the message to the user's official email address within 20 days of the original transmission.

4. Contractors conducting VA business who are assigned VA email accounts will use those accounts to transmit emails that meet the definition of a Federal Record ("record emails"). If a contractor is unable to use the VA email account due to technical constraints, the corporate email account may be used if at least one of the following requirements is met:

a. The record emails contain no Controlled Unclassified Information or other VA sensitive information, or are protected by encryption compliant with the standards established by the National Institute of Standards and

Technology (NIST) in Federal Information Processing Standards Publication 140-2, Security Requirements for Cryptographic Modules; or

b. The contractor has implemented basic safeguards as outlined in 48 Code of Federal Regulations (C.F.R.) § 52.204-21 and the recommended security requirements in NIST Special Publication (SP) 800-171, Protecting Controlled Unclassified Information in Nonfederal Information Systems and Organizations.

5. If any record emails are transmitted using a corporate email account, the contractor must also comply with all applicable records management laws, including National Archives and Records Administration (NARA) regulations and VA policies and procedures. As such, the contractor must copy any record email to a VA email system or VA record-keeping system within 20 days by simultaneously sending a copy to a VA email account or forwarding the message to a VA email account within that time frame. To ensure contractor compliance, VA shall insert the clause at 48 C.F.R. § 52.204-21, Basic Safeguarding of Covered Contractor Information Systems, and appropriate records management language in solicitations and contracts.

6. Instant messages (IM) sent or received by VA personnel using Microsoft Lync or Skype for Business are generally retained in a VA system. For many VA users, IMs are not retained beyond the conclusion of the conversation. Since information transmitted by IM may not be properly preserved, VA personnel should not use IMs to conduct communications that are likely to generate VA records. To the extent that record material is created using IM, the content must be copied to a recordkeeping system to ensure proper preservation.

7. Short Message Service (SMS) messages, also known as text messages, sent or received by VA personnel using a iPhone, Blackberry, or other mobile device, whether VA-issued or personally owned, are not retained on any VA system. Rather, the information resides with the service provider, such as Verizon or AT&T, on their networks and on the mobile device in the user's possession. Since the information transmitted by SMS is arguably outside VA custody, VA personnel should not use SMS to conduct communications that are likely to generate record material. To the extent that VA records are created using SMS, the content must be copied to a recordkeeping system to ensure proper preservation.

Proper Use of Email and Other Messaging Services

8. Attached is guidance to be distributed to the appropriate personnel in your Administration or Staff Office so that you may make them aware of these requirements. Gi-Hyun An is available at (202) 461-7684 to address any questions concerning this memorandum.

Thomas G. Bowman

Attachment

Department of Veterans Affairs

Memorandum

Date: APR 24 2015

From: Executive in Charge and Chief Information Officer, Office of Information and Technology (005)

Subj: Use of Personal Email (VAIQ #7581492)

To: Under Secretaries, Assistant Secretaries, and Other Key Officials

1. This memo reminds all VA staff and contractors that the use of a personal email account or the use of a personal email system to conduct official agency business is not allowed. Please distribute this memo, as appropriate, through your channels. Official agency email records are to remain within a secure VA email system and use appropriate VA-approved encryption, when applicable. If there are questions about what constitutes a record, please work with your designated records management officials.

2. VA employees, contractors, volunteers, trainees or anyone with a valid VA email address are required to take the annual mandatory Privacy and Security Awareness training and subsequently sign the appropriate VA National Rules of Behavior or the VA Contractor Rules of Behavior. This mandatory training provides guidance indicating that employees/contractors should never conduct VA business through personal emails, personal IMs, or personal phone text messages and to not use personal email addresses to communicate about VA business.

3. In situations where personal email was utilized, The *Presidential and Federal Records Act Amendments of 2014, Public Law 113-187*, directs that any officer or employee of an executive level agency may not create or send an email message using a non-government official electronic email system unless either of the following conditions are met: (a) the email is immediately sent to another official government email account or; (b) the complete copy of the email is forwarded to a government email account within 20 days of the original creation or transmission of the email record. The intentional violation of this act shall be a basis for disciplinary action.

Use of Personal Email (VAIQ #7581492)

4. If you have any questions, feel free to call me at (202) 461-6910 or have a member of your staff contact John Oswalt, Senior Agency Official for Records, at (202) 632-7489.

Stephen W. Warren

cc:
Deputy Assistant Secretary Information Security (005R)
Deputy Assistant Secretary, Information Technology Resource Management (005F)
Deputy Chief Information Officer, Architecture, Strategy, and Design (005E)
Acting Executive Director, Office of Enterprise Communications (005EC)
Deputy Chief Information Officer, Product Development (005Q)
Deputy Chief Information Officer, Service, Delivery and Engineering (005OP)
Executive Director for Quality, Performance and Oversight (005X)
Executive Director for VLER Enterprise PMO (005C)
Deputy Director for Interagency Program Office (005J)
Advocate for Health (005A)
Advocate for Benefits (005A)
Advocate for Corporate Customers (005A)

December *2015*

Health Information Management
Office of Informatics and Analytics

Cleaning Up and Organizing your Share Drives

1. Review your Program Office, service, department, division, work center Record Inventory and File Plan for records in your Share Drive. If you have no Record Inventory and File Plan now is the time to create one.
2. Separate all files by CY and FY if finance files.
3. Define personal records for all employees. Have them remove their personal files from the all Share-drives. No picture of snuggles the cat, copes of GSA/GS pay scales etc.
4. Separate the content of the Share-drives between official records (work product), convenience copies (multiple copies of RCS 10-1, other PowerPoints from other organizations or work centers, records and documents produced in other departments not related to your own work product.
5. You can destroy the personal papers and convenience copies.
6. At this point you should be left with official records of your service, department, division, work center etc.
7. Use your file plan to build out the Share-drive file structure. Ensure that you use a naming convention that is repeatable and using the same structure such as.

   FY/CY of Record, the Record item number from RCS 10-1/GRS, common name of file, work center, FY/CY record is to be destroyed.
   Note; you can use any order of the above some of the items all the items, just do it the same way every time.

8. Once everything is organized by records schedule and file plan you now have a structure.
9. Destroy and records that have aged out, complete a VA Form 7468 for all records destroyed with an inventory of the records destroyed. Place them in a file. These records can be destroyed 7 yrs. after destruction of the original official records see GRS 16.2.

Want to Get Your Shared Drive Under Control? Start Here

http://recordsmanagement.tab.com/functional-classification-2/want-to-get-your-shared-drive-under-control-start-here/

1. Building the Framework
2. Designing the Folder Structure
3. Documenting User Permissions
4. Preparing for Implementation

NARA You-tube Training, Managing Content on Shared Drives

https://www.youtube.com/watch?v=MOwwQ5XdbW0&list=PLugwVCjzrJsWbTAkNkRdOj_LsgsVpMHeZ&index=2

NARA You Tube Creating and Using File Plans

https://www.youtube.com/watch?v=eDOjIJM8IMA&list=PLugwVCjzrJsWbTAkNkRdOj_LsgsVpMHeZ&index=3

OFFICE OF RESEARCH AND DEVELOPMENT (ORD)
VETERANS HEALTH ADMINISTRATION (VHA)

Guidance on ORD's New Record Control Schedule

Date: July 2015

SCOPE: The Federal Records Act requires that all Federal agencies make and preserve records that pertain to the functions, decisions, and other actions of the agency. The National Archives and Records Administration (NARA) is the Federal agency responsible for maintain and preserving Federal records; appraising records to determine if the records are worth preserving permanently or if they are temporary records; approving agency record control schedules and the disposition of records; and operating Federal Records Centers. The Archivist at NARA has approved a Records Control Schedule (RCS) for ORD. Below is information related to the ORD RCS and will cover the following areas:

1. What records and documents must be maintained by VA research programs under the Federal Records Act (FRA) and in accordance with the RCS?
2. Are all records or documents that are created or used by researchers or research administration covered under the ORD RCS?
3. What is meant by record cutoff and a record disposition?
4. What is media neutrality?
5. How long must the records be kept?
6. How is ORD's RCS arranged?
7. What special issues related to the RCS must be addressed?
8. Are there any other miscellaneous issues?

1. What records and documents must be maintained by VA research programs under the Federal Records Act (FRA) and in accordance with the RCS?

As applied to VA research records, the FRA defines Federal records as all documentary material, regardless of physical form, <u>made or received</u> by your research program or that are connected with transaction of the Agency's business, (i.e., the conduct of VA's research programs and VA research) and that are preserved or is are appropriate for preservation as evidence of VA's activities or because of their informational value to warrant preservation.

- The term "made" means: The act of creating and recording information by Agency personnel in the course of their official duties.
- The term "receive" means: The acceptance or collection of documentary materials by Agency personnel in the course of their official duties regardless of the material's origin (for example, other units of their agency, private citizens, public officials, other agencies, contractors, Government grantees) and regardless of how transmitted (in person, by messenger, mail, electronic means, or by any other method).

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Note: *Federal records may be paper, electronic including e-mail, pictures, film or other types of media*.

Examples of Federal records include such documents as policies and procedure; statistical data; reports; legal opinions and decisions; research data and studies; research records; letters and memoranda; completed forms (if they document the conduct of business); photographs; audio and video recordings; posters and graphics; architectural and engineering documents. E-mails may also be considered Federal records depending on their content and if the content represents decisions and the conduct of business. See http://www.archives.gov/records-mgmt/email-mgmt.html.

Working files may also be considered Federal records. Working files are defined as rough notes, drafts, or calculations developed and used to prepare or analyze other documents. They are not personal papers, personal files, or copies of Federal records. **Note**: *Not all drafts or notes would be considered Federal records. The determination of their status is dependent on the circumstances, the impact of the drafts or notes, and the final decision of the Agency's designated office/official. The VHA Privacy Officer or VHA Records Manager will be able to assist in this determination and in determining who is the Agency's designated official*.

Non-record materials. Non-record materials are U.S. Government owned records/documentary materials excluded from the legal definition of records (44U.S.C. 3301). This would include such items as copies of documents preserved only for convenience or reference, stocks of publications, reference materials. Non-records should be destroyed when no longer needed. Non-records should only be removed from U.S. government custody with the Agency's approval or Agency policies. Non-records must be secured, used, transmitted, and destroyed according to all applicable VA policies including VA Handbook 6500 if they contain any sensitive information. **Note:** *To ensure there is no confusion over what is the Federal record and what is the copy; all copies should be clearly labeled as copies*.

2. Are all records or documents that are created or used by researchers or research administration covered under the ORD RCS?

No. Some records are covered by other Record Control Schedules. Some examples, 1) when a researcher used the CPRS medical record or makes an entry in the medical record for research purposes the medical record is still covered under the schedule for Health Information Management Service (see VHA RCS 10-1, Section XLIII. (http://vaww.va.gov/vhapublications/rcs10/rcs10-1.pdf). 2) Pharmacy records including those related to the investigational pharmacy are found in VHA RCS 10-1 Section XV. **Note:** *All RCS specific to VHA are found in RCS 10-1*. For records that are common to all Agencies, a General Records Schedule (GRS) (http://www.archives.gov/records-mgmt/grs.html) may be applicable including:

- Financial Records are covered under GRS 1.0
- Human Resource Management Records are covered under GRS 2.0
- General Operations Support are covered under GRS 5

3. What is meant by record "cutoff" and a record "disposition"?

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Cutoff. The record cutoff serves as the starting point for the time additional time record must be stored after they are no longer actively being used. The cutoff is usually a calendar reference point (e.g., end of calendar year, end of fiscal year, end of a quarter) or it can be an event such as when a research study is closed/completed or at the end of a review cycle. It is important to remember that retention periods begin with the cutoff and not when the record is first created. Non-records do not have a cutoff or a retention period.

Disposition. The record disposition defines how long the record must be stored and retained after the cutoff if the record is a temporary record. For permanent records it defines when the records must be sent to NARA for permanent storage at the archives.

Disposal of temporary records. These records have been approved by NARA for destruction after they have been retained for the amount of time specified in the RCS. Once this time requirement has been met, the records must be disposed of promptly. Note: This disposition is for the record itself and not copies of the record. The destruction of the records must follow NARA required procedures. The records manager at each facility can assist the research office in complying with these requirements. Temporary records cannot be disposed of at any arbitrary time or by any arbitrary method.

Temporary records must not be disposed of prior to the time mandated in the RCS unless there is applicable authority to do so. Regulations allowing emergency destruction of Federal records are found in 36 CFR 1228 Subpart F. One of the reasons for emergency destruction includes "menaces to human life or health or to property" per the regulations. This may cover such records as those that become wet and moldy, those that are infested by vermin, or those that cannot be used or repaired. NARA must be contacted and concur before the records are destroyed except for records stored on nitrate file. If they are on nitrate film and they pose a threat to life or property the agency may destroy them before reporting it to NARA.

Transfer of Permanent Records. Records determined to be permanent records by NARA must be transferred to NARA archives per the specified timeframe in the RCS. The Records Manager at each facility will assist the research office in complying with these requirements.

4. What is media neutrality?

This term "media neutrality" refers to the Federal regulations that allow Federal records to be in any form (paper, electronic, etc.) and for the Agency to transfer the record from one medium to another unless the record control schedule identifies a specific medium for a specific series of records. (See 36 CFR 1225.12). The phrase "regardless of physical form or characteristics" is frequently used in relationship to the concept of media neutrality. This phrase means that the Federal record medium may be paper, film, disk, or another physical type or form. It also means that the method of recording may be manual, mechanical, photographic, electronic, or any combination of these or other technologies.

For ORD's RCS all paper records can be digitalized with the resulting digitalized document constituting the Federal record, unless the RCS clearly indicates it cannot be transferred to another medium. In addition, the digitalization must follow all applicable policies including the NARA policies on the quality

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and accuracy of the digitalized document. The storage of the digitalized document must also follow applicable policies. For example: If a research document is from a Food and Drug Administration(FDA) regulated study, the Information Technology (IT) system that stores the digitalized document must be compliant with 21 CFR Part 11.

5. How long must Federal records be kept?

The RCS specifies how long records must be kept and when they must be destroyed. As indicated above, the "Disposition" indicates the record retention time. Copies of Federal records that were made as a convenience or as working copies do not have a disposition and may be retained until they are no longer needed.

6. How is ORD's RCS arranged?

There are 7 main sections in the RCS and under the main sections there are subsections. The first 6 sections apply to records created, used, or received by ORD in Central Office. Section 7 applies to records created, used, or received by the research offices in field facilities.

Section 7 is broken down into 8 subsections. The subsections were developed and described sufficiently broad to allow for all current and new types of Federal records to fall into one of the subsections.

7. What special issues related to the RCS must be addressed?

Research data repositories. Because research data repositories must be covered under an active repository protocol the data and documents related to the research data repository do not have a cutoff and therefore, do not have a specific time for disposition unless the repository protocol is closed and the content of the repository will no longer be used. If the repository is closed then the repository records and all files will fall under the ORD RCS Section 7.6.

Digitalizing files from FDA regulated studies.

For FDA regulated studies some of the investigator's paper records when digitalized will fall under the scope of 21 CFR Part 11. For those electronic records that fall under Part 11, if the FDA required retention period has not been met, then the records can only be digitalized and stored in compliance with Part 11. VISTA/CPRS is Part 11 compliant but other IT systems within VA may not be Part 11 compliant. If the FDA required retention period has passed when you digitalize the records then the Part 11 requirements are no longer applicable.

The basic requirements for retention of investigator files under FDA regulations are as follows:

- The retention requirements for investigator files from clinical investigations involving investigational drugs are found at 21 CFR Section 312.62. Investigator files from clinical investigations subject to 21 CFR Section 312 must be kept 2 years after the marketing application is approved for the drug for the indication for which it is being investigated; or, if no application is to be filed or if the application is not approved for such indication, until 2 years after the investigation is discontinued and FDA is notified.

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- The retention requirements for investigator files from clinical investigations involving medical devices with investigational device exemptions are found in 21 CFR Section 12.140(d). Investigator files from clinical investigations subject to 21 CFR Section 812 must be maintained during the investigation and for a period of 2 years after the latter of the following two dates: The date on which the investigation is terminated or completed, or the date that the records are no longer required for purposes of supporting a premarket approval application or a notice of completion of a product development protocol.

All digitalized records must meet all applicable privacy and security requirements including those found in VA Handbook 6500. **Note**: *Currently the Office of Human Research Protections (OHRP) does not have any guidance or regulations related to digitalizing paper records*.

Data Availability for Public Access. VHA has developed a proposed policy and an action plan for the Department of Veterans Affairs (VA) to implement the February 22, 2013, memorandum from the White House Office of Science and Technology Policy (OSTP) directing Federal agencies to support increased public access to the results of Federally-funded research. This proposed policy and action plan have not yet been finalized.

There are many issues that have not been fully addressed including an effective date. In addition, such issues as informed consent agreements, HIPAA authorizations, and other documents (such as DUAs, contracts, and memoranda of understanding) associated with currently existing research data have typically included restrictions on use of the data outside VA and/or beyond the study for which the data were collected. For this reason, VA's public access requirement relative to research data will not be applied retrospectively to previously initiated research. VHA contemplates that its proposed "public access to research data" policy will not be applied to studies initiated prior to promulgation of the policy. The current RCS disposition requirements must be applied at least to all VA research data from studies initiated prior to promulgation of VA's forthcoming "public access to research data" policy except for data placed in a research data repository for future reuse.

Research Consents signed by subjects to allow data to be in a repository for reuse of data and/or biological specimens. If subjects sign a consent and authorization to allow their data and/or biological specimen to be placed in a research repository, the consents and authorizations or a copy of these documents must be retained by the repository for the timeframe that the repository is active and has a current protocol. The consents/authorizations may be from another study that has already closed.

8. Are there any other miscellaneous issues?

The following are miscellaneous issues that are important for compliance with all applicable regulations and policies:

- Records currently in storage at a facility or off-site. For records that are currently being stored, prior to destroying any of the records it may be necessary to ensure that the records are categorized by the RCS Section and subsection that is applicable. For example: investigator files

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fall under Section 7.6. In addition, please insure that there are no records that belong to the VA non-profit organization or other non-VA entities.

- For any records that are maintained beyond the disposition timeframe in the RCS permission must be obtained in writing from NARA. The facility Records Manager can assist in applying for this permission.
- Records subject to a record hold/freeze or to a litigation hold must not be destroyed until that hold/freeze is lifted regardless of the disposition schedule in the RCS.
- Records that are being stored because the time period listed for their disposition has not been met or if they are records subject to a hold/freeze they are still discoverable under Federal Law including the Freedom of Information Act. Failure to produce these records when requested will place VA in contempt of court and allow court sanction be made upon the Department of Veterans Affairs and your legal counsel. The facility Records Manager or Privacy Officer must be contacted if a research office or research personnel receive such a request.
- Inventories of all records must be maintained per the FRA and NARA regulations. Your facility Records Manager will assist you in creating the inventory but it is the responsibility of the research office to conduct the inventory and maintain it as current.

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