Using Records Retention Schedules: Which Retention Schedules Do Public Hospital Districts Use?

Purpose: Provide guidance to public hospital districts on which records retention schedules to use.

Hospital districts need to use the following records retention schedules:

1. **Local Government Common Records Retention Schedule (CORE)**
   
   This schedule covers records created and received by most government agencies that relate to:
   
   - Agency-provided training
   - Accidents/incidents
   - Contracts and agreements
   - Employee health records
   - Financial transactions and accounting
   - Information systems/technology
   - Legal affairs
   - Media coverage
   - Payroll
   - Personnel files
   - Public records requests
   - Volunteer files
   
   Records with minimal retention value (transitory records) are also covered in the *Local Government Common Records Retention Schedule (CORE)*.

2. **Public Hospital Districts Records Retention Schedule**

   This schedule covers records that are specific or unique to public hospital districts that relate to:
   
   - Drug logs
   - In-home equipment
   - Hospital support services
   - Laboratory and pathology management
   - Long term care/nursing home residents medical records
   - Master patient index
   - Patient medical records
   - Pharmacy management
   - Quality assurance and compliance
   - Radiation Protection Program
   - Research management (clinical trials, diagnostic research, institutional review boards)

3. **Additional Schedules**

   Hospital districts with fire and emergency medical and communications (911) functions need to use the following schedules:
   
   - **Fire & Emergency Medical Records Retention Schedule**
   - **Emergency Communications (911) Records Retention Schedule**

Additional advice regarding the management of public records is available from Washington State Archives:

www.sos.wa.gov/archives
recordsmanagement@sos.wa.gov