

Shadowfax

Title	Record Maintenance, Retention And Destruction Policy
Policy Number	ORG.1001.000.000
Initiating Authority	Policy Committee
Approved By	Compliance Committee 9-22-21
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Revision Date	
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Next Review Date	June 2022
Associated Policies	
Associated Procedures	
Associated Documents	

I. POLICY STATEMENT

Shadowfax Corporation (“Shadowfax”) is committed to provide a uniform procedure for physical and electronic record keeping, maintenance, retention and destruction.

II. PURPOSE

This policy provides guidelines on record retention and purging. Records will not be kept if they are no longer needed for the operation of the business or required by law.

III. SCOPE

This policy applies to all Shadowfax staff.

IV. GENERAL

This policy is based on:

- Industry standards
- Shadowfax contracts
- Guidelines of the Sarbanes-Oxley Act of 2002
- False Claims Provision of Deficit Reduction Act of 2005

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- Requirements from the Commonwealth of Pennsylvania Department of Human Services, Office of Developmental Programs for the time in the retention of compliance documents,
- For all other records required by Chapter 6400 and Chapter 6100, which is governed by § 6100.54 (relating to record keeping). See the specific timelines in § 6100.54

V. POLICY

The cost of maintaining records is an expense, which can grow unreasonably if good housekeeping is not performed. An excess of records also makes it more difficult to find pertinent records. Records shall not be kept if they are no longer needed for the operation of the business or required by law. Unnecessary records should be eliminated from the files.

Hard copy files are to be in a locked, secured area.

Files for all current staff are maintained on-site in a secure environment that provides confidentiality, limited access, and safeguards against loss or damage.

Each department will review, maintain and destroy physical and electronic records on an annual basis based on the retention duration requirements.

Each department will create a retention/ destruction procedure, chart and schedule for specific categories of records within their division in order to ensure legal compliance, and also to accomplish other objectives, such as preserving intellectual property and cost management. The procedure will include an annual date that the purge will occur and a chart for documents retention specific to the department. Each department will track all electronic files that are deleted and use the electronic file purge template. Each department will use an electronic purge tracking sheet or screen shots to track deleted electronic files within their department.

Departments must follow the organizational, finance, human resource and information technology retention/destruction charts and schedules.

While minimum retention periods are established, the retention of the documents not included in the aforementioned categories should be determined primarily by the application of the general guidelines affecting document retention, as well as the

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Note: The term "Individual" is synonymous with resident, client, patient, consumer, or participant.

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exception for program contracts, licensure, litigation relevant documents and any other pertinent factors.

Department directors shall designate a responsible staff member(s) and a backup to analyze and have decision-making authority for purging expired or duplicate files. The department Director will review the electronic purge tracking sheet annually and email it to the Compliance Committee. The department Director has responsibility that new staff is made aware, during the training process, of retention and destruction policies and guidelines

All documents that have expired shall be destroyed or deleted.

The document purge process occurs annually.

Drafts – Drafts of all documents shall be destroyed upon approval of the final documentation.

Exception for Litigation Relevant Documents

Shadowfax expects all staff to comply fully with any published records retention or destruction policies and schedules, if all staff should note the following general exception with any stated destruction schedule.

If you believe, or Shadowfax informs you, that Shadowfax records are relevant to litigation, or potential litigation (i.e., a dispute that could result in litigation), then you **must preserve those records until it is determined that the records are no longer needed. That exception supersedes any previously or subsequently established destruction schedule for those records.**

The Chief Executive Officer (CEO) may issue a notice; known as a Legal Hold, suspending the destruction of records due to pending, threatened or otherwise reasonably foreseeable litigation, audits, government investigations or similar proceedings. No records specified in any Legal Hold may be destroyed, even if the scheduled destruction date has passed, until the CEO withdraws the hold in writing.

Shadowfax takes very seriously its obligations to preserve information relating to litigation, audits and investigation. It is a federal offense to destroy, alter or mutilate any record under federal investigation. The consequences of failing to retain items

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subject to a Legal Hold can be serious, including possible criminal and civil sanctions against Shadowfax and its staff members, and possible disciplinary action against responsible individuals (up to and including termination of employment).

Each staff member has an obligation to contact the CEO immediately in the event the staff member obtains knowledge of any potential or actual litigation, external audit, investigation or similar proceeding involving the Shadowfax.

Notification/Communication

New staff will be provided a copy of this policy upon hiring. All staff are provided a copy of this policy via the intranet.

VI. **OVERSIGHT**

Shadowfax's Compliance Committee or their designee(s) (the "Approved By") shall be in charge of the administration of this Policy. The Approved By responsibilities include:

1. Identifying the action steps to come into compliance and directives to maintain compliance and implement the action steps.
2. Periodically reviewing this Policy and monitoring compliance to it.
3. Training responsible parties on their obligations under the Policy.

Revision History

Name	Date	Reason for Changes	Version