

## Overview

This standard operating procedure (SOP) chapter contains information about records stored in central files and field offices. The content is relevant to Residential Care Services (RCS) staff, as well as anyone seeking to understand how RCS files are stored, retained, and destroyed.

Records Management is the responsibility of every person in RCS. Ensuring that we have complete and accurate records:

- Enables DSHS to fulfill its mission by giving timely access to information necessary to help our clients.
- Ensures open and accountable government.
- Promotes cost-effective use of agency resources by maintaining continuity in the event of staff turn-over, avoiding storage costs and purchasing.
- Minimizes risks and associated costs by being able to readily locate records in response to litigation, discovery, public records requests, and audits.

RCS record management procedures include paper files, shared files, scan procedures, perceptible content (the RCS Record Management Tool [RMT]), record verification and destruction procedures and electronic packet procedures.

## Authority

- [Chapter 40.14 RCW](#) – Preservation and Destruction of Public Records
- [Chapter 42.56 RCW](#) – Public Records Act
- [Chapter 434-662 WAC](#) – Preservation of Electronic Records
- [Chapter 434-663 WAC](#) – Imaging Systems, Standards for Accuracy and Durability
- [DSHS Administrative Policy 5.04](#) – Records Retention
- [DSHS Administrative Policy 5.05](#) – Management of the Litigation Discovery Process
- [DSHS Administrative Policy 5.06](#) – Use and Destruction of Health Care Information
- [DSHS Administrative Policy 5.07](#) – Employee Response to Litigation Related Documents
- [DSHS Administrative Policy 5.08](#) – DSHS Minimum Physical Security Standards for Confidential Information and Financial Instruments
- [DSHS Administrative Policy 15.15](#) – Use of Electronic Messaging Systems and the Internet
- [Washington State Records Retention Schedules](#)

These procedures are not covered by [DSHS Administrative Policies](#) as they are specific to Residential Care Services. These procedures will be reviewed for accuracy and compliance at least every five years.

## Contacts

- RCS Central Files General Contact: [RCSCentralFiles@dshs.wa.gov](mailto:RCSCentralFiles@dshs.wa.gov)
- RCS Policy Unit General Contact: [RCSPolicy@dshs.wa.gov](mailto:RCSPolicy@dshs.wa.gov)
- RCS Quality Improvement Unit General Contact: [ImproveRCS@dshs.wa.gov](mailto:ImproveRCS@dshs.wa.gov)

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## Part I: [Records Management](#)

### A. [Shared Files](#)

#### Background

Electronic file sharing simplifies administration, centralizes files for consistency, and keeps files organized and maintained. It is the electronic version of paper file sharing. Until the time that Perceptive Content is fully functional for all RCS documents, staff must use shared files to store and retrieve electronic documents relating to inspections, investigations, and certification work in LTC settings or other RCS work.

File sharing allows staff to retrieve the same file for view or modification. Information Technology (IT) staff are the RCS file sharing system administrators. RCS staff have a varying amount of access to these shared files and the permissions set by IT are based on the type of file being accessed.

The best practices for shared files include:

- Having a well-planned folder structure;
- Naming files and folders based on search intent; and
- Documenting and following a process to backup shared files.

File sharing standards protect and preserve electronic data and these procedures give direction and awareness to staff using shared files.

#### 1. [Shared File Saving](#)

Saving documents in shared files requires that RCS staff:

- a. Follow standard RCS document naming and saving conventions and folder structure for all shared files.
- b. Save electronic documents pertaining to RCS inspection, investigation, and certification or other RCS work in shared files or designated applications, not on personal drives, One Drive, or desktop.
- c. Staff have the option to save working papers and documents to their desktop or personal files while conducting inspection, investigation, certification, or other RCS work. Staff will remove the documents from the desktop, One Drive, or personal files once the inspection, investigation or certification or other RCS work is closed or completed.
- d. Save all Word documents in PDF (portable document file) format.

### 2. [Shared File Management](#)

#### Regulatory Operations - Designated RCS staff must:

- a. Conduct a monthly audit of two visits per staff person for the previous month.
  - i. If a staff did not conduct two visits, the designated staff will note in the spreadsheet “Nothing to audit.”
  - ii. If staff did conduct two visits in the previous month, select two visits to review. If there are no documents in the Shared Drive for the two visits selected, check with the staff to ensure they did not have any visits in that month.
  - iii. Remind staff to store documents in the shared folder if they have saved them elsewhere.
- b. Use the “eDoc Audit Spreadsheet” to track each unit’s folder usage by recording the following information:
  - i. Audit date;
  - ii. Brief description of any errors found; and
  - iii. The outcome of the audit in the notes section.

Example: “completed according to procedure” or “event ID and document description interchanged.”

- c. Send e-mails to staff with the outcome of the audit using standard messaging that includes:
  - i. Subject Line: eDoc Naming and Saving Review
  - ii. No Error Message: On conducting an internal review of the electronic documents saved to the Shared Drive, no errors were found among the files you saved. The files use the correct document naming and saving standard and are saved in the correct folder. Thank you.
  - iii. Error Message: On conducting an internal review of the electronic documents saved to the Shared Drive, the files you have saved include errors. Then, list the examples, using the following example:

Example:

- 1) For facility XYZ intake #1234567, documents were in the correct folder, but they were not named according to the standard.
- 2) For facility XYZ intake #7654321, the documents were in the “Full” folder rather than the “Complaints” folder.
- 3) Please make the corrections by date and let me and your immediate supervisor know when corrections have been made. Thank you!

- iv. RCS staff must respond to an error message. If staff do not respond to an error message within a week, request for the immediate supervisor to follow up.
- v. Refer staff to their supervisors for additional information about the naming and saving standard or the purpose of the audit.

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#### **Non-Regulatory Operations - Designated RCS staff must:**

- a. Conduct a monthly audit of shared file folders
- b. Use an “eDoc Audit Spreadsheet” to track folder usage
- c. Send emails to staff with the outcome of the audit using standard messaging that includes:
  - i. Subject Line: eDoc Naming and Saving Review
  - ii. No Error Message: On conducting an internal review of the electronic documents saved to the Shared Drive, no errors were found among the files you saved. The files use the correct document naming and saving standard and are saved in the correct folder. Thank you.
  - iii. Error Message: On conducting an internal review of the electronic documents saved to the Shared Drive, the files you have saved include errors. Then, list the examples.
- d. RCS staff must respond to an error message. If staff do not respond to an error message within a week, request for the immediate supervisor to follow up.
- e. Refer staff to their supervisors for additional information about the naming and saving standard or the purpose of the audit.

#### **Field Managers, Program Managers, and Supervisors must:**

- a. Ensure staff receive training in shared file naming, saving, and auditing.
- b. Designate staff to conduct monthly Shared File Audits.
- c. Provide training and mentoring to staff who are having difficulty following shared file system naming and saving conventions, and to staff who do not respond to an audit error message.

## B. Scanners and Scan Procedures

### Background

Many Long-term care (LTC) settings document on paper. RCS staff collect copies of facility documents to support inspection findings. Scanners are a device that captures an electronic image of a paper document. RCS field staff carry portable scanners as a tool for electronic document collection if the LTC setting does not have the means to provide documents in an electronic format. Scanner use contributes to the RCS goal of paperless work.

### Scanner Procedure

RCS Staff will:

1. Learn how the scanner works including how to use the scanner and document storage prior to using the scanner.
2. Establish scanner support.
  - a. Verify that CaptureOnTouch software is installed on the state-issued laptop.
  - b. Create a scanner support folder on the laptop desktop with the scanner user's manual, instructions, trouble shooting and document naming and saving key.
  - c. Identify and carry the local office information technology (IT) support staff telephone number.
3. Prepare for scanner use in the field.
  - a. Turn on laptop and allow all software updates to install.
  - b. If planning to work without an internet connection, create a folder on the laptop desktop to store scanned documents.
    - i. Name the folder with LTC setting name and license number.
    - ii. There should be a separate folder for each LTC setting.
  - c. If using the Canon p-215ii Scanner - Check to ensure the Auto Start switch on the rear of the scanner is in OFF mode
  - d. Label or attach a business card to the scanner and USB scanner cable.
4. Gather the following equipment:
  - a. Laptop and Power Supply.
  - b. Scanner and USB connector cable.
  - c. Scanner carry bag.
  - d. Optional: USB data hub.
5. When using the scanner in the field:
  - a. Place the scanner on a level, stable surface with enough room for scanned documents to exit the scanner freely onto the flat surface. Inadequate room will result in scanned documents jamming the scanner, becoming crumpled or landing on the floor.
  - b. Review scanned document image before finishing a scan to be sure that information is captured correctly. Rescan as needed.
  - c. Return paper documents to the original location, in the original condition after scanning.

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- d. Collect scanner, scanner cable, laptop, laptop cord and carry bags prior to leaving the LTC setting.
6. Scanned document saving:
  - a. Save all scanned documents in a designated desktop folder or shared file or upload into electronic working papers.
  - b. Label each scanned document following the RCS document naming convention when saving in a shared file during an inspection.
  - c. If scanned documents are saved in a designated desktop folder during inspection:
    - i. Label each scanned document following the RCS document naming convention.
    - ii. Transfer scanned documents to a shared folder or upload to electronic working papers once connected to an internet source.
    - iii. Delete desktop folder with scanned documents after confirming that scanned documents are stored in their final electronic destination.
      - 1) Scanned documents must be centered, without blurring or defect, in order to be an adequate record for RCS work.
7. For difficulties when using a portable scanner in the field:
  - a. Refer to the scanner user's manual and troubleshooting documents in the laptop desktop folder.
  - b. Call the local IT support person.
  - c. RCS staff may ask to use LTC setting scanners or ask that documents are emailed.
  - d. RCS staff may not: take a cell phone photo of a document that has protected health information or any resident/client identifying information in lieu of scanning.

## C. [Record Scanning, Verification, and Destruction](#)

### Procedures

Perceptive Content has been authorized by the Washington Secretary of State as a records management tool that allows RCS to destroy non-archival records once that record has been imported into Perceptive Content and **verified to be complete and accurate**. The process for destroying records after their successful import into Perceptive Content is commonly referred to as *Scan and Toss*. It is a policy that is compliant with WA state records management standards with [Washington State Archives](#).

#### 1. [Scanning](#)

- a. When scanning documents that will be preserved in Perceptive Content, records **must** be scanned and verified in a systematic and consistent fashion that ensures a complete and accurate copy of the source record. The document should have all associated pages in the correct order. The pages should not be contorted views of a document or blurry images.
- b. Additional resources for scanning documents are available at [Electronic Doc and Scanner Tools](#). This would include scanner user manual, scanner instructions, troubleshooting problems, and scanner training.

#### 2. [Verification](#)

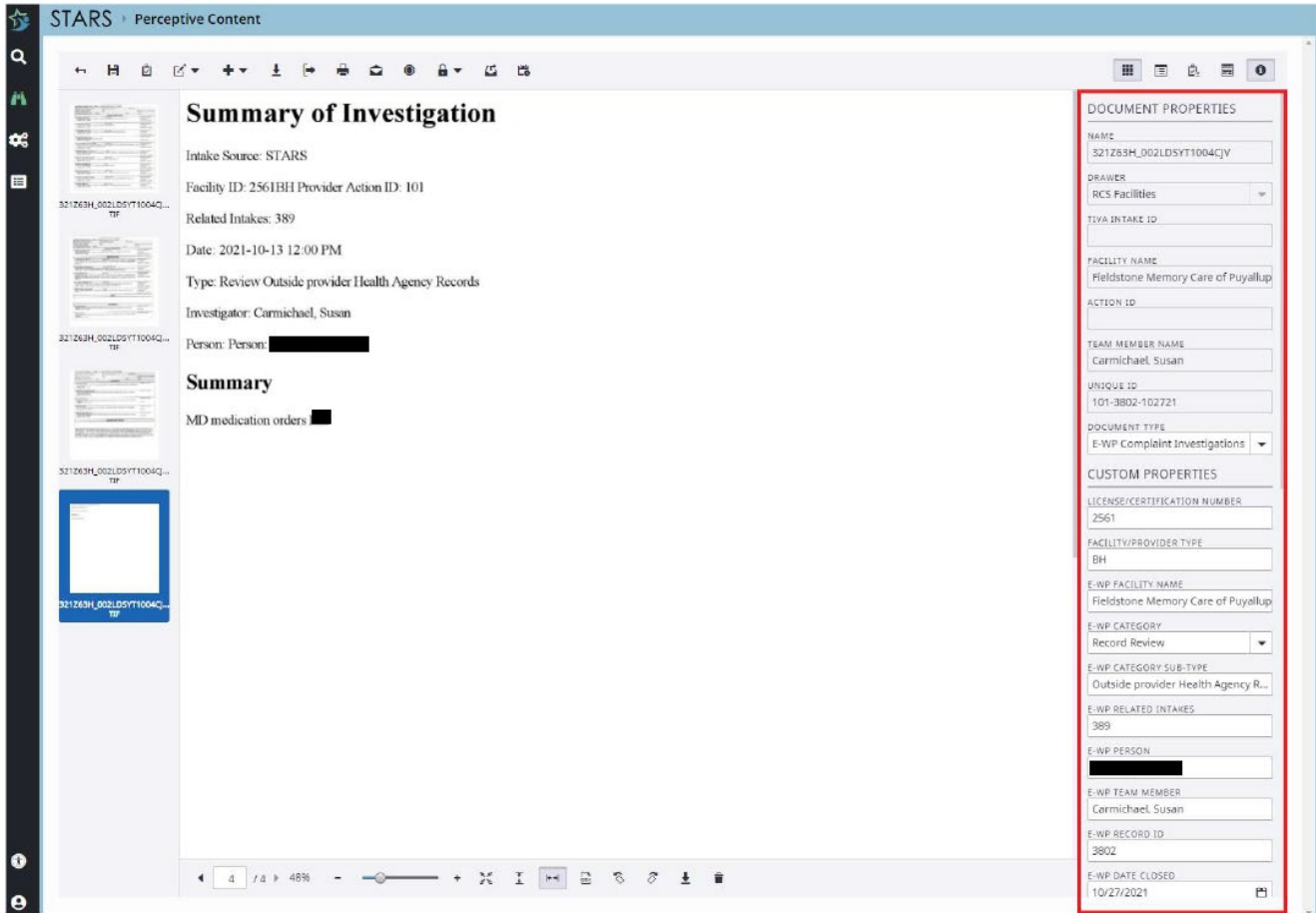
Prior to destruction of the record, the record must be **confirmed as complete and accurate** in Perceptive Content by an RCS staff person that has access to the original record. Perceptive Content is accessible to all RCS staff through STARS. Please see the [STARS manual](#) for additional instructions on how to search Perceptive Content in STARS.

Note: Records are transferred from the Electronic Working Papers (EWP) application to Perceptive Content once the user clicks “save and close” within the EWP application and the user receives confirmation that the records were successfully transferred. Additional details on the EWP application may be found [here](#).

Within 30 working days of import into Perceptive Content, staff with access to the original record must review the document to verify the records imported into Perceptive Content are complete and accurate by:

- a. Locating the document within Perceptive Content;
- b. Verifying the completeness of the record; and
- c. Confirming the accuracy of the document properties and custom properties with the scan quality as noted in the red box below.





### 3. Destruction

After the staff verifies the records imported into Perceptive Content are complete and accurate according to the process of verification above, staff must destroy the original documents by:

- Disposing of hardcopy records using DSHS-approved confidential shred bins; and
- Deleting electronic records from computers and shared drives.

If after transferring documents into Perceptive Content corrections need to be made to the record for it to be considered complete and accurate, please contact the following:

- For EWP records: [RCSewp@dshs.wa.gov](mailto:RCSewp@dshs.wa.gov)
- For all other records: [RCSCentralFiles@dshs.wa.gov](mailto:RCSCentralFiles@dshs.wa.gov)

## D. [Records to Central Files](#)

### Background

The Central Files team has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available. Each field office must ensure records relating to Statements of Deficiency (SOD), Attestations, Plans of Correction (POC), Confidential Identifier Lists, and Back in Compliance (BIC) letters are sent to Central Files in a timely and organized manner. Programs utilizing Federal data bases to manage SOD and POC work send designated survey documents and Confidential Identifier Lists to Central Files.

All working papers are the responsibility of the units creating them. Working papers may be entered into the Electronic Working Paper (EWP) or program specific applications such LTCSP (Long-Term Care Survey Process). Any electronic working papers that are not entered into applications must be stored securely on shared files according to RCS standard document naming and saving procedures. Paper working papers must be stored in an organized manner at local offices. All paper and electronic files follow DSHS record retention schedules. Electronic and paper working papers should not be forwarded to Central Files for maintenance/storage.

### Field Manager Responsibility

Review the process with staff.

- Train staff and ensure they can demonstrate they understand this procedure.
- Conduct periodic reviews of this procedure to ensure staff are following the SOP correctly.
- Request training or clarification from leadership as needed.

#### 1. [Electronic Packets](#)

Each Long-term care (LTC) setting program will use a designated shared files location to collect documents into a “packet” to be sent to Central Files following steps outlined below. Once the Packet is complete, the packet is transferred or copied to the RCS Records for Central Files Q Drive Folder. Central Files staff then upload the packet documents into Perceptive Content (PC).

**This procedure applies to all LTC settings:** Adult Family Home (AFH), Assisted Living Facility (ALF), Certified Community Residential Supports and Services (CCRSS), Enhanced Services Facilities (ESF), Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID), Nursing Home (NH).

#### Packet Content Examples:

- a. Deficiency Free Inspection Letter
- b. Consultation Letter

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- c. SOD and/or Related Documents
  - i. SOD Letter Signed by the Field Manager
  - ii. Accepted POC and Attestation signed by provider
  - iii. Confidential Identifier List
  - iv. BIC letter
- d. Survey Related Documents
  - i. NH - 671, 1539, ID List
  - ii. ICF/IID - 3070G, 3070H, 1539, ID List, 2567B

#### Procedure

- a. CREATE an electronic folder as a collection space for documents related to the regulatory visit. Follow the packet process document naming convention.
- b. SAVE regulatory visit documents in the electronic file folder associated with the regulatory visit. All packet documents will be saved:
  - i. In pdf format.
  - ii. Using the standard document naming convention.
- c. RECEIVE and SAVE provider signed POCs and attestation in the electronic file folder. The Nursing Home Program Receives plans of correction through ASPEN ePOC and follows the ePOC process.

Note: For provider documents related to the SOD, attestation or POC sent to RCS in paper format:

- a. Scan paper documents, save as PDF using document naming convention.
- b. Hold paper documents in a file folder in the local office until confirmation that the electronic version of the document is viewable in PC.
- c. Follow '[Record Scanning, Verification and Destruction](#)' procedures once paper document is confirmed as viewable in PC.

- d. NOTIFY RCS staff that the attestation and/or POC has been received and is available to review.
  - i. Save final approved attestation/POC in the electronic packet file folder.
    - 1) There is no need to save multiple versions of a partial or non-approved attestation or POC in the folder.
    - 2) Nursing Home follows the ePOC process.
  - ii. Document correspondence and communication with the provider related to SOD delivery, reminders, and provider comments in the correspondence tab in STARS (preferred method) or the electronic SOD/POC tracking tool.
- e. VERIFY all documents related to the regulatory visit are in the electronic file folder. Check to be sure:
  - i. Department letters are signed.
  - ii. All packet documents are present and named correctly.
  - iii. All documents are in pdf format.

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- f. TRANSFER Packet files within 48 hours of packet completion to:
  - i. Q: Drive: RCS Records for Central Files Folder
  - ii. Shared Files: Once transferred (copied) to RCS Records for Central Files Q: Drive Folder – Move the packet folder to the “Transferred to RCS Records for Central Files” Folder.

Note: There is no need to hold packet transfer for Informal Dispute Resolution outcome.

### 2. [Follow-Up Visits](#)

- a. If the Follow-Up visit is not done within 90 days, transfer the packet with documents to RCS Records for Central Files Q: Drive folder.
  - i. The CCRSS program creates a separate folder for each follow up and transfers the packet as soon as it is complete.
- b. Follow-up visits after 90 days:
  - i. If citations – create a new folder for SOD/POC documents.
  - ii. If no citations - deposit the Back in Compliance (BIC) letter into the RCS Records for Central Files Q: Drive Folder.

### Part II: Network Drive – Under Construction

## Part III: [Appendices](#)

### A. [Glossary of Terms](#)

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**Deficient practice** – The action(s), error(s), or lack of action on the part of the provider/licensee relative to a requirement and to the extent possible, the resulting outcome.

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**Deficient practice statement (DPS)** – A statement at the beginning of the evidence that sets out why the entity was not in compliance with a regulatory requirement. Also commonly referred to as the “based on” statement.

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**Department** – This term refers to the Washington state Department of Social and Health Services (DSHS).

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**Destroy/Destruction** – Permanent deletion of an electronic record.

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**Drive** – a device where users can save or retrieve files including hard drive, CD drive, USB flash drive.

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**Identifier** – The name, title, or letters/numbers referring to entity staff or those living in the residential setting. Do not use the symbol # in front of the identifier number.

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**Provider** – a) any individual or entity that provides services to DSHS, OR b) a person, group, or facility that provides services. RCS providers include Adult Family Homes, Assisted Living Facilities, Certified Supported Living providers, Enhanced Services Facilities, ICF/IID facilities and Nursing Homes.

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**Record** – any document or recorded information regardless of physical form or characteristics created, sent, organized, or received by the agency in the course of public business.

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**Record Management** – the practice of formally managing records in a file system (electronic or paper) including classifying, capturing, storing, and disposal.

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**Records Retention** – The required minimum amount of time a records series must be retained to meet legal, fiscal, administrative, or historical value as listed on an approved records retention schedule or general records retention schedule.

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**Records Retention Schedule** – a legal document approved by the state or local records committee that specifies minimum retention periods for a records series and gives agencies ongoing disposition authority for the records series after the records' approved retention period has been satisfied.

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**Shared Drive** – A specialization of an operating system file system, comprising of a shared device (e.g. server space) used by multiple users and accessed over either a local area network or a wider area network connection.

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**Shared File** – an electronic record (e.g., spreadsheets, word documents, images) with permissions granting additional users to access the record.

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**Shared Folder** – a container within a file system with permissions granting additional users to access the contents held within.

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**Statement of deficiencies (SOD)** – The official written report document from RCS staff that identifies violations of statute(s) and/or regulation(s), failed facility practice(s) and relevant findings found during a complaint/incident investigation conducted at an any setting regulated by RCS.

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#### B. [Acronym List](#)

AA	Administrative Assistant
AFH	Adult Family Homes
ALF	Assisted Living Facilities
AL TSA	Aging and Long-Term Support Administration
ASPEN	Automated Survey Processing Environment System
BIC	Back In Compliance
BMP, GIF, JPEG, PNG, TIF, TIFF	File formats (and their extensions)
CCRSS	Certified Community Residential Services and Supports
DSHS	Department of Social and Health Services
eDoc	Electronic Document
ePOC	Electronic Plan of Correction
ESF	Enhanced Services Facilities
EWP	Electronic Working Papers
ICF/IID	Intermediate Care Facilities for Individuals with Intellectual Disabilities
IT	Information Technology
LTC	Long-Term Care
NH	Nursing Homes
PDF	Portable Document Format
POC	Plan of Correction
RCS	Residential Care Services
RCW	Revised Code of Washington
RMT	Records Management Tool
SOD	Statement of Deficiency
SOP	Standard Operating Procedures
STARS	Secure Tracking and Reporting System
WAC	Washington Administrative Code

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### C. [Change Log](#)

Eff. Date	Chapter/ Section #	Description of Change	Reason for Change	Communication and Training Plan
04/30/2024	Part 1 & 2	Added content: Part 1: Electronic packet procedures Part 2: Definitions & Acronyms	Electronic packets are a new procedure. Definitions & Acronyms added for clarity	<a href="#">MB R24-039</a> Dedicated training for new packet procedure 2/22/2024
04/30/2024	Part 1	Added Sections on Scanners & Shared File management Moved from Chapter 1.	Sections moved to align with chapter focus.	<a href="#">MB R24-039</a> Weekly Update 3/1 review of SOP changes
04/30/2024	Full Chapter	Changed Chapter Name to “Record Management”	Name changed to reflect scope of chapter contents.	<a href="#">MB R24-039</a> Weekly Update 3/1 review of SOP changes
04/21/2023	Full Chapter	Complete chapter due to the conversion of hardcopy records to electronic form	New IT systems to manage records.	<a href="#">MB R23-039</a>