



Centers for Disease Control  
and Prevention (CDC)  
Atlanta GA 30333

April 26, 2018

Aaron Siri  
Sire and Glimstad, LLP  
200 Park Avenue  
Seventeenth Floor  
New York, New York 10166  
Via email: aaron@sirillp.com

Dear Mr. Siri:

This letter is our final response to your Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry (CDC/ATSDR) Freedom of Information Act (FOIA) request of March 14, 2018, assigned #18-00517-FOIA, for respective copy of CDC current Retention Policy(IR#0013).

We located 77 pages of responsive records. After a careful review of these pages, no information was withheld from release.

Because the documents were already available in electronic format and minimal processing time was required, no fees have been assessed pursuant to the Department's implementing regulations, 45 CFR Part 5..

If you need any further assistance or would like to discuss any aspect of the records provided please contact either our FOIA Requester Service Center at 770-488-6399 or our FOIA Public Liaison at 770-488-6277.

Sincerely,

A handwritten signature in black ink, appearing to read "Roger Andoh", is positioned below the word "Sincerely,".

Roger Andoh  
CDC/ATSDR FOIA Officer  
Office of the Chief Operating Officer  
(770) 488-6399  
Fax: (404) 235-1852

18-00517-FOIA



CDC Announcement (to all CDC and ATSDR Employees)

CDC<sup>1</sup> has developed the new Operational Policy, ***Records Management***

1. **Summary of Policy:** The comprehensive policy addresses the management of all CDC records, regardless of format, made or received by CDC and its contractual representatives, or in connection with the transaction of public business. It applies to all CDC Centers, Institute, Offices (CIOs) and all CDC employees including full-time equivalent (FTEs), part-time equivalent (PTEs), contractors, and affiliates (interns, fellows, visiting scientists, and locally employed staff).
2. **Reason for Update:** The policy incorporates new NARA and OMB requirements, updated related processes regarding the creation, management, and disposition of federal records, and consolidates several older/outdated related policies into a current and comprehensive document. It also establishes links to new guidance and instructional material.
3. **Related Issuances:** None
4. **Responsible Organization:** Office of the Chief Information Office (OCIO), Management Analysis and Services Office (MASO), Management Analysis Branch (MAB)
5. **Material Superseded:** (a) Records Management (CDC-GA-2005-07, version updated on 02/04/2008), (b) Record Keeping Procedures for Managing E-mails and Attachments that Qualify as Federal Records (CDC-IR-2000-01); (c) Management of Electronic Records (CDC-GA-2007-03); and (d) Use of Electronic Documents for Routine Administrative and Programmatic Purposes (CDC-GA-2008-01)
6. **Recertification:** This document is scheduled for recertification on or before the last working day of July 2019.
7. **Points of Contact:** Mary Wilson, CDC Records Officer, Management Analysis and Services Office (MASO), 770-488-4906, and Jimmy Harrison, (MASO), 770-488-4757.

To go directly to the Policy, enter the following URL into the location line of your browser:  
<http://isp-v-maso-apps.cdc.gov/policy/Doc/Policy2126.pdf>

(s) James D. Seligman  
Chief Information Officer

<sup>1</sup> References to CDC also apply to the Agency for Toxic Substances and Disease Registry (ATSDR).

Category: General Administration

CDC-GA-2005-07 (Formerly CDC-112)

Date of Issue: 7/27/2005, Updated 10/17/2005, Updated 2/4/2008, Updated 07/30/2014

Proponent: Management Analysis and Services Office

Material Superseded: Record Keeping Procedures for Managing E-mails and Attachments That Qualify as Federal Records, 10/17/2005; Management of Electronic Records, 2/4/2008; Use of Electronic Documents for Routine Administrative and Programmatic Purposes, 6/18/2008

## RECORDS MANAGEMENT

### Sections:

1. [PURPOSE](#)
2. [BACKGROUND](#)
3. [POLICY](#)
4. [RESPONSIBILITIES](#)
5. [ABBREVIATIONS AND ACRONYMS](#)
6. [DEFINITIONS](#)
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### Attachments:

- A. [CDC Guidance on Electronic Communication](#)
- B. [CDC Departing Employee, Request for Removal of Documentary Materials](#)

## 1. PURPOSE AND SCOPE

This policy promotes ready access to federal records and research data that will help improve and promote the health of the American public. This comprehensive policy provides general information, requirements, and best practices based upon federal laws and regulations to implement an effective records management program within the Centers for Disease Control and Prevention (CDC)<sup>1</sup>.

The policy addresses all CDC records, regardless of format, made or received by CDC and its contractual representatives or in connection with the transaction of public business. It applies to all CDC Centers, Institute and Offices (CIOs); and all CDC employees, contractors and affiliates (fellows, interns, visiting scientists, and collaborators).

## 2. BACKGROUND

The [Federal Records Act of 1950](#), as amended (44 U.S.C. Chapter 31), requires all federal agencies to make and preserve records containing adequate and proper documentation of their organization, function, policies, decisions, procedures, and essential transactions. Federal records are public property and managed according to applicable laws and regulations<sup>2</sup>. The Act requires agencies to establish a records management program that is a planned,

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<sup>1</sup> References to CDC also apply the Agency for Toxic Substances and Disease Registry.

<sup>2</sup> NARA regulations affecting Federal agencies and their records management programs are found in [Subchapter B of 36 Code of Federal Regulations Chapter XII](#).



coordinated set of policies, procedures, and activities to manage an agency's recorded information.

The National Archives and Records Administration (NARA), established by the Federal Records Act (44 U.S.C. Chapter 21), is the federal government's chief records management agency. NARA is responsible for the custody, use, withdrawal, and preservation of federal records. The Presidential Memorandum, "[Managing Government Records](#)" dated November 28, 2011, also guides records management activities. It instructs the heads of executive departments and agencies to reform the government's records management program, and requires agencies to move toward electronic records management systems where feasible. In addition, the "[Managing Government Records Directive M-12-18](#)," dated August 24<sup>th</sup> 2012, from the Office of Management and Budget (OMB) and NARA, directs the heads of executive departments and agencies to improve and manage government electronic records based upon specified instructions and timelines.

The *CDC Records Management Operational Policy* establishes specific requirements to manage CDC records throughout their lifecycle (creation through disposition). This policy will help CDC's CIOs achieve their programmatic goals, document their accomplishments, and promote ready access to crucial information for CDC staff, partners, and the public, as appropriate. It also facilitates the timely and legal destruction of temporary records, and the historic preservation of permanent records. Most importantly, as promulgated by NARA, this policy authorizes and facilitates the management of official CDC records in accordance with applicable [records management laws and regulations](#).

The policy outlined below contains four major sections: A. General Requirements; B. Creation; C. Maintenance and Use; and D. Disposition. Sections B through D provide links to tools, instructions, and resources that guide the user through the lifecycle phases of all records from creation to disposition, including creation of file plans, records retirement, and the transfer of permanent records to NARA.

### **3. POLICY**

CDC's [Records Management Program](#)

#### **A. [General Requirements](#) for CDC and CIOs:**

- 1) Create, receive, and maintain federal records (hereafter referred to as "records") that provide adequate and proper documentation of CDC's activities, functions, major decisions, and accomplishments.
- 2) Establish, maintain, and support an enterprise-wide Senior Records Liaison (SRL) Network to ensure records management is instituted within each CIO and will:
  - a. Add records management duties and requirements into the position description and critical elements of those personnel assigned these duties.
  - b. Ensure that SRLs have adequate skills, training (including [NARA Federal Records Management Certification](#), CDC Records Management training and other recommended trainings), resources, time, and appropriate authority to perform records management duties.
  - c. Ensure that SRLs coordinate with the Records Officer (RO) frequently on the latest RM policy and guidance from CDC, Department of Health and Human Services



- (HHS), NARA, and OMB. The SRLs should properly distribute these requirements to appropriate personnel, and ensure their implementation within their CIO.
- d. Require that SRLs work through the RO for records management activities such as records retirement and disposition, files set-up and arrangement, and other activities as described in this policy.
  - 3) Create and maintain a [Vital Records Program](#) that ensures CDC Vital Records, regardless of format, are identified and properly managed in the event of the activation of the CDC [Continuity of Operations](#) (COOP) Plan or other localized emergency event. CDC CIOs must work in collaboration with key stakeholders such as the Information Technology Services Office (ITSO), RO, and COOP team, to identify CDC's vital records, and arrange for their use in the event of an emergency. CIOs must integrate vital records requirements into their own specific COOPs and the CDC COOP plan.
  - 4) Provide appropriate records management training in accordance with [NARA guidance](#) and the [HHS Records Management Policy](#). In accordance with these guidelines and policies, the following individuals will do the following:
    - a. **Senior Level Officials** – The CDC Records Officer will provide a briefing on special records keeping requirements for executive level officials within their first 90 days of duty.
    - b. **New Employees** – CDC must ensure that new employees, contractors and affiliates complete mandatory records management training within their first 30 days of duty.
    - c. **New Supervisors** – New supervisors must work with the CDC Records Officer to determine the type of training needed for certain positions. This includes a review of their organization's records program, and the need for their team members to obtain training to identify, preserve, and manage CDC records in accordance with federal laws and regulations. The training will highlight the need to create official files, and ensure that departing employees do not remove records from the possession of the government.
    - d. **Annual Refresher Training** – The CDC Records Management program and CIOs must ensure all employees, contractors, and affiliates complete mandatory records management annual refresher training.
  - 5) Establish an internal departure process that preserves CDC records and follows the requirement of the [CDC In- and Out-Processing Policy](#). This process pertains to anyone departing their existing position, the immediate organization, the agency, or the federal government. It must include a requirement that CDC senior level officials<sup>3</sup> meet with the CDC Records Officer at least 90 days prior to their departure to ensure records under their control --designated as permanent-- are managed appropriately. It also must ensure the preservation of records maintained by these officials, and includes records that are not necessarily saved at lower operational levels, such as calendars, voice mail, and appointments (*for more information on the unique requirements for recordkeeping of government executives see [GRS 23.5](#). Note: To document the departure of high-level government officials and the preservation of permanent and essential records, it is highly recommended to use Attachment B, "CDC Departing Employee Request for Removal of Documentary Material"*).
  - 6) Ensure that all CDC contracts contain provisions that outline record keeping responsibilities consistent with [NARA recommended RM contract language](#), and ensure the retention of federal records by the government after completion of contracts.

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<sup>3</sup> The National Archives and Records Administration (NARA) defines senior level officials as heads of departments and their deputies and assistants; heads of program offices and staff offices including administrators; directors of offices, or equivalent; principal regional officials; and staff assistants to those aforementioned officials, such as special assistants, confidential assistants, and administrative assistants



- 7) Maintain records in an economical and efficient manner, and retire and dispose of them at regular intervals in accordance with the requirements of this policy.
- 8) Collaborate with the CDC Records Officer, the Office of the General Counsel, and other key personnel to ensure the proper management of records associated with Freedom of Information Act and Privacy Act Requests, audits, legal discovery actions and holds, and audits.

B. Creation of Records: CIOs are required to:

- 1) Ensure only authorized users have access to sensitive and restricted records to protect the legal and financial rights of the government and persons affected by its activities.
- 2) Ensure that records are created to provide adequate and proper documentation of CDC's important activities, decisions and accomplishments, and will:
  - a. Protect the legal rights and interests of CDC and the public
  - b. Provide an audit trail for administrative, financial, and legal and scientific needs and requirements
  - c. Provide a historical record of the activities of CDC
- 3) Inventory and schedule records in electronic systems using the Records Management Electronic Systems Inventory and Scheduling application to comply with requirements of the E-Gov. Initiative.
- 4) Comply with the Government Paperwork Elimination Act (Pub. L.105-277) and Executive Order 13514) which promote the automation of records, forms, and related approval processes. This will improve the economical and efficient management of records in the administrative and operational functions of the agency and will:
  - a. Reduce the amount of time to review, approve, and transfer paper-based documents
  - b. Reduce mailing and transfer costs
  - c. Streamline review processes
  - d. Expedite service to internal and external CDC customers
  - e. Facilitate telework productivity through remote access to electronic documents
  - f. Allow for easier retrieval, dissemination, and data collection

C. Maintenance and Use: CIOs are required to:

- 1) Comply with regulatory requirements to manage records in a variety of media such as paper, electronic and audiovisual formats, and which may reside or be transmitted in a wide variety of locations, such as:
  - a. File cabinets
  - b. Data centers
  - c. Social media sites
  - d. Network servers
  - e. Databases
  - f. Electronic systems
- 2) Make official records accessible to authorized staff in file locations/systems, and document the officials' activities according to a designated file structure which includes:
  - a. A centralized list and description of official records, that contains all record formats<sup>4</sup>

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<sup>4</sup> These activities are often essential to provide records for a wide-variety of required purposes including Freedom of Information Act (5 U.S.C. § 552) and Privacy Act (5 U.S.C. § 552a) requests, legal discovery actions and holds, audits and other administrative, scientific and business requirements.

- b. The standardized [arrangement and organization of files](#), with filing arrangements, procedures, and techniques for official records that:
  - o Allow quick access and retrieval of active records
  - o Promote the preservation of historic records
  - o Enable prompt and systematic disposition of temporary records according to an appropriate, approved records control schedule
- 3) Utilize the Records Management Inventory application to perform a comprehensive [records inventory](#), identify new and obsolete records series, update the CIO records control schedules<sup>5</sup> and conduct:
  - a. The regular review and update of instructions and the disposition of current records control schedules through the CDC Records Officer (RO).
  - b. The development of new records control schedules for new programs and unscheduled records through the RO as specified in [36 C.F.R. Part 1226](#), which delineates the requirements for disposition of federal records.
- 4) Manage [legacy \(obsolete\) system](#) data according to records management best practices and regulations.

D. [Disposition](#): CIOs must ensure the following:

- 1) Transfer permanent records to the National Archives, following an [approved records control schedule](#), and utilize the National Archives [Electronic Records Archives \(ERA\)](#) system to transfer them to NARA. .
- 2) [Retire inactive records](#) to an approved offsite storage facility.
- 3) Recycle or dispose of records through appropriate alternative methods following an approved records control schedule for the [disposition of federal records](#).
- 4) Remove inactive records and other documents (non-records) that no longer warrant retention in office space, following an approved records schedule by implementing the following:
  - a. [Records retirement](#) that includes the regular transfer of inactive federal records to a Federal Records Center, or a records retention facility meeting the requirements of 36 C.F.R. Chapter XII, Subparts B and K or disposal, if authorized. Input information about records transferred to an approved offsite facility into the [Records Management database](#).
  - b. Review and approve the regular disposition of records placed in Federal Records Centers as specified by instructions contain in the CDC Records Control Schedule and the General Records Schedules (GRS, used for the disposition of routine administrative records).
- 5) Records must remain in CDC's possession and their disposition determined by an approved Records Control Schedule.
- 6) Assist the CDC RO with the development of [records control schedules](#) when applicable.
- 7) The Records Officer and the Office of the General Counsel will provide instructions for the management of records subject to FOIA and Privacy Act requests and appeals; legal discovery and hold actions; and audits and other special conditions.

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<sup>5</sup> The CDC Records Program recommends that CDC CIOs inventory their records every five years, unless there is reorganization or other event that may require an earlier inventory.



#### **4. RESPONSIBILITIES**

**A. Director, Management Analysis and Services Office (MASO):** The Director of MASO has delegated authority for the overall management and direction of records management at CDC and further delegates these duties to the CDC Records Officer (RO) who:

- 1) Provides technical advice and training to all CDC organizations regarding the establishment and maintenance of effective records management programs
- 2) Leads and manages the agency-wide records management program
- 3) Ensures that CDC senior officials are aware of their programmatic and individual records management responsibilities
- 4) Advises CDC on records management issues and developing records management policies, procedures, guidance and training materials
- 5) Reviews, develops, and coordinates the approval of CDC [records schedules](#)
- 6) Coordinates records management issues with other federal agencies such as the OMB, NARA and the General Services Administration (GSA)
- 7) Conducts periodic evaluations of internal records management programs
- 8) Inventories and schedules CDC electronic systems as required by NARA
- 9) Provides guidance on the requirements to capture and maintain emails which rise to the level of a federal record
- 10) Assists CIOs with the development of resources such as Enterprise Performance Lifecycle (EPLC), Records Management Critical Partner Manual, Unified Process Guide (UPG) and enterprise records management (ERM) system to assist with the planning and creation, use and maintenance and disposition of records
- 11) Serves as the Agency Vital Records Officer and assists with the development a vital records program throughout CDC
- 12) Works directly with CIOs Senior Records Liaisons to operate the CDC Records Management Program and coordinate activities with NARA, HHS and other government agencies as required

#### **B. CDC Chief Information Officer (CDC CIO)**

- 1) Integrates records management requirements into the management of CDC electronic records and systems by coordinating guidelines among the managers of CDC IT resource management programs, systems managers, and systems users
- 2) Ensures that the CDC Records Officer and CDC Enterprise Architecture include records management requirements into the development of new and revised programs, processes, systems and procedures; in relevant information resources management (IRM) strategic planning; and in the determination of information needs for an enterprise records management (ERM) system and Federal Information Planning (FIP) resource requirements

#### **C. Directors of Centers, Institute, and Offices (CIO)**

- 1) Ensure that Executive Level Officials receive a briefing from the CDC Records Officer on their special records keeping requirements within 90 days of employment
- 2) Understand the unique requirements for managing records maintained by executive level officials as outlined in section "3A5" of this policy
- 3) Meet with the CDC Records Officer at least 90 days prior to departure to ensure their records are managed appropriately
- 4) Ensure that records are being managed efficiently and economically



- 5) Establish and support a records management program and its activities to ensure records are properly managed in accordance with NARA, HHS, and CDC records management policy
- 6) Designate a senior records liaison and establish a network of records liaisons to ensure records management is instituted within each CIO and:
  - Incorporate records management duties into their position descriptions and performance measures
  - Ensure the senior records liaisons have adequate skills, training ([NARA Federal Records Management Certification](#), CDC Records Management training, and other recommended trainings), resources, time, and appropriate authority to perform records management duties
  - Ensure senior records liaison coordinates with the RO frequently to ensure the latest RM policy and guidance are properly distributed within each CIO
- 7) Authorize and manage funds for a NARA approved offsite storage facility and (if needed) for records transportation
- 8) Authorize the disposition of CDC records that have met its legal retention period which includes review and approval of records destruction and the transfer of permanent records to NARA<sup>6</sup>
- 9) Consult and follow the [Enterprise Performance Lifecycle](#) (EPLC), Records Management Critical Partner Manual, [United Process Guide \(UPG\)](#), and [SharePoint Records Management Guidance](#) during the appropriate phases related to the development and implementation of electronic systems
- 10) Review electronic systems for conformance to established federal, HHS, and CDC records management procedures, standards, and policies, on a regular schedule to ensure systems conform to proper procedures regarding design and operation
- 11) Establish a vital records program to ensure the availability of records in the event of an emergency or disaster

#### **D. CDC Supervisors and Managers**

- 1) Implement a records management program to create and manage official files in electronic and/or paper form. These files should ensure adequate and proper documentation of activities such as scientific inquiries and audits, and be available for possible use in discovery actions
- 2) Develop records management oversight roles and communication networks with all program units including field offices and other facilities, as appropriate, to ensure that the records management program is implemented throughout the CIO regardless of location
- 3) Create and disseminate directives and operating procedures to supplement agency-wide policy to meet the CIO's unique records management needs
- 4) Send in writing to the CDC RO the name of a designated senior records liaison who will oversee the CIO's records management program
- 5) Ensure that the senior records liaison has appropriate skills, training (NARA Federal Records Management Certification, and CDC Records Management training), resources, time, and authority to perform records management duties
- 6) Inventory and schedule all electronic systems in the Records Management [Electronic Systems Inventory and Scheduling application](#) as required by the [E-Gov Initiative](#)
- 7) Ensure that the EPLC, [Records Management Critical Partner Manual](#), [UPG](#), and [SharePoint Records Management Guidance](#) are consulted and followed during the

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<sup>6</sup> This authority may be delegated to a Management Official



appropriate phases of establishing an Electronic Records Management (ERM) systems or utilizing collaborative sites

#### **E. Senior Records Liaisons**

- 1) Successfully complete NARA Federal Records Management Certification training
- 2) Participate in CDC-sponsored training and outside records management training to maintain knowledge of records management issues
- 3) Collaborate with CDC RO to establish, update and maintain records schedules and implement proper recordkeeping procedures for existing and proposed electronic systems in accordance with CDC's and NARA's requirements
- 4) Oversee the day-to-day operation of the CIO's records management develop file plans and procedures to ensure that records are organized and can be found quickly when needed
- 5) Update and/or establish procedures for their CIOs following CDC and program policies
- 6) Direct that records liaisons properly manage records, regardless of format, within their offices. Evaluate the CIO's records management and vital records programs
- 7) Assist with disposition activities that include: the management of inactive records and associated storage costs and accounts; transfer permanent records to the National Archives; and records destruction in accordance with approved records schedules
- 8) Review records control schedules annually to ensure they are current, and updated as needed
- 9) Ensure confidential records are protected in accordance with Federal and CDC requirements, and manage access lists to ensure the release of sensitive information only to authorized individuals
- 10) Coordinate the identification and maintenance of vital records, and submit an annual list of vital records through senior management to the COOP team
- 11) Initiate and maintain records retirement, transfer, and destruction documentation
- 12) Conduct briefings and training sessions on the records management program
- 13) Review and recommend requests for records management services and systems
- 14) Provide records management briefings for all managers and training to staff within their organizations
- 15) Ensure that the EPLC, [Records Management Critical Partner Manual](#), [UPG](#), and [SharePoint Records Management Guidance](#) are consulted and followed during the appropriate phases of developing and implementing ERM systems
- 16) Immediately notify the CDC Records Officer of any unauthorized destruction of federal records

#### **F. Information Resources and System Managers**

- 1) Collaborate with the CDC RO and/or their senior records liaison to establish, update and maintain records schedules and implement proper records management procedures for existing and proposed electronic systems, following CDC and NARA requirements
- 2) Work with the CDC RO and/or the CIO's senior records liaison to transfer permanent systems to the National Archives according to an approved records schedule and NARA requirements
- 3) Maintain internet- and intranet-based postings that include official records in accordance with CDC and NARA recordkeeping requirements
- 4) Implement appropriate security and protection measures for the management and storage of records
- 5) Perform technical management of email, and monitor and ensure system reliability



## **G. CDC Enterprise Architect**

- 1) Collaborates with others to ensure that all information systems address records management provisions during their planning and development
- 2) Ensure that the EPLC, [Records Management Critical Partner Manual](#), [UPG](#), and [SharePoint Records Management Guidance](#) are consulted and followed during the appropriate phases of developing and implementing ERM systems

## **H. CDC Database Managers**

- 1) Follow identified NARA and CDC records control schedules
- 2) Design and maintain databases that incorporate records retention capabilities and disposition functionalities for electronic records according to NARA and CDC records control schedules
- 3) Design electronic databases to function in accordance with records management regulations contained in NARA Regulations at [36 C.F.R. Part 1236](#).

## **I. Continuity of Operations (COOP) team**

- 1) Work with CDC Records Management team, senior records liaisons, and other key stakeholders to implement the vital records plan to ensure the continuation of designated COOP essential functions
- 2) Ensure that vital records are accessible from designated COOP locations

## **J. All Employees, Contractors and Affiliates (Affiliates include Non-Full Time Equivalent interns and fellows, Visiting Scientists, Locally Employed Staff, volunteers and other partners who have access to CDC records)**

- 1) Ensure that all Federal records are properly scheduled and managed according to approved CDC records control schedules, NARA, and General Records Schedules (GRS), regardless of format, e.g., email, database, system, paper
- 2) Complete mandatory annual records management training
- 3) Ensure Federal records are maintained in official files and not stored in personal files
- 4) Request written permission to remove duplicate records upon departing CDC
- 5) Ensure records removed from a federal facility for purposes of telework are maintained in the same manner as if they had remained in a federal facility
- 6) Secure federal records while traveling e.g., store them in a car trunk instead of a backseat.
- 7) Immediately notify the CDC RO and/or Senior Records Liaison of any possible unauthorized destruction(s) of federal records

## **5. ABBREVIATIONS AND ACRONYMS**

**CDC CIO** – CDC Chief Information Officer

**CFR** – Code of Federal Regulations

**CIO** – Centers, Institute, and Offices

**COOP** – Continuity of Operations

**EPLC** – Enterprise Performance Lifecycle

**FOIA** – Freedom of Information Act

**FRC** – Federal Records Center

**FTE** – Full-Time Equivalent

**GRS** – General Records Control Schedules

**GSA** – General Services Administration

**HHS** – Department of Health and Human Services

**MASO** – Management Analysis and Services Office

**NARA** – National Archives and Records Administration

**OGC** – Office of the General Counsel

**OMB** – Office of Management and Budget

**OSSAM** – Office of Safety, Security, and Asset Management

**PD** – Position Description

**PUB. L.** – Public Law

**RO** – Records Officer

**UPG** – Unified Process Guide

**USC** – United States Code

## **6. DEFINITIONS**

**Administrative records** - Records relating to budget, personnel, supply, and similar housekeeping, or facilitative functions common to most agencies.

**Documentary materials** - A collective term for federal records, non-record materials, and personal papers that refers to all media containing recorded information, whatever the method(s) or circumstance(s) of recording. Federal records may be created on any physical media including, paper, film (microfilm, photographic film, x-ray), disk (optical, magnetic, video, audio), and tape (magnetic, video, audio). The method of recording information may be manual, mechanical, photographic, electronic, or any combination of these or other technologies.

**Classification** - (1) The process of determining the sequence or order in which to arrange documents. (2) See **Filing System**. (3) The process or result of identifying records containing national security information.

**Disposition** - (1) The actions taken regarding records no longer needed in current office space. These actions include transfer to agency storage facilities or Federal records centers, transfer from one Federal agency to another, transfer of permanent records to the National Archives, and disposal of temporary records. Disposition is the third stage of the records life cycle. (2) The actions taken regarding non-record materials when no longer needed, including screening and destruction.

**Filing System** – A set of policies and procedures to organize and identify files or documents to facilitate their retrieval, use, and disposition: Sometimes called a recordkeeping system.

**Federal Records Center** - Regional storage facilities operated by NARA for the purpose of efficiently maintaining and disposing of inactive federal records.

**Lifecycle of a Record** - The management concept that records pass through three stages: creation, maintenance and use, and disposition.

**National Archives** - The repository of records identified as historic and as [essential evidence](#) to document the workings of the federal government.

**Official project files** - Case or project files that represent official records documenting a specific action, event, person, place, project, or other matter, and placed in the possession of the office that created them.

**Program records** - Records documenting the unique, substantive functions for which an agency is responsible; also known as “programmatic records.” The legally required retention period for CDC programmatic records is found in the CDC Records Control Schedule B-321, the ATSDR Schedule B-371 and the NARA-produced General Records Control Schedules.

**Records** - “... all books, papers, maps, photographs, machine readable materials, or other documentary materials, regardless of physical form or characteristics, made or received by an agency of the United States Government under federal law or in connection with the transaction of public business and preserved or appropriate for preservation by that agency or its legitimate successor as evidence of the organization, functions, policies, decisions, procedures, operations, or other activities of the Government or because of the informational value of data in them. Library and museum material made or acquired and preserved solely for reference or exhibition purposes, extra copies of documents preserved only for convenience of reference and stocks of publications and of processed documents are not included.” ([44 U.S.C. § 3301](#))

As defined in 44 U.S.C. § 3301, documentary materials are federal records when they are made or received by a federal agency in connection with the transaction of government business, regardless of media. They are maintained or should be maintained by the agency to document how it was organized, what functions it performed, how it carried out those functions, how it related to other agencies and to the public, or because the materials contain information of value to the agency. Records may include such material as printed material, posters, video tapes, DVDs, e-mails, web sites, faxes, etc.

**Records control schedules** - Schedules for the retention of federal records approved by the archivist of the United States. The legally required retention period for CDC programmatic records are found in the [CDC Records Control Schedule](#), the [ATSDR Schedule B-371](#) and the [NARA-produced General Records Control Schedules](#).



**Records disposition** - Actions taken on records once their legal retention periods have ended. Disposition can include records retirement, donation, transfer to NARA as a permanent record, or records destruction.

**Retirement** - The transfer of records to agency storage facilities or a federal records center.

**Vital records** – 1) Records that are essential to resume or continue operations; 2) Those necessary to recreate the organization's legal and financial position; and /or 3) Those necessary to preserve the rights of the organization, its employees, and others associated with the organization.

**Working files/working papers** - Documents such as rough notes, calculations, or drafts assembled or created and used to prepare or analyze other documents. Federal records may be created on any physical media including, paper, film (microfilm, photographic film, x-ray), disk (optical, magnetic, video, audio), and tape (magnetic, video, audio). The method of recording information may be manual, mechanical, photographic, electronic, or any combination of these or other technologies.

Individuals often keep working files in their office space during the course of work on a project. However, after completion of the project these documents should be retained with other substantive project records if they meet the definition of a “federal record” (A [Records Management Glossary](#) is available on the MASO Records Management website.).

## 7. REFERENCES

- A. [Agency Records Management Programs](#), 36 C.F.R. Subsections §§1220.30, 32, 34.
- B. [PKI digital signature records retention NARA, General Records Schedule 24. Item 13.](#)
- C. CDC Office of Safety, Security, and Asset Management (OSSAM) website, (to be developed).
- D. [CDC Records Management](#) Webpage.
- E. [Concealment, Removal, or Mutilation Generally](#), 18 U.S.C. Chapter 101.
- F. [Definition of Records](#), 44 U.S.C. Chapter 3301.
- G. [Disposition of Federal Records, A Records Management Handbook](#). NARA, (1997).
- H. [Government Paperwork Elimination Act \(GPEA\), Records Management Guidance for Agencies Implementing Electronic Signature Technologies](#), NARA, October 18, 2000.
- I. [HHS OCIO Policy for Records Management](#). HHS, Office of the Chief Information Officer, January 2008.
- J. [HHS Policy for Records Holds](#). HHS, Office of the Chief Information Officer, January 20, 2011.
- K. [HHS Records Management Procedures Manual, Appendix D – Sample Vital Records](#). HHS, Office of the Chief Information Officer, December 2008.
- L. [National Archives and Records Administration \(NARA\) website](#)
- M. [National Security Information](#), CDC-IS-2012-01, DATE OF ISSUE: 11/19/2012
- N. [National Security Information Manual. HHS, Office of Security and Drug Testing](#), February q 2005.
- O. [The Paperwork Elimination Act](#), Pub.L. 105-277.
- P. [Records Management Guidance for PKI Digital Signature Authenticated and Secured Transaction Records](#), NARA, March 11, 2005.
- Q. [Vital Records](#). CDC Records Management Webpage, last updated May 2010.

## Attachment A

### GENERAL GUIDANCE ON ELECTRONIC COMMUNICATIONS

#### Email

Email records management relies on the individual to classify, store, and dispose of their emails according to an approved records control schedule. Managing email requires different tactics from other records because of the volume, informality, ease of creation and forwarding, attachments, and metadata. Email, as with other records, is dependent upon its content to determine if it is a Federal record. Some very important issues as it relates to records management and e-mails include:

- **Federal Record** – an email that relates to the business of the agency, retained as a record because it has policy and programmatic value. It may include background material, or documents a substantive action or decision taken. NARA (National Archives and Records Administration) approved records control schedules determines the legal disposition of records. Also, see the definition of federal records in section 6 of this policy.
- **FOIA** – do not dispose of e-mails requested under the Freedom of Information Act until the conclusion of all resolutions and appeals.
- **E-mails Under Litigation Hold(s)** – In accordance with a litigation hold announcement issued by the HHS OGC and/or DOJ, preserve e-mails relevant to a specific or reasonably anticipated litigation matter in their native electronic format.
- **Transitory email** – emails which are of nominal value and used to facilitate minor agency business. It is of short-term value and does not support or contribute to the long-term business needs of the organization. Disposal is authorized after 90 days, and transfer to a recordkeeping system not required.
- **Non-records email** – email that conveys issues not related to government business or contains no documentation of decisions, information, or an action taken. The items may consist of routing and transmittal slips and routine informational notices.
- **Personal email** – email of a personal nature and which has no relevance to the business and activities of the organization.

#### Determining a Federal Records Checklist

The purpose of the checklists is to provide assistance with determining a Federal record and managing your emails. The checklists **are not** comprehensive and should you need more assistance please contact your [senior records liaison](#) or [CDC Records Officer](#). For more information on managing emails <http://intranet.cdc.gov/maso/RM/pdfs/Emailmanagement.pdf>.

#### Instructions for using “Determining a Federal Record” checklist

1. Read each question then check “yes” or “no”
2. Count how many “yes” answers, and if one or more of your answers are “yes,” then there is a possibility that the material is a Federal record
3. If all answers were “no,” then the material is not a Federal record.

(Table continued on the next page)



Attachment A (continued)

<b>DETERMINING A FEDERAL RECORD</b>		
Was the document created or received while conducting Federal business or complying with law?	Yes	No
Does the document provide substantive comments on an action, for example does the information add to the understanding of the formulation or execution of an action?	Yes	No
Is this the only place the document resides?	Yes	No
Is your office the official record?	Yes	No
Was the document sent to high-level officials for approval and or comments?	Yes	No
Does the document convey information of value on important CDC activities, for example the document adds to the understanding of operations and responsibilities?	Yes	No
Does the document provide insight to significant CDC decisions and commitments reached?	Yes	No
Does the document have policy and programmatic value and include an attachment(s)?	Yes	No
Does the document record administrative action, a policy decision, or special compilation or research?	Yes	No
Does the document sent and received record actions of a program, organization, and or function?	Yes	No

**Instructions for using “Determining a Non-Record” checklist**

1. Read each question then check “yes” or “no”
2. Count how many “no” answers, if one or more of your answers were “no,” then there is a possibility that the material is a Federal record
3. If all answers were “yes,” then the material is not a Federal record.

<b>DETERMINING A NON-RECORD</b>		
Is the document a routine communication, for example response needed for standard inquires, replies to request for information, announcements, meeting notices and reminders, and unsolicited materials?	Yes	No
Is the document of a personal nature?	Yes	No
Is the document an issuance upon which no action is taken?	Yes	No
Is the document Spam?	Yes	No
Is the document a listserv message?	Yes	No

**Instructions for using “Managing Your Email” checklist**

The checklist is for managers to use in evaluating their current processes in managing emails. Further training or consultation with the CDC Records Officer should be considered for those questions answered with a “no.”

Attachment A (continued)

<b>MANAGING YOUR EMAIL</b>		
Are individual employees educated about their responsibilities for managing emails as records?	Yes	No
All employees are able to distinguish between emails relating to the official business of CDC and those that have short-term value or are of a personal nature?	Yes	No
Can anyone who has sufficient access privileges read emails that form part of a Federal record?	Yes	No
Procedures are in place to ensure that emails classified as Federal records cannot be altered after dispatch or receipt?	Yes	No
Are you confident that emails related to documenting commitments and obligations made by you and your staffs are recorded, complete, and retrievable?	Yes	No
Is a corporate e-mail account available to employees, where they can file documents that are federal records?	Yes	No
An electronic shared environment has been established for employees, where they can file documents that are federal records?	Yes	No
Email folders are established according to file plan (information includes date span, which allows for disposition based upon approved records control schedules?)	Yes	No
Documents are preserved and accessible for historical, audit and financial, legal, and scientific purposes?	Yes	No
Does Email subject lines have meaningful context to assist with quick retrieval?	Yes	No
Employees understand the responsibility to identify and manage a record belongs to its author (if internal) or the chief recipient (if received from an outside organization)?	Yes	No
Do project team members understand that a specific individual is assigned the responsibility for filing the record, if the documentation of the project or a collaborative effort is copied to multiple addresses?	Yes	No
Are emails (declared as Federal records) classified and filed with other related documents (paper or electronic) on the same business activity?	Yes	No
Important e-mails are sent to an appropriate files custodian, when an employee departs their position?	Yes	No



## Attachment A (continued)

For further guidance on email management:

- [HHS Policy for Records Management for Emails](#)
- [36 Code of Federal Regulations 1236.22 – What are the additional requirements for managing electronic mail records?](#)

### *Social Media Communications*

Electronic communications have become a part of our daily operations as government employees and it is just as important as phone conversations and messages, and physical documents created while conducting business. CDC offers several options of communications that Federal employees and the public can use to share information.

Federal records on social media sites must comply with all records management laws, regulations, and policies. Successful compliance involves collaboration between CDC records management staff, web managers, social media managers, information technology staff, privacy and information security staff and other key stakeholders. These partnerships will ensure that Federal records are accessible and retrievable throughout entire records' lifecycle and disposition is applied according to an approved records control schedule.

For further guidance on social media tools and best practices:

- [NARA Bulletin 2011-02 – Guidance on Managing Records in Web 2.0/Social Media Platforms](#)
- [NARA Guidance on Managing Web Records](#)
- [Implications of Recent Web Technologies for NARA Web Guidance](#)
- [CDC Social Media Tools Guidelines and Best Practices](#)

**Attachment B**

**CDC DEPARTING EMPLOYEE  
REQUEST FOR REMOVAL OF DOCUMENTARY MATERIALS**

<b>NAME:</b>	<b>TITLE:</b>	
<b>OFFICE:</b>	<b>WORK TELEPHONE NUMBER:</b>	<b>PLANNED DEPARTURE DATE:</b>
<input type="checkbox"/> I request the attached list* of documentary materials for removal from CDC/ATSDR in accordance with CDC Records Management Policy. The list does not include any Federal records, or copies of records relating to any pending, potential, or expected civil, criminal, or administrative proceeding, or other program information, that if released, would impair or prejudice the outcome of the proceeding or Government policy determinations, decisions, or other actions.		
<b><i>*A list of requested document(s) must be attached to this request.</i></b>		
<input type="checkbox"/> By my signature I understand that I am prevented from removing records covered under the following: Freedom of Information Act (5 U.S.C. § 552) exemptions, Privacy Act (5 U.S.C. § 552a), National Security (as required in the <a href="#">CDC National Security Information Policy</a> ), Sections 301d and 308d of the Public Health Service Act, (42 U.S.C. §§ 241(d), 242m(d)) Assurance of Confidentiality Agreement), and other restrictions as they might apply (e.g. Trade Secret Data and copyrighted material).		
<input type="checkbox"/> I agree to keep all requested materials confidential and will not disclose their contents or existence without prior approval from appropriate CDC/ATSDR and CIO Official(s).		
<b>SIGNATURE:</b>		<b>DATE:</b>

<b>DECIDING OFFICIALS:</b>	
<b>SUPERVISOR/MANAGEMENT OFFICIAL</b>	<b>DATE:</b>
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Other Comments	
<b>LEGAL COUNSEL OR RECORDS OFFICER:</b>	<b>DATE:</b>
<b>PENALTIES FOR UNLAWFUL REMOVAL OF RECORDS:</b> Criminal penalties will be enforced for the	



unlawful removal or destruction of Federal records based on 18 U.S.C. § 2071, and for the unlawful disclosure of certain information pertaining to national security in accordance with 18 U.S.C. Sections 641, 794, 798, and 952 and CDC and HHS policies.

[illegible]

Reason for Requesting Materials





**Office of the Chief Information Officer  
Office of the Assistant Secretary for Administration  
Department of Health and Human Services**

**HHS Policy  
for  
Records Management**

**June 22, 2016**

**Project:  
Document Number:**

**HHS RM Policy  
HHS-2016-0004.002**

2016-0004.002	HHS Policy for RM	002	Status: Approved
Last Review Date:	Next Review Date:	RM Team	Approved by: Beth Anne Killoran

OCIO is responsible for development and management of the HHS Records Management policy. Please send any recommended changes via email to [hhsrecordsmanagement@hhs.gov](mailto:hhsrecordsmanagement@hhs.gov).

Effective Date: This instruction is effective 22 June 2016, and supersedes all other versions.



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## **1. Nature of Changes**

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This policy supersedes HHS-OCIO-2007-0004.001, HHS Policy for Records Management dated January 30, 2008

## **2. Purpose**

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The purpose of this policy is to establish the principles, responsibilities, and requirements for managing U.S. Department of Health and Human Services (HHS) records. This policy provides the framework for records management program guidance and operating procedures. This policy does not address the supplemental preservation requirements for records associated with litigation, investigations, and audit matters.

## **3. Background**

---

The Federal Records Act of 1950 requires all federal agencies to create and preserve records that document the agency's organization, function, policies, decisions, procedures, and transactions. These records must be managed in accordance with subchapter B, chapter XII, of Title 36, Code of Federal Regulations (CFR) and chapters 29, 31, 33, and 35 of Title 44, United States Code.

Additionally, the Federal Records Act calls for agencies to establish a records management program consisting of policies, procedures, and activities to manage recorded information.

Records serve as the Agency's memory; effective and efficient management of records provides the information foundation for decision-making at all levels, mission planning and operations, personnel services, legal inquiries, business continuity, and preservation of U.S. history.

## **4. Scope**

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This policy applies to all HHS OpDivs and contractors conducting business for, and on behalf of the Department, through contractual relationships and service level agreements. Within this policy, the term OpDiv includes all Staff Divisions (StaffDivs). OpDivs and StaffDivs may develop and implement more specific policies and procedures consistent with the overarching HHS Records Management Policy.

This policy does not supersede any other applicable law, court order, existing labor management, more stringent retention standard or agency directive to include the HHS Policy for Holds on Records and other Documentary Materials ("HHS Litigation Hold Policy") in effect as of the date of this policy.

## **5. Records Management Policy**

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In order to maintain all Federal records in accordance with applicable statutory and regulatory requirements, each OpDiv and StaffDiv is required to establish and maintain a records management program meeting the following minimum requirements:



## 5.1 Identification of Records:

Records in all media must be properly identified. A record is:

All recorded information, regardless of form or characteristics, made or received by a Federal agency under Federal law or in connection with the transaction of public business and preserved as appropriate for preservation by that agency or its legitimate successor as evidence of the organization, functions, policies, decisions, procedures, operations, or other activities of the United States Government or because of the informational value of data in them, excluding library and museum material made or acquired and preserved solely for reference or exhibition purposes; or duplicate copies of records preserved only for convenience. (44 U.S.C. 3301).

## 5.2 Adequate and Proper Documentation:

OpDivs must establish formal files with documented classification schemes or electronic recordkeeping systems with full records management functionality. Consistent and proper implementation of recordkeeping requirements will ensure the accuracy and integrity of documentation created and transmitted electronically within the OpDiv, among OpDivs, and between OpDivs and the public.

## 5.3 Electronic Records:

Unstructured electronic records to include records created using applications, electronic mail, and other messaging applications, word processing, or presentation software must be managed in a records management solution. E-mail records must be retained in an appropriate electronic system that supports records management and litigation requirements (which may include preservation in-place models), including the capability to identify, retrieve, and retain the records for as long as they are needed.

All permanent records will be managed electronically to the fullest extent possible for eventual transfer and accessioning by NARA in an electronic format. OpDivs must develop and begin to implement plans to achieve this transition from hard-copy format or other analog formats (e.g., microfiche, microfilm, analog video, and analog audio).

### 5.3.1 Conducting Official Business using Personally-Owned Devices:

In compliance with HHS Information Systems Security and Privacy Policy dated July 30, 2014, HHS employees are not prohibited from using mobile devices; such as non-government furnished laptops, cell and smart phones, e-readers, and tablets; however the use of these devices to create or store government records is strongly discouraged. When personally-owned devices are used employees must adhere to OpDiv-defined identification and authentication controls.

When temporary use of Non-Government Equipment is approved and the proper OpDiv protocols for approval and security are adhered to, an employee must:

- (a) Transmit a copy of the record(s) that were created to their official Government Equipment via electronic message or other agency approved transmission device no later than 20 days after the original creation of the record.

- (b) Dispose the duplicate copy from their Non-Government Equipment after the record copy has been transmitted onto their government equipment.

HHS employees are prohibited from using the following personally-owned devices to transfer or store government records: Removable hard drives, Locally attached hard drives, USB removable media, ATA Solid State Drives, SCSI Solid State Drives, PCI Express Devices, Embedded Flash on Boards and Devices, Dynamic Random Access Memory, Electronically Alterable Programmable Read Only Memory (PROM) and Electronically Erasable PROM.

#### 5.4 Control and Custody of Records:

Agency records are the property of the federal government, not the property of individual employees, and must not be removed from the Department without proper authority.

#### 5.5 Chain of Custody:

Chain of custody refers to the chronological documentation or paper trail, showing custody, control, transfer and disposition of Federal records for departing employees.

All departing employees shall:

- 5.5.1 Identify and separate all employee Federal Records from Non-Record Materials and Personal Papers.

- 5.5.2 Purge non-record materials, personal papers and extra copies.

- 5.5.3 Complete a Chain of Custody document that certifies that they have turned over to their successor, or to the appropriate official, all Federal records for which they were responsible during their tenure. (See Attachment 3 for Chain of Custody document)  
Note: Chain of Custody document must be signed by departing employee and supervisor.

All supervisors or appropriate officials shall:

- 5.5.4 Ensure that departing employee's Federal records have been identified and properly disposed of in accordance with approved records disposition schedules before the employee's departure.

- 5.5.5 Ensure that the departing employee's Federal records have been turned over to the appropriate successor or official to permit continued preservation of the Department Federal records.

- 5.5.6 Ensure that the Chain of Custody document has been completed and signed before the employee departs the agency.

Records Managers, Records Liaison Officers or Records Custodians:

- 5.5.7 Ensure chain of custody procedures are implemented for the proper transfer of Federal records from the departing employee to the appropriate successor.



5.5.8 Ensure receipt of the completed Chain of Custody document for proper transfer to the appropriate successor of the records.

## 5.6 Organization and Maintenance of Records:

Records shall be maintained so that they are easily retrievable. Record systems shall be designed to furnish information necessary to protect the legal and financial rights of the Government and persons directly affected by the Government's actions. If an electronic content management system with recordkeeping functionality is not available, the record must be printed and filed in a paper recordkeeping system. Permanent electronic records, microform, and audiovisual records are relatively fragile and degrade in a shorter time compared to paper records; therefore they should be transferred promptly to the National Archives for permanent preservation.

## 5.7 File Plans:

Each HHS OpDiv and StaffDiv must maintain a centralized file plan that includes the title and description of its records, including electronic media. Each HHS OpDiv and StaffDiv must standardize file arrangement systems, filing procedures, and filing techniques of records. File plans must be designed to enhance the current use of the files, the preservation of archival records, and the prompt and systematic disposition of permanent and temporary records according to the appropriate records schedule.

## 5.8 NARA-Approved Records Schedule:

Record schedules will be developed for all HHS records. Approval of the schedules must be obtained from NARA in accordance with Subchapter B, chapter XII of Title 36, Code of Federal Regulations.

HHS Records must be listed and described in an approved records schedule, and shall be disposed of only as authorized by that schedule. HHS OpDivs must update their records schedules when there are program changes that will result in the establishment of new types of records and the transfer or termination of records, or an increase or decrease in the retention time of the records. (36 CFR 1224.10(c)).

## 5.9 Essential Records (36 CFR 1223.1 et seq.):

Create and implement a plan to identify and protect records and information necessary for HHS to continue its key functions and activities in the event of an emergency or disaster.

5.9.1 Each HHS OpDiv and OS StaffDiv is responsible for establishing an Essential Records program.

5.9.2 Each HHS OpDiv and OS StaffDiv is responsible for selecting and safeguarding those records that would be required to ensure continuity of essential HHS functions during and following a national disaster.

5.9.3 Disaster Recovery (DR) critical, essential records should be identified as business continuity planning and should be part of the OpDiv and StaffDiv's COOP plan. If there are special electronic storage requirements, cost implications will be incurred.

#### 5.10 Training:

Each HHS OpDiv and StaffDiv must provide records management training to all appropriate staff to ensure they are aware of their responsibilities to maintain and safeguard Department records, including the obligations under this Policy and the HHS Litigation Holds Policy.

Formal Records Management Training courses:

##### 5.10.1 New Employee Orientation:

Each HHS new employee shall receive records orientation training within their first 30 days of duty.

##### 5.10.2 Annual Training:

HHS personnel will receive overview records management training annually to understand their responsibilities in managing HHS records and how to carry out these responsibilities. The records management training must be completed by the established completion date (36 CFR 1220.34(f)).

##### 5.10.3 Senior Officials Awareness Training:

Each HHS OpDiv and StaffDiv must provide training for:

- (a) Incoming Senior Officials and Political Appointees on the importance of appropriately managing records under their immediate control.
- (b) Departing Senior Officials and Political Appointees on the appropriate preservation and disposition of their records.

#### 5.11 Contractor Employee Training:

All contractor employees who have access to (1) HHS Federal Information or a Federal information system or (2) personally identifiable information, shall complete the applicable OpDiv Records Management training before performing any work under their contract. Thereafter, the employees shall complete annual Records Management training throughout the life of the contract. The Contractor shall also ensure subcontractor compliance with this training requirement.

#### 5.12 Social Media and Instant Messaging:

The use of social media and instant messaging may create federal records that must be captured and managed in compliance with Federal records management laws, regulations, and policies. OpDivs must identify these federal records and determine how they will be managed. If the OpDiv has identified social media content as federal records, they must



determine whether an existing disposition authority applies, including the General Records Schedule (GRS). If an existing authority does not cover the content, a new schedule must be developed. OpDivs should develop a new records schedule if social media and instant messaging users enhance the content by adding comments, metadata or other information that becomes part of the complete record.

#### 5.13 Formal Evaluations:

OpDivs will conduct a formal evaluation on two of their records management programs annually. The goal of the evaluations is to measure the effectiveness of records management programs and practices and to ensure that they comply with NARA regulations. Formal evaluations are intended to provide agencies with information they may use to measure compliance and target resources within areas requiring improvement.

## 6. Roles and Responsibilities

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### 6.1 HHS Assistant Secretary for Administration:

- 6.1.1 Serves as the Senior Agency Official (SAO) for Records Management. Delegates oversight responsibility for the Department-wide records management program to the CIO.
- 6.1.2 Has direct responsibility for ensuring that the department or agency efficiently and appropriately complies with all applicable records management statutes, regulations, NARA policy, and Presidential Directives.
- 6.1.3 Makes adjustments to agency practices, personnel, and funding as may be necessary to ensure compliance and support the business needs of the department or agency.

### 6.2 HHS Chief Information Officer (CIO):

Provides oversight of the Department-wide records management program. This responsibility includes the following:

- 6.2.1 Appointing the HHS Records Officer to guide and coordinate the HHS Records Management Program. The HHS Records Officer collaborates with HHS OpDivs and NARA to execute the HHS Records Management Program in accordance with this instruction.
- 6.2.2 Integrating records management procedures and activities into HHS Information Resources Management (IRM) policy and planning.
- 6.2.3 Reviewing and making recommendations on requests for funding and acquisition of electronic records management systems in accordance with information technology, capital planning, and investment control procedures.

### 6.3 HHS Records Officer (RO):

HHS RO is responsible for the implementation of the Department-wide records management program. This responsibility includes the following:

- 6.3.1 Serving as the Department's representative with NARA, other federal agencies, and external organizations on matters pertaining to records management.
- 6.3.2 Providing leadership and guidance to ensure uniformity in records management activities throughout the Department.
- 6.3.3 Conducting periodic compliance evaluations of records management programs.
- 6.3.4 Developing policies, standards, and procedures for records management.
- 6.3.5 Ensuring all HHS employees including senior officials and contractors are aware of their programmatic and individual records management responsibilities.
- 6.3.6 Coordinating records management issues with other federal and regulatory agencies, including NARA, OMB, GSA, GAO, and OPM.
- 6.3.7 Providing records management expertise and participating in the review and development of proposed electronic records management systems
- 6.3.8 Coordinating the development and implementation of the HHS records program.
- 6.3.9 Providing guidance and operational support for the implementation of litigation holds and other types of legally required holds on records and other documentary materials.
- 6.3.10 Providing guidance to the OpDiv ROs to ensure compliance with Records Management principles and policies in all phases of the Enterprise Performance Life Cycle (EPLC) process.

#### 6.4 OpDiv Chief Information Officers (CIOs):

OpDiv CIO's or Designated Senior Official responsibilities include the following:

- 6.4.1 Designating ROs to oversee the records management program. Recommend designation of Records Managers (RMs) to support the OpDiv ROs in the implementation of recordkeeping requirements for major programmatic and administrative records.
- 6.4.2 Ensuring the OpDiv ROs and StaffDiv RMs have adequate skills, training, resources, time, and appropriate authority to execute duties assigned.
- 6.4.3 Ensuring the implementation of a records management program within their area of responsibility to accomplish the objectives identified in federal regulations and HHS policies and procedures.
- 6.4.4 Ensuring OpDiv ROs incorporate RM principles and policies in all phases of the EPLC process.
- 6.4.5 Requesting funds for records storage costs.

6.4.6 Ensuring ROs are adequately trained and remain current on e-mail policies and procedures.

6.5 OpDiv Records Officers (ROs):

OpDiv ROs are responsible for:

- 6.5.1 Serving as the official overseeing the OpDiv's records management program.
- 6.5.2 Serving as the primary official who coordinates the OpDiv's Records Management matters with NARA and other oversight agencies.
- 6.5.3 Creating and maintaining a network of RMs and Records Liaisons responsible for overseeing the Records Management program in the OpDiv and regions.
- 6.5.4 Developing and disseminating instructions and operating procedures, as needed, supplementing the HHS-wide policy to meet the unique Records Management requirements of their organization.
- 6.5.5 Coordinating, developing and updating comprehensive records disposition schedules for all programmatic records regardless of media.
- 6.5.6 Ensuring that recordkeeping requirements are established, implemented, and periodically updated for all offices at all levels and all record media.
- 6.5.7 Disseminating notices and instructions for litigation holds and other types of legally required holds in accordance with OGC, HHS RO, and HHS Holds Litigation Holds Policy guidance.
- 6.5.8 Providing Records Management training in accordance with this policy to ensure compliance with the Federal Records Act.
- 6.5.9 Ensuring compliance with Records Management principles and policies in all phases of the EPLC process.
- 6.5.10 Coordinating fiscal year (FY) interagency agreement with NARA and agency budget officials for the storage and servicing of records.
- 6.5.11 Conducting annual audits for records management retention compliance.
- 6.5.12 Ensuring compliance with federal and HHS records management policies and directives.
- 6.5.13 Ensuring Records Management training is conducted for all employees.
- 6.5.14 Completing requirements for NARA certificate of Federal Records Management Training. New incumbents must obtain certificate within one year of assuming the position of OpDiv RO.



6.5.15 Conducting formal evaluation to measure the effectiveness of OpDiv's records management programs and practices.

6.6 OS StaffDiv Records Managers (RM) and Record Liaison Officers (RLO):

The RMs and RLOs are responsible for:

- 6.6.1 Identifying record keeping requirements for programmatic and administrative records.
- 6.6.2 Evaluating the value of records within their span of responsibility to serve as a basis for assigning records retention and disposition instructions.
- 6.6.3 Developing official comprehensive file plans and periodically reviewing them to ensure they are updated.
- 6.6.4 Drafting and updating records schedules for records created and maintained by their organization.
- 6.6.5 Implementing approved records disposition schedules to ensure that records are managed in accordance with all phases of the records lifecycle.
- 6.6.6 Developing a process to ensure records are not unlawfully removed from HHS by current or departing officials, employees, or contractors.

6.7 OpDiv Records Liaisons (RL):

Records Liaisons are responsible for:

- 6.7.1 Managing office records to ensure compliance with guidance and instructions issued by the RM and RL.
- 6.7.2 Ensuring all office records are listed in the office file plan and are described accurately in the agency's records schedule. Communicating with the records manager if assistance is required.
- 6.7.3 Following the agency's records schedule to ensure the proper disposition of the office's records, including:
  - (a) Systematic file cutoffs
  - (b) Retirement of eligible records to a records center
  - (c) Prompt disposal of temporary records when their retention periods expire
  - (d) Timely transfer of permanent records to NARA
  - (e) Ensuring personnel do not commingle personal papers, non-records and federal records
- 6.7.4 Assisting the program manager in implementing procedures to prevent departing employees from destroying ineligible records or removing records from the agency's custody.

6.7.5 Cooperating with the RLO and RM in periodic evaluations of the office's records.

#### 6.8 Management/Supervisory Officials:

Managers and Supervisors are responsible for:

- 6.8.1 Ensuring federal employees, contractors, and interns are aware of and adhere to HHS Records policies.
- 6.8.2 Ensuring federal employees, contractors, and interns complete initial and annual records management training.
- 6.8.3 Ensuring departing employee's record materials, including e-mail records, have been reviewed prior to the employee's departure. Ensuring departing employees comply with policies and procedures regarding preservation, transfer and deleting of records.

#### 6.9 HHS Employees:

All HHS federal employees, contractors, and interns are responsible for:

- 6.9.1 Creating and maintaining records necessary to document the Agency's official activities and to carry out their assigned duties.
- 6.9.2 Maintaining records in a safe storage area that promotes efficient retrieval in accordance with established filing procedures and plans.
- 6.9.3 Maintaining personal papers and non-record materials separate from official HHS records.
- 6.9.4 Avoiding duplicate recordkeeping unless necessary or required (e.g., under HHS Litigation Holds Policy).
- 6.9.5 Disposing of records in accordance with approved records disposition schedules, and departmental policies. Records must never be removed from HHS without proper authorization.
- 6.9.6 Adhering to the HHS e-mail policies.
- 6.9.7 Notifying the RO of e-mail retention issues and working collaboratively to address all issues.
- 6.9.8 Seeking guidance from their supervisors or RO when in doubt about e-mail retention standards.
- 6.9.9 Completing a comprehensive records management training within the first 30 days of employment will suffice for the annual records management training requirement. Thereafter, employees are required to complete the records management training annually.

6.9.10 Completing the Employee Departure Process before separation from HHS (See Attachment 2).

6.9.11 Reporting incidents immediately to their supervisors if records are inadvertently removed, altered, lost or destroyed.

6.10 Freedom of Information Act (FOIA) Official:

The FOIA official provides a copy of a federal record, if appropriate, for release to the general public.

6.11 The Office of the General Counsel:

The Office of the General Counsel approves disposition schedules for official records and provides instructions for implementing litigation holds required to comply with legal requirements.

6.12 The Office of Inspector General:

The Office of Inspector General assists in investigating the unauthorized removal of records or the actual and potential threats to records (e.g. removal, alteration, or deliberate or accidental destruction).

6.13 The Department Enterprise Architect (EA):

The Department EA, as delegated by the OCIO, will work in conjunction with OpDiv's EA and Capital Planning Investment Control (CPIC) to ensure that any and all systems development plans, schedules, work breakdown structures, business cases, and OMB Exhibits 300 ("Capital Asset Plan and Business Case Summary") address records management provisions in the planning and development stages of the lifecycle.

6.14 The OpDiv Chief Information Security Officer (CISO):

The OpDiv CISO is responsible for ensuring the technical security of the OpDiv electronic data records according to HHS and OpDiv standards.

6.15 IT Infrastructure and Operations and System Managers:

IT infrastructure and operations and system managers are responsible for:

6.15.1 Working with the OpDiv RO to establish and update records schedules for electronic systems.

6.15.2 Ensuring that all phases of the EPLC process comply with HHS Records Management principles and policies.

6.15.3 Ensuring that information systems intended to carry out electronic records management align with NARA's and HHS's requirements for records stored in an



electronic recordkeeping systems.

- 6.15.4 Maintaining electronic information systems in accordance with approved records schedules and NARA requirements.
- 6.15.5 Working with the OpDiv ROs to transfer permanent systems to the National Archives in accordance with approved records schedules and NARA requirements.
- 6.15.6 Ensuring that social media content containing official records are maintained in accordance with HHS recordkeeping requirements.

## **7. Applicable Laws, Guidance and Records Management Links**

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Authorities include:

- a. 36 CFR Chapter XII, Subchapter B – Agency Records Management Responsibilities
- b. 36 CFR Chapter XII, Subchapter B and C – Electronic Records Management
- c. 36 CFR Chapter XII, Subchapter G – Damage to, Alienation and Unauthorized Destruction of Records
- d. 44 U.S.C. Chapter 21 – National Archives and Records Administration
- e. 44 U.S.C. Chapter 29 – Records Management by the Archivist of the United States and by the Administrator of General Services
- f. 44 U.S.C. Chapter 31 – Records Management by Federal Agencies
- g. 44 U.S.C. Chapter 33 – Disposal of Records
- h. 44 U.S.C. Chapter 35 – Coordination of Federal Information Policy (Paperwork Reduction Act of 1980, as amended, Paperwork Reduction Reauthorization Act of 1995, and Government Paperwork Elimination Act)
- i. 44 U.S.C. 3301 Definition of Records
- j. 5 U.S.C. 552a – The Privacy Act of 1974
- k. General Records Schedule (GRS) 20, Item 14 – Electronic Mail Records
- l. General Records Schedule (GRS) 24 – Information Technology Operations and Management Records
- m. General Records Schedule (GRS) 23, Records Common to Most Offices Within Agencies, Item 7, Transitory Records
- n. OMB Directive M-12-18, Managing Government Records Directive
- o. OMB Directive M-14-16, Guidance on Managing E-mail
- p. OMB Circular A-123 – Management’s Responsibility for Internal Control
- q. OMB Circular A-130 – Management of Federal Information Resources
- r. Federal Information Resources Management Regulation (FIRMR) Bulletin B-1, “Electronic Records Management”
- s. FIRMR Part 201-9, “Creation, Maintenance, and Use of Records”

- t. Records Management Guidance for Agencies Implementing Electronic Signature Technologies
- u. <http://www.archives.gov/records-mgmt/rcs/schedules/index.html>
- v. <http://www.archives.gov/records-mgmt/faqs/>
- w. <http://www.archives.gov/records-mgmt/email-mgmt.html>
- x. <http://www.archives.gov/records-mgmt/training/>
- y. <http://www.archives.gov/records-mgmt/toolkit/#list>

## **8. Additional Information and Assistance**

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For additional information about this Policy, please contact the Department's RO at (202) 690-5521 or [hhsrecordsmanagement@hhs.gov](mailto:hhsrecordsmanagement@hhs.gov).

## **9. Effective Date/Implementation**

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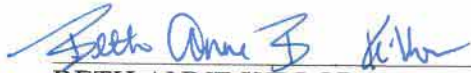
The effective date of this policy is the date the policy is approved.

These policies and procedures will not be implemented in any recognized bargaining unit until the union has been provided notice of the proposed changes and given an opportunity to fully exercise its representational rights.

The HHS policies contained in this issuance shall be exercised in accordance with Public Law 93-638, the Indian Self-Determination and Education Assistance Act, as amended, and the Secretary's policy statement dated August 7, 1997, as amended, titled "Department Policy on Consultation with American Indian/Alaska Native Tribes and Indian Organizations." It is HHS's policy to consult with Indian people to the greatest practicable extent and to the extent permitted by law before taking actions that affect these governments and people; to assess the impact of the Department's plans, projects, programs and activities on tribal and other available resources; and to remove any procedural impediments to working directly with tribal governments or American Indians.

## 10. APPROVALS

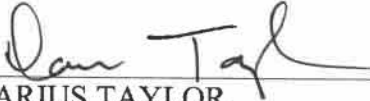
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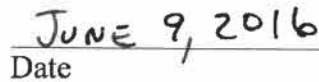
BETH ANNE KILLORAN  
Acting Chief Information Officer



Date



DARIUS TAYLOR  
HHS Records Officer



Date



## Attachment 1 - Glossary

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**Alienation** – Losing care and custody. Not protecting from loss or access.

**Control and Custody of Records** – HHS records/materials are the property of the Federal government, not the property of individual employees or contractors acting as an agent of the Government, and may not be removed from the Department without proper authority. All employees/contractors shall maintain records and non-record documentary materials separately from one another.

**Database** – A set of data, consisting of a least one data file, that is sufficient for a given purpose.

**Disposal** – The action taken regarding temporary records after their retention periods expire and usually consisting of destruction or occasionally of donation. Also, when specified, “disposal” refers to the actions taken regarding non-record materials when no longer needed, especially their destruction. (See NARA, “A Federal Records Management Glossary.”)

**Disposition** – The action taken concerning records following their appraisal by NARA (36 CFR 1220.14). The actions include transfer to agency storage facilities or Federal records center; transfer from one federal agency to another; transfer of permanent records to the National Archives; and disposal of temporary records. “Disposition” is also the action taken regarding non-records materials when no longer needed, including screening and destruction (NARA, “A Federal Records Management Glossary”).

**Electronic Records** – Any information that is recorded in a form that only a computer can process, and that satisfies the definition of a federal record in 44 U.S.C. 3301. Electronic records include numeric, graphic and text information, which may be recorded on any medium capable of being read by a computer and which satisfies the definition of a record.

This includes, but is not limited to, magnetic media, such as tapes and disks, and optical disks. Unless otherwise noted, these requirements apply to all electronic records systems, whether on microcomputers, minicomputers, or mainframe computers, regardless of storage media, in the network or stand-alone configurations (FIRMR Bulletin B-1).

**Essential Records** – Essential records are any records, documents, files or information database in any form or format containing information essential to the operations and survival of an organization. They are needed to conduct essential functions and supporting activities. Essential records are divided into two major categories: (1) Emergency Operating Records are records and databases essential to the continued functioning or the reconstitution of an organization during and after continuity activation. (2) Rights and Interests Records are records critical to carrying out an organization’s essential legal and financial functions and vital to the protection of the legal and financial rights of individuals who are directly affected by that organization’s activities.

**File** – A collection of related documents or papers arranged so that they can be consulted easily.

**File Plan** – A listing of all files in a container (regardless of the media), office or organization.

**Hold** – An agency’s temporary suspension of disposition action(s) and notification to its employees to retain records and other documentary materials in the agency’s possession, custody or control, typically because of litigation (including administrative cases), audit, or investigative needs. Under a Hold, documentary materials, regardless of record status, format, and of physical location, are required to be retained and not destroyed or otherwise disposed of for as long as a Hold is in place.

**Information System** – Is defined by the Office of Management and Budget (OMB) in Circular No. A-130 “...the organized collection, processing, transmission and dissemination of information in accordance with defined procedures, whether automated or manual.”

**Mandatory Records Schedules** – All records of the HHS shall be listed and described in an approved records schedule and shall be disposed of only as authorized by that schedule. Schedules shall be reviewed annually. Agencies should update their records schedules when there are program changes that will result in the establishment of new types of records, the transfer or termination of records no longer required, or an increase or decrease in the retention time of the records, to ensure the schedules accurately reflect current records and the functions they document (36 CFR 1228.50(d)).

Whenever possible, HHS should apply the NARA generated General Records Schedules (GRS) for routine administrative records. As required by regulation, HHS must ask NARA for a variance when not following the retention periods outlined by these schedules (36 CFR 1228.40(c)).

**Non-record Materials** – are federally-owned informational materials that do not meet the statutory definition of records (44 U.S.C. 3301), or that have been excluded from coverage by the definition. Excluded materials are extra copies of documents kept only for reference, stocks of publications and processed documents, and library or museum materials intended solely for reference or exhibit (36 CFR 1220.14).

**Office of the Secretary (OS)** – is referenced in this Policy as the OpDivs and includes the StaffDivs and the Offices of the Regions.

**OMB Exhibit 300- Capital Asset Plan and Business Case Summary** – As prescribed and described in OMB’s Circular A-11, Preparation, Submission and Execution of the Budget.

**OMB Circular A-130-Management of Federal Information Resources** – Establishes policy for the management of federal information resources. OMB includes procedural and analytic guidelines for implementing specific aspects of these policies. The policies in this Circular apply to the information activities of all agencies of the executive branch of the federal government.

**Operating Division** – An entity of HHS that is an independent Agency.

**OS Operating Divisions (OpDivs)** – The OpDivs include the Inspector General, as well as the Office of the Secretary and its Staff Division as a combined, single entity.

**Personal Papers** – Documentary materials belonging to an individual that are not used to conduct agency business. Personal papers are excluded from the definition of Federal records and are not owned by the Government.

**Records** – Includes all recorded information, regardless of form or characteristics, made or received by a federal agency under federal law or in connection with the transaction of public business and preserved or appropriate for preservation by that agency or its legitimate successor as evidence of the organization, function, policies, decisions, procedures, operations, or other activities of the United States Government or because of the informational value of data in them.

Library and museum material made or acquired and preserved solely for reference or exhibition purposes or duplicate copies of records preserved only for convenience are not included (44 U.S.C. 3301).

**Records Disposition Schedule** – A document, approved by NARA, which provides authority for the final disposition of temporary or permanent records. Records shall not be destroyed except as authorized by an approved records schedule.

**Records Management** – The planning, controlling, directing, organizing, training, promoting, and other managerial activities involved with respect to records creation, records maintenance and use, and records disposition in order to achieve adequate and proper documentation of the policies and transactions of the federal government and effective and economical management of agency operations (44 U.S.C. 2901 [2]).

**Records Schedule** – A records schedule is a document providing mandatory instructions for what to do with records no longer needed for current Government business, with the provision of authority for the final disposition of recurring or nonrecurring records.

**Reference Material** – Shall be clearly marked and maintained separately from the records of the office.

**Staff Division (StaffDiv)** – Sub-components of the Office of the Secretary Operating Division (OS OpDiv).



## Attachment 2 – Employee Departure Process

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Determine, in consultation with your manager, whether you're a custodian of records or other documentary material subject to a Hold. If yes, refer to the specific instructions in the applicable HHS policy (e.g., HHS Litigation Holds Policy). Otherwise, follow the steps below to assist you in meeting your recordkeeping requirements. A record is a unit of information, generated or received by an entity on behalf of the organization, which acts as evidence and provides a history of activities.

### 1. Sort

- Record material
- Non-record material
- Personal material

As you sort the material, purge! Destroy extra copies. Destroy reference materials that only you would need.

Your e-mail box may be of special concern. If your mailbox was not organized to match your files plan, the following is suggested.

- Create a personal (.pst) folder for your personal information. Move your personal information from your mailbox to that folder. You should also delete all information that is not a record. Give access to your mailbox to your support staff with instructions to contact the subject matter experts for disposition guidance for the remaining messages.

### 2. Turnover – All federal record material to the proper custodian.

### 3. Seek permission – You are likely to have extra copies of records kept for the convenience of reference in your office or workstation. You may take these with you when you leave if you have the approval of your RO, FOIA Officer, or legal counsel.

### 4. Follow Guidance established by your organizational unit for the transfer of records residing in electronic format (e-mail, local drives, etc.).

Most records are in the form of a document, although records in other forms are possible, such as photographs, videos, voicemail, etc.

The Record copy you leave provides the evidence and history of the work you performed. It must be organized in a meaningful manner and in most cases transferred to the National Archives. In the event the record copy does not exist or is not properly categorized for retrieval then questions can arise regarding your performance. Do not give anyone the opportunity to question your service to HHS's mission.

## Attachment 3 – Records Management Chain of Custody Document

### Department of Health and Human Services (DHHS) Records Management Chain of Custody Document

Name: \_\_\_\_\_ Office: \_\_\_\_\_  
Date/Time: \_\_\_\_\_ Building/Room: \_\_\_\_\_

Description of Records		
File Name	Title	Description of Content

Chain of Custody				
File Name	Date/Time	Released by (Signature )	Received by (Signature )	Comments/Location

## Attachment 3 – Records Management Chain of Custody Document (Reverse)

<b>Final Disposal Authority</b>
<b>Authorization for Disposal</b>
Item(s) #: _____ on office file plan is/are no longer needed and is/are authorized for disposal.
Name of Authorizing Official: _____ Signature: _____ Date: _____
<b>Witness to Disposal of Records (If Classified)</b>
Item(s) #: _____ on office file plan were disposed of by appropriate Custodian _____ in my presence on (date) _____.
Name of Witness to destruction: _____ Signature: _____ Date: _____
<b>Transfer of Records</b>
Item(s) #: _____ on this document was/were transferred by appropriate Custodian _____ : _____ to FRC/NARA _____
Address: _____ City: _____ State: _____ Zip Code: _____
Signature: _____ Date: _____
<b>This Chain of Custody document is to be retained by Releasing Official and Receiving Official.</b>





**Office of the Chief Information Officer  
Office of the Assistant Secretary for Administration  
U.S. Department of Health and Human Services**

## **HHS Policy for Electronic Mail (Email) Records Management**

**December 29, 2016**

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## Document Revision History

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Version Number	Release Date	Summary of Changes	Section Number/Paragraph Number	Changes Made By

The Office of the Chief Information Officer (OCIO) is responsible for development and management of the U.S. Department of Health & Human Services' (HHS) Policy for Electronic Mail (Email) Records Management. Please send any recommended changes via email to [hhsrecordsmanagement@hhs.gov](mailto:hhsrecordsmanagement@hhs.gov).



## 1. Nature of Changes

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This policy supersedes and replaces HHS-OCIO-2008-0002.001, HHS OCIO Policy for Records Management for Emails, dated May 15, 2008.

## 2. Purpose

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This policy implements the General Records Schedule (GRS) 6.1, *Email Managed under a Capstone Approach* and identifies its authorities, scope and objectives.

## 3. Background/Significant Changes

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This policy implements Office of Management and Budget (OMB M-12-18, Part I, Goal 1.2. HHS will manage all email records in an appropriate electronic recordkeeping system that supports records management and litigation requirements (which may include preservation-in-place models), including the capability to identify, retrieve, and retain the records for as long as they are required. This policy also addresses recordkeeping requirements when using personal or non-HHS communication tools to conduct HHS business.

HHS employees are responsible for the creation or receipt, maintenance, use and disposition of federal records. Users are required to use the retention policy in the email system to manage email that are official records and remove email records that are non-records.

## 4. Scope

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The Capstone policy applies to all HHS Operating Divisions (OpDivs), Staff Divisions (StaffDivs) and contractors conducting business for, and on behalf of the Department through contractual relationships and service level agreements. OpDivs that wish to apply this GRS in part must ensure that all other email records are covered by another National Archives and Records Administration (NARA) approved disposition authority. OpDivs not managing any of their email under the Capstone approach are responsible for managing their email by applying NARA-approved records schedules. OpDivs may develop and implement more specific policies and procedures consistent with the overarching Email Records Management Policy. The supplemental preservation requirements that apply to HHS records and other documentary materials that are potentially relevant for litigation, investigations and audit matters may be found in the HHS Policy for Records Holds.

This policy does not supersede any other applicable law, court order, existing labor management agreement, and more stringent retention standard or agency directive, to include the HHS Policy for Records Holds in effect as of the date of this policy.

NOTE: Currently, Capstone applies only to email records, as defined in this policy. All other records, including paper, electronic, or other media are governed by the GRS or agency records schedule.

## 5. Policy for Electronic Mail (Email) Records Management

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### 5.1. Electronic Mail (Email):

5.1.1. Email often meets the definition of a federal record as provided in the Federal Records Act (44 U.S.C., 3301) which includes: all traditional forms of records, regardless of physical form or characteristics, including information created, manipulated, communicated, or stored in digital or electronic form.

### 5.1.2. Implementation of the “Capstone” approach.

- (a) Under the Capstone approach, OpDivs will manage email records based on the role of the account holder rather than on the content of each email record. Capstone officials include all those listed on an approved NARA Form 1005 (NA 1005), Verification for Implementing GRS 6.1. This includes those officials in an acting capacity for any of the positions listed on the NA 1005 longer than 60 days. The form serves as a list of permanent Capstone officials for implementation of item 010 and a list of positions excluded from implementation of items 011 and 012 of GRS 6.1.
- (b) Email records captured and managed under the Capstone approach must use an existing records retention schedule or maintained as unscheduled records until the approval of the NA 1005. OpDivs will not implement GRS 6.1 until NARA reviews and approves the submission. Once approved, OpDivs will implement retention and disposition of email records accordingly.
- (c) The verification process will require OpDivs implementing GRS 6.1, Email Managed under a Capstone approach, to submit a NA1005 to the Department Records Officer (RO). The Department RO will review and forward to NARA to receive approval prior to implementation of any items of this GRS.
- (d) The verification process for identifying Capstone officials is located in the record description of GRS 6.1. The section defines the ten categories of senior officials provided in the definition of Capstone (permanent) accounts in item 010 of the GRS. These definitions acknowledge that different OpDivs often have different titles for similar positions which are meant to assist OpDivs in properly identifying senior officials within their OpDivs that correlate to each category.

NOTE: Cabinet level agencies implementing a Capstone approach that includes their components/operatives must apply the definition of “Capstone Official” to each component individually. In these cases, each component/operative is considered a separate agency in terms of the definition of Capstone officials. A component/operative of a cabinet level agency may implement a Capstone approach independent of their department, but must also conform to the entirety of this definition.

5.1.3. Email records are captured and managed according to user role using the following retention approach:

(a) Email Records of Designated Capstone Officials. Email records (email messages and attachments, calendar appointments, and tasks captured by the electronic recordkeeping system) from designated Capstone official's email accounts must be retained as permanent. These email records will be transferred to the NARA according to General Record Schedule 6.1, Section 010. Each OpDiv RO will maintain an official list of Capstone officials' email accounts and will forward a copy of the list to the Department RO annually.

(b) Email Records Captured from Email Accounts Not Designated as Capstone Officials. Email records (email messages and attachments, appointments, and tasks captured by the OpDiv electronic recordkeeping system) of all other OpDiv account holders will be retained as temporary according to General Record Schedule 6.1, Sections 011 or 012 and destroyed within the electronic recordkeeping system. If GRS 6.1 is not used, a NARA approved agency records disposition schedule must be followed. (NOTE: Preclude records under preservation obligation, such as litigation hold).

5.1.4. Non-Record Emails. HHS employees may delete "non-record" emails not containing any information documenting HHS actions or activities. Non-records include; non-business related, personal, broadcast messages (e.g., HHS messages to all staff) and advertisement. (NOTE: Preclude records under preservation obligation, such as litigation hold).

5.1.5. Transitory Email Records. Transitory records are records of short-term (180 days or less) interest which have minimal or no documentary or evidential value. Email records that are transitory may be deleted when no longer needed. (NOTE: Preclude records under preservation obligation, such as litigation hold).

5.1.6. Managing Email Records Manually. When automated tools or features are not available within the email system to auto-categorize folders and emails, employees must manually create folders within their email inbox and manage records by record type. (NOTE: For best retention and disposition practices, a folder should be created for each record type the employee creates. Additionally sub-folders may be created to manage records into more specific categories).

5.1.7. Email Retained with Related Records. When business needs require email records to be retained within another electronic recordkeeping system (such as part of a case file), you should also keep a copy of the email with those files. Capstone does not replace existing business practices that require email messages and other related records to be retained together in established electronic recordkeeping systems.

5.1.8. Search and Auditing of System. System-wide email searches may be conducted by OpDiv designated IT personnel with the approval of the General Counsel or Chief



Information Officer as part of an internal or external investigation or in response to an access request as needed.

- 5.1.9. Unauthorized Destruction of Email Records and Reporting Loss. OpDivs will have data/records backup procedures in place. If there's an instance of unauthorized destruction of email records, the user should first contact their supervisor and then the IT Helpdesk to attempt recovery. If recovery is not possible, the user or office must report the incident to the HHS or OpDiv RO. The RO will subsequently report the incident to the Chief Records Officer for the U.S. Government. Per 36 CFR 1230.14, the report should describe the records, the circumstances in which the unauthorized destruction took place and the corrective steps being taken to properly manage the records in the future.
- 5.2. Using of Unauthorized External Information Systems to Conduct Department Business. Transmission of HHS "sensitive" information via personal email is prohibited. In the interest of both protecting HHS employee's personal privacy and increasing transparency for the public, HHS employees assigned an HHS provided computer, email or online storage account must use those government provided resources for conducting any and all official business. Under no circumstances should HHS employees conduct official business using personal computer, email or personal online storage accounts if a federally owned or federally contracted alternative is assigned to them.
- 5.3. Email Records Management (Capstone) Training. Each HHS OpDiv must provide email records management (Capstone) training to all appropriate staff to ensure they are aware of their responsibilities to maintain and safeguard agency email records, including the obligations under this Policy and the HHS Records Holds Policy.
- 5.4. New Employees Orientation. HHS employees whose positions has been designated as Capstone (permanent) must receive an initial and departure briefing as part of their training on their email records management responsibilities.
- 5.5. Annual Training. HHS personnel must complete Records Management training annually, which must include a section on email records management (Capstone Approach).

## **6. Systems Requirements**

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- 6.1. OpDivs must have automated or manual systems in place that produce, manage, and preserve email records in an acceptable electronic format until disposition can be executed. Additionally, systems must support the implementation of agency policies and provide access to email records throughout their lifecycle. (NOTE: Preclude records with preservation obligation, such as litigation hold).
- 6.2. Systems and business processes must support the management of email records in accordance with all applicable requirements including the manual or automatic execution of their disposition whether using a Capstone-based or content-based record schedule.

## **7. Access Requirements**

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- 7.1. Email records must remain usable and retrievable throughout their lifecycle. Access supports an agency's ability to carry out its business functions. Access must address internal agency needs and accommodate responses to requests for information.
- 7.2. Email records must be maintained in a system that preserves their content, context and structure, protects against their unauthorized loss or destruction, and ensures that they remain discoverable, retrievable, and usable for the period specified in their retention schedule.

## **8. Disposition Requirements**

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- 8.1. OpDivs must have a NARA-approved schedule in place to be able to carry out the disposition of permanent and temporary email records – using either agency-specific schedules or GRS) 6.1: Email Managed under a Capstone approach.
- 8.2. HHS, OpDivs must identify appropriate retention periods for email records and implemented systems and policies to support the disposition as specified in an approved records schedule.

## **9. Roles and Responsibilities**

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### **9.1. OpDiv ROs:**

- 9.1.1. Evaluate and assign positions as Capstone or Non-Capstone and forward to the Department RO. Send your email account designations to your respective OCIO point of contact.
- 9.1.2. Ensures that Capstone designations are kept current with organization changes.
- 9.1.3. Provide training to OpDiv staff on Capstone records management implementation.
- 9.1.4. Ensure NARA-approved schedules are in place that identifies systems that contain Federal email records.
- 9.1.5. Transfer permanent email records to the NARA in accordance with approved records schedules and applicable laws, regulations, and NARA Transfer Guidance.

### **9.2. OpDiv and StaffDiv Records Managers (RM) and Records Liaison Officers (RLO):** Monitor personnel changes within their offices and inform Record Officers of changes relevant to Capstone status designations.

### **9.3. HHS OCIO and OpDiv Information Technology Offices:**

- 9.3.1. Ensure email systems retain components of email messages identified in RFC 5322 including email attachments.
- 9.3.2. Ensure current and departed employees email records remain accessible throughout the record's lifecycle as determined by the records schedule or legal hold, whichever is longer.
- 9.3.3. Ensure searches across multiple email accounts or multiple systems to find emails needed for agency business.
- 9.3.4. Prevent unauthorized access, modification, or destruction of email records.
- 9.3.5. Ensure supervisor annotate new employee's level of employment is captured on new email account form (designated as Capstone or Non-Capstone) and is used to determine the employees email records disposition (i.e. administrative, supervisor, manager, Senior Executive Service (SES) member, or Political Appointee).

9.4. HHS Personnel (Employees, Contractors, Interns and Fellows):

- 9.4.1. Obtain basic records management training and training on how to use the email system.
- 9.4.2. Recognize the difference between record and non-record material and maintain email records accordingly, to the extent practicable.
- 9.4.3. Use the HHS email system for all business purposes. This policy applies to all user accounts that the employee uses or monitors.
- 9.4.4. When a change in supervisory or management status occurs, employees must disclose this change to the OpDiv or StaffDiv RO. In-turn, the ROs will notify OCIO of the change.
- 9.4.5. Notify your OpDiv RO if you receive a large number of permanent records to determine whether your account should be redesignated as Capstone permanent.
- 9.4.6. Comply with the requirements of this policy including requirements related to email preservation.
- 9.4.7. All HHS account holders are responsible for recognizing that the information they create while conducting HHS business are records. Additional information about records management responsibilities may be found in HHS Records Management Policy.

## 10. Applicable Laws/Guidance

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Authorities include:

- (a) 36 CFR Chapter XII, Subchapter B – Agency Records Management Responsibilities
- (b) 36 CFR Chapter XII, Subchapter C – Electronic Records Management
- (c) 44 U.S.C. Chapter 21 – National Archives and Records Administration
- (d) 44 U.S.C. Chapter 29 – Records Management by the Archivist of the United States
- (e) 44 U.S.C. Chapter 31 – Records Management by Federal Agencies
- (f) 44 U.S.C. Chapter 33 – Disposal of Records
- (g) OMB M-12-18, Managing Government Records Directive
- (h) General Record Schedule 6.1: Email Managed under a Capstone Approach  
<http://www.archives.gov/records-mgmt/grs/grs06-1.pdf>
- (i) HHS Policy for Records Holds

## 11. Additional Information and Assistance

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For additional information about this Policy, please contact the Department's RO at (202) 690-5521 or [hhsrecordsmanagement@hhs.gov](mailto:hhsrecordsmanagement@hhs.gov).

## 12. Effective Date/Implementation

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The effective date of this policy is the date the policy is approved.

These policies and procedures will not be implemented in any recognized bargaining unit until the union has been provided notice of the proposed changes and given an opportunity to fully exercise its representational rights.

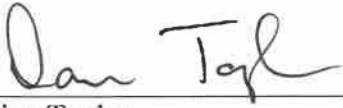
The HHS policies contained in this issuance shall be exercised in accordance with Public Law 93-638, the Indian Self-Determination and Education Assistance Act, as amended, and the Secretary's policy statement dated August 7, 1997, as amended, titled "Department Policy on Consultation with American Indian/Alaska Native Tribes and Indian Organizations."

It is HHS's policy to consult with Indian people to the greatest practicable extent and to the extent permitted by law before taking actions that affect these governments and people; to assess the impact of the Department's plans, projects, programs and activities on tribal and other available resources; and to remove any procedural impediments to working directly with tribal governments or Indian people.



### 13. Approval

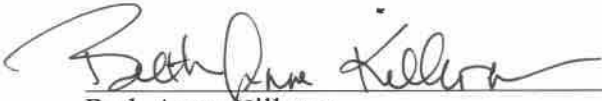
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Darius Taylor  
Department Records Officer

12/29/16

Date



Beth Anne Killoran  
Deputy Assistant Secretary for Information Technology  
and Chief Information Officer

1-10-2017

Date

## Attachment 1 - Glossary

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**Capstone** – An approach to managing email where agencies must identify those email accounts most likely to contain records that should be preserved as permanent. Agencies will determine Capstone accounts based on their business needs. They should identify the accounts of individuals who, by virtue of their work, office, or position, are likely to create or receive permanently valuable Federal records. Capstone officials will generally be the top-level senior officials of an agency, but may also be other key decision makers at lower levels of the agency.

**Capstone Official** – Senior officials designated by account level or by email or by email addresses, whether the addresses are based on an individual's name, title, a group, or a specific program function.

**Control and Custody of Records** – HHS records/materials are the property of the Federal government, not the property of individual employees or contractors acting as an agent for the government, and may not be removed from the Department without proper authority. All employees/contractors shall maintain records and non-record documentary materials separately from one another.

**Culling** – The act of removing or deleting material prior to disposition. This may include deleting non-record email [e.g., email blast (such as agency-wide communications), spam, and personal email (records belonging to an individual and not related to agency business)], and transitory email records (records of short-term interest or that have minimal documentary or evidentiary value).

**Electronic Mail (Email)** – All traditional forms of records, regardless of physical form or characteristics, including information created, manipulated, communicated, or stored in digital or electronic form.

**Electronic Messages** – Electronic mail and other electronic messaging systems that are used for purposes of communicating between individuals.

**Electronic Mail (Email) System** – A computer application used to create, receive, and transmit messages and other documents. Excluded from this definition are file transfer utilities (software that transmit files between users but does not retain any transmission data), data systems used to collect and process data that have been organized into data files or databases on either personal computers or mainframe computers, and word processing documents not transmitted on an email system. (36 CFR 1236.2)

**Electronic Records** – Any information that is recorded in a form that only a computer can process and that satisfies the definition of a federal record in 44 U.S.C. 3301. Electronic records include numeric, graphic and text information, which may be recorded on any medium capable of being read by a computer and which satisfies the definition of a record.

This includes, but is not limited to, magnetic media, such as tapes and disks, and optical disks. Unless otherwise noted, these requirements apply to all electronic records systems, whether on microcomputers, minicomputers, or mainframe computers, regardless of storage media, in network or stand-alone configurations.

**Electronic Records Keeping System** – An electronic system in which records are collected, organized and categorized to facilitate their preservation, retrieval, use and disposition.

**Preservation In-Place** – Protects and secures electronically stored information (ESI) from accidental deletion prior to collection. (NOTE: This is usually in reference to a litigation hold).

## GENERAL RECORDS SCHEDULE 5.2: Transitory and Intermediary Records

This schedule covers records of a transitory or intermediary nature. Transitory records are routine records of short term value (generally less than 180 days). Intermediary records are those involved in creating a subsequent record. These records do not document significant decisions or actions an agency takes.

Note that this schedule does not cover original hardcopy still pictures, graphic materials or posters, aerial film, maps, plans, charts, sound recordings, motion picture film, or video recordings that are scheduled as permanent or unscheduled and that have been converted to an electronic format. Electronic versions of special media records such as these often do not adequately replace the original and therefore the original records may not be destroyed as “input records.”

Item	Records Description	Disposition Instruction	Disposition Authority
010	<p><b>Transitory records.</b> Records required only for a short time (generally less than 180 days) <b>and</b> that are not required to meet legal or fiscal obligations, or to initiate, sustain, evaluate, or provide evidence of decision-making. Records include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• messages coordinating schedules, appointments, and events</li> <li>• transmittal documents such as e-mail, letters, cover memos, and facsimile cover sheets that do not provide evidence of approval, concurrence, or decision-making, or include substantive comments</li> <li>• received copies of circulated internal information such as agency instructions, notifications, circulars, newsletters, and email blasts to employees</li> <li>• messages received from agency distribution lists or listservs</li> <li>• “to-do” or task lists and assignments</li> </ul>	<p><b>Temporary.</b> Destroy when no longer needed for business use, or according to agency predetermined time period or business rule.</p>	DAA-GRS-2017-0003-0001
020	<p><b>Intermediary records.</b> Records of an intermediary nature, meaning that they are created or used in the process of creating a subsequent record. To qualify as an intermediary record, the record must also not be required to meet legal or fiscal obligations, or to initiate, sustain, evaluate, or provide evidence of decision-making. Records include:</p> <ul style="list-style-type: none"> <li>• non-substantive working files: collected and created materials not coordinated or disseminated outside the unit of origin that do not contain information documenting significant policy development, action, or decision making. These working papers do not result directly in a final product or an approved finished report. Included are such materials as rough notes and</li> </ul>	<p><b>Temporary.</b> Destroy upon verification of successful creation of the final document or file, or when no longer needed for business use, whichever is later.</p>	DAA-GRS-2017-0003-0002



	<p>calculations and preliminary drafts produced solely for proof reading or internal discussion, reference, or consultation, and associated transmittals, notes, reference, and background materials.</p> <ul style="list-style-type: none"> <li>• audio and video recordings of meetings that have been fully transcribed or that were created explicitly for the purpose of creating detailed meeting minutes (once the minutes are created)</li> <li>• dictation recordings</li> <li>• input or source records, which agencies create in the routine process of creating, maintaining, updating, or using electronic information systems and which have no value beyond the input or output transaction: <ul style="list-style-type: none"> <li>○ hardcopy input source documents where all information on the document is incorporated in an electronic system (See Exclusion 1 and Note 1)</li> <li>○ electronic input source records such as transaction files or intermediate input/output files</li> </ul> </li> <li>• ad hoc reports, including queries on electronic systems, whether used for one-time reference or to create a subsequent report</li> <li>• data files output from electronic systems, created for the purpose of information sharing or reference (see Exclusion 2)</li> </ul> <p><b>Exclusion 1:</b> This item does not allow destruction of original hardcopy still pictures, graphic materials or posters, aerial film, maps, plans, charts, sound recordings, motion picture film, or video recordings once they are digitized. Agencies must follow agency-specific schedules for these records. If the records are unscheduled, the agency must submit a schedule for them.</p> <p><b>Exclusion 2:</b> This item does not include the following data output files (agencies must follow agency-specific schedules for these records, except for the final bullet, which the GRS covers in another schedule):</p> <ul style="list-style-type: none"> <li>• files created only for public access purposes</li> <li>• summarized information from unscheduled electronic records or inaccessible permanent records</li> <li>• data extracts produced by a process that results in the content of the file being significantly different from the source records. In other words, the process effectively creates a new database file significantly different from the original</li> <li>• data extracts containing Personally Identifiable Information (PII). Such records require additional tracking and fall under GRS 4.2, item 130 (DAA-GRS-2013-0007-0012)</li> </ul>		
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	<p><b>Note 1:</b> An agency must submit a notification to NARA per 36 CFR 1225.24(a)(1) prior to destroying hardcopy input records previously scheduled as permanent. An agency must schedule the electronic version of unscheduled hardcopy input records prior to destroying the input record.</p> <p><b>Legal citations:</b> 36 CFR 1225.22 (h)(2); 36 CFR 1225.24 (a)(1)</p>		
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## GENERAL RECORDS SCHEDULE 6.1: Email Managed under a Capstone Approach

This schedule applies *only* to Federal agencies that implement a Capstone approach as described in this GRS. When implementing this GRS, agencies should consult the FAQs about GRS 6.1, Email Managed under a Capstone Approach. Agencies are reminded that this GRS should not be implemented in isolation, and should be supplemented with agency-wide policies and training, as well as incorporated into agency records management implementation tools, such as manuals and file plans. Agencies adopting a Capstone approach should also consult other resources available from NARA related to email management, specifically the Capstone approach. These resources are available on NARA's [email management page](#) and are summarized in the introduction to the FAQ.

Agencies must not implement this GRS until approval of [NARA form 1005 \(NA-1005\), Verification for Implementing GRS 6.1](#). Additional information, including a link to the form, may be found in FAQ 3 and in the instructions accompanying the form.

### GRS Scope

Email can be managed at an account level, at a mailbox level, in personal folder files, or other ways. This GRS applies to all email, regardless of how the email messages are managed or what email technology is used. Email, in the context of this GRS, also includes any associated attachments. This GRS may apply to records affiliated with other commonly available functions of email programs such as calendars/appointments, tasks, and chat.

Each agency is responsible for determining the scope of implementation when using Capstone, including, 1) The range of implementation in an organization (agency-wide, specific office, etc.); and 2) The range of implementation regarding email technology and system platforms. Brief information on the scope of an agency's Capstone implementation is also required on NA-1005.

Agencies are also responsible for defining (and documenting through policy) the official recordkeeping version of email to be managed under a Capstone approach, especially when email is captured or retained in multiple locations (e.g., an email archive vs. the live system). All other versions of email can be considered nonrecord, the retention of which should be addressed in agency email policy.

Agencies are expected to apply documented selection criteria to cull the email of Capstone officials (permanent accounts) to the greatest extent possible before transfer to NARA. Culling refers to the removal – or otherwise excluding from capture – of nonrecord, personal, or transitory messages and attachments. Culling typically includes the removal of spam, email blasts received (such as agency-wide communications), and personal materials (such as emails to family members not related to agency business). Culling may be manual, automated, or a hybrid of both. Agencies may develop their own policies and procedures for the culling of temporary accounts.

### Applying this GRS

When applying this GRS in part, agencies must ensure that all other email records are covered by another NARA-approved disposition authority. Agencies NOT managing any of their email under the Capstone approach are still responsible for managing their email by applying NARA-approved records schedules.



If an agency is implementing a Capstone disposition approach different from what is provided in this GRS, the agency must submit a records schedule. For example, an agency may want to narrow the list of required positions in item 010, use shorter retention lengths for temporary records, or extend the time frame for transfer of permanent records.

Agencies have discretion to designate individual email messages, with their attachments as permanent, or as longer-term temporary records that should be crossfiled elsewhere pursuant to agency policies and business needs.

Agencies must transfer to NARA the emails of Capstone officials captured during their tenure as a Capstone official. Therefore, email of Capstone officials created prior to their designation as a Capstone official (e.g., prior to their promotion/rotation into a Capstone position) should be treated as temporary and not transferred to NARA. For guidance on transferring email as a permanent record, see NARA Bulletin 2014-04, Revised Format Guidance for the Transfer of Permanent Electronic Records and the relevant sections of [36 CFR Part 1235](#).

Item	Records Description	Disposition Instruction	Disposition Authority
010	<p><b>Email of Capstone officials.</b></p> <p>Capstone Officials are senior officials designated by account level or by email addresses, whether the addresses are based on an individual's name, title, a group, or a specific program function. Capstone officials include all those listed on an approved NARA form 1005 (NA-1005), <i>Verification for Implementing GRS 6.1</i>, and <i>must</i> include, when applicable:</p> <ol style="list-style-type: none"> <li>1. The head of the agency, such as Secretary, Commissioner, Administrator, Chairman or equivalent;</li> <li>2. Principal assistants to the head of the agency (second tier of management), such as Under Secretaries, Assistant Secretaries, Assistant Commissioners, and/or their equivalents; this includes officers of the Armed Forces serving in comparable position(s);</li> <li>3. Deputies of all positions in categories 1 and 2, and/or their equivalent(s);</li> <li>4. Staff assistants to those in categories 1 and 2, such as special assistants, confidential assistants, military assistants, and/or aides;</li> <li>5. Principal management positions, such as Chief Operating Officer, Chief Information Officer, Chief Knowledge Officer, Chief Technology Officer, and Chief Financial Officer, and/or their equivalent(s);</li> <li>6. Directors of significant program offices, and/or their equivalent(s);</li> <li>7. Principal regional officials, such as Regional Administrators, and/or their equivalent(s);</li> <li>8. Roles or positions that routinely provide advice and oversight to the agency, including those positions in categories 1 through 3 and 5 through 7, including: General Counsels, Chiefs of Staff, Inspectors General,</li> </ol>	<p><b>Permanent.</b> Cut off in accordance with agency's business needs. Transfer to NARA 15-25 years after cutoff, or after declassification review (when applicable), whichever is later.</p>	DAA-GRS-2014-0001-0001



	<p>etc.;</p> <p>9. Roles and positions not represented above and filled by Presidential Appointment with Senate Confirmation (PAS positions); and</p> <p>10. Additional roles and positions that predominately create permanent records related to mission critical functions or policy decisions and/or are of historical significance.</p> <p>This includes those officials in an acting capacity for any of the above positions longer than 60 days. Agencies may also include individual emails from otherwise temporary accounts appropriate for permanent disposition in this category.</p> <p>This item <i>must</i> include all existing legacy email accounts that correlate to the roles and positions described above.</p> <p>If a Capstone official has more than one agency-administered email account, this item applies to all accounts. If a Capstone official has an email account managed by other staff (such as personal assistants, confidential assistants, military assistants, or administrative assistants), this item applies to those accounts. This item applies to all email regardless of the address names used by the Capstone official for agency business, such as nicknames or office title names. Email from personal or non-official email accounts in which official agency business is conducted is also included. A complete copy of these records must be forwarded to an official electronic messaging account of the officer or employee not later than 20 days after the original creation or transmission of the record.</p> <p>Please consult NA-1005, for more information on which positions are included within each category.</p> <p>Not media neutral; applies to records managed in an electronic format only.</p> <p><b>Note 1:</b> Cabinet level agencies implementing a Capstone approach that includes their components/operatives must apply the above definition to each component individually. In these cases, each component/operative is considered a separate agency in terms of the above definition of Capstone Officials. A component/operative of a cabinet level agency can implement a Capstone approach independent of their department but must also conform to the entirety of this definition.</p> <p><b>Note 2:</b> Smaller agencies, micro-agencies or Commissions implementing a Capstone approach may find that some of their Capstone positions fall into several of the categories above and/or that they do not have applicable roles or positions for all categories.</p>		
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011	<p><b>Email of Non-Capstone officials.</b> Email of all other officials, staff, and contractors not included in item 010.</p> <p>Not media neutral; applies to records managed in an electronic format only.</p> <p><b>Note:</b> Agencies <i>only</i> using item 011 and/or item 012 of this GRS may not dispose of any email of officials in item 010, Email of Capstone Officials, of this GRS without authority from NARA in the form of another GRS or agency-specific schedule. Submission and approval of NA-1005 is still required in these instances to document those being exempted from Capstone.</p>	<p><b>All others except those in item 012.</b> Includes positions and email not covered by items 010 or 012 of this schedule.</p> <p>This item applies to the majority of email accounts/users within an agency adopting a Capstone approach.</p>	<p><b>Temporary.</b> Delete when 7 years old, but longer retention is authorized if required for business use.</p>	DAA-GRS-2014-0001-0002
012		<p><b>Support and/or administrative positions.</b> Includes non-supervisory positions carrying out routine and/or administrative duties. These duties comprise general office or program support activities and frequently facilitate the work of Federal agencies and their programs. This includes, but is not limited to, roles and positions that: process routine transactions; provide customer service; involve mechanical crafts, or unskilled, semi-skilled, or skilled manual labor; respond to general requests for information; involve routine clerical work; and/or primarily receive nonrecord and/or duplicative email.</p>	<p><b>Temporary.</b> Delete when 3 years old, but longer retention is authorized if required for business use.</p>	DAA-GRS-2014-0001-0003