**DEPARTMENT OF PERSONNEL & ADMINISTRATION**
**STATE ARCHIVES AND PUBLIC RECORDS**
**RECORDS DISPOSITION SCHEDULE**

ARCHIVES NO.
08-69

| **DEPARTMENT** | **DIVISION** | **SECTION** | |
|---|---|---|---|
| Department of Public Health and Environment | Prevention Services | Child Fatality Prevention (Center for Healthy Families & Communities/Injury, Suicide & Violence Prevention Unit) | PERMANENT ☐<br>NON-PERMANENT ☒ |

| ITEM NO. | DESCRIPTION | RETENTION PERIOD | SPECIAL INSTRUCTIONS |
|---|---|---|---|
| 1. | Case Review Files (Contains personal identifying information of survivors)<br>*Includes death certificates or replicas, reports from coroner, law enforcement and other agencies* | | Store in locked cabinet<br>Destroy by shredding |
| | Record copy | Retain until all data for year entered into database and report is published then destroy | |
| | Duplicate copies | Retain until no longer needed then destroy | |
| 2. | Case Tracking Database<br>*Database manipulates Health Statistics data and includes ID information (the identifiers that would be on the death certificate) and merges information from Health Statistics database tables* | | Database is secure<br>Destroy by e-shredding |
| | Record copy | Retain for 5 years after program ends then destroy | |
| 3. | Child Death Review Case Report Database<br>*Replicates the paper form so that information may be kept electronically* | | New database; not fully being used yet<br>Database is secure<br>Destroy by e-shredding |
| | Record copy | Retain for 5 years after program ends then destroy | |

I request approval of the above records disposition schedule. Retention periods have been established by this agency after careful evaluation of all of the factors listed in the State Records Management Policies and Procedures Manual. I hereby certify that I am authorized to act for the head of this agency in matters pertaining to disposal of records. I also certify that I will comply with all conditions listed in the Records Management Policies and Procedures Manual.

| State Archivist's Signature | Date | Records Liaison Officer's Signature | Date |
|---|---|---|---|
| Terry Kittelson | 4/21/2008 | Betsy Hanah | 01-28-2008 |
| **Attorney General's Signature** | **Date** | **State Auditor's Signature** | **Date** |
| John Suthers by Louise Rottenman | 6-25-08 | [illegible] | 4/24/08 |

SA-194 (REV 1/78)



**NO RECORD SHALL BE DESTROYED THAT PERTAINS TO ANY PENDING LEGAL CASE, CLAIM, ACTION OR AUDIT.**

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| ITEM NO. | DESCRIPTION | RETENTION PERIOD | SPECIAL INSTRUCTIONS |
|---|---|---|---|
| 4. | Health Statistics Database with Information on Child Deaths in Colorado<br>*Includes abstracts, name and other identifiers, causes of death and infant birth certificate information* | | Database is secure<br>Destroy by e-shredding |
| | Record copy | Health Statistics has record copy | |
| | Duplicate copies | Retain until no longer needed then destroy | |
| 5. | Historical Documents<br>*Includes documents which show the history of the program some of which are being used to generate a written history* | | |
| | Record copy | Retain until written history is published then destroy | |
| | Duplicate copies | Retain until no longer needed then destroy | |

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| **Attorney General's Signature** | **Date** | **State Auditor's Signature** | **Date** |
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