NSRDDA | Nova Scotia Regulator of Dentistry and Dental Assisting

Retention and Destruction of Records Policy

Policy Number: G-05.07.00	Next Review Date: 2029
Approved by: NSRDDA Board	Approval Date: November 3, 2025

1. Purpose

This policy establishes retention and destruction practices that uphold legal and regulatory requirements while respecting the organization's commitment to EDIRA principles. The NSRDDA recognizes that how records are created, retained, and destroyed can have equity impacts and will act accordingly.

2. Scope

This policy applies to all physical and electronic records created, received, or maintained by the NSRDDA in the course of its regulatory activities, including but not limited to registration files, complaint and investigation records, financial documents, and administrative files.

3. Definitions

'Destruction' means the process of permanently eliminating records so that information is irretrievable.

'Records' means all documents, files, electronic data, and information in any format created or received by the NSRDDA.

'Retention Schedule' means the official schedule defining how long each type of record must be kept.

4. Policy Statement

(a) Retention Periods

All records must be retained for the period required by law, regulations or this policy. When establishing or revising retention schedules, the NSRDDA consults with the EDIRA Committee or its equivalent to ensure that an EDIRA lens is applied to the issue.

<u>Retention Periods</u>

Record Type	**Retention Period**
Registrant records	Permanently
Complaint/Investigation files	Permanently
Financial records	Minimum 7 years after fiscal year-end

Board and Committee minutes	Permanently (archived)
Employee records	Minimum 7 years after termination

The Regulator will handle records in ways that are culturally respectful, particularly when records contain information relating to Indigenous Peoples or historically marginalized communities. Consultation may be sought, as appropriate, from Indigenous knowledge holders, affected community representatives, or advisory bodies such as the Board's EDIRA Committee before the destruction of records that may have historical, cultural, or reconciliation-related significance. Such consultation will be undertaken respectfully and in a manner that protects confidentiality and complies with legal obligations.

(b) Authorization and Approval

The **Registrar** or their designate must authorize the destruction of records.

The request for destruction must include:

- Description and volume of records
- Retention compliance confirmation
- Method of destruction
- Date of destruction

(c) Methods of Destruction

Destruction methods must ensure confidentiality and prevent reconstruction. Typical methods include:

- **Paper records**: Shredding, pulping, or incineration by a reputable service provider or secure in-house processes.
- **Electronic records**: Secure deletion using software tools that overwrite data or physical destruction of media (e.g., hard drives)
- **Other media**: Destruction appropriate to the medium (e.g., CDs, USB drives) ensuring data is unrecoverable

Destruction processes will safeguard personal dignity and privacy, particularly for sensitive or identifying information relating to race, disability, gender identity, or Indigenous status.

(d) Documentation and Record-Keeping

A **Record Destruction Log** must be maintained, documenting:

- Date of destruction
- Description and volume of records destroyed
- Authorization signature
- Method of destruction
- Name(s) of person(s) performing destruction

Logs must be maintained indefinitely.

(e) Compliance and Audits

The Board, Registrar, or designated external auditors may review compliance with this policy.

Non-compliance or breaches must be reported immediately to the Registrar and Board Chair and may result in disciplinary action.

(f) Training and Awareness

Employees handling records must be trained on retention requirements and proper destruction procedures. They will also receive orientation or guidance on how EDIRA principles apply to the lifecycle of records, including retention, archival value, and destruction.

5. Monitoring and Policy Review

The Registrar and the Chair of the Finance, Audit and Risk Committee will ensure that this policy is reviewed in accordance with the Board's policy review cycle or sooner if:

- There is a legislative change
- A significant breach occurs
- A gap or deficiency is identified during audits.

6. Accountability

The Registrar is accountable for ensuring compliance with this policy.