Records & Information Management

Department: _____

Date: _____

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Department Records Management

Assessment Tool

Utilize this tool to evaluate RIM

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Questions or Inquiries can be forwarded to:
Information Management & Privacy Advisor
Mount Royal University
(403) 440-7288
jgduffin@mtroyal.ca
http://www.mtroyal.ca/PrivacyPolicy/FOIP/index.htm

Our department/area has received Records and Information Management Training

☐ Yes

☐ No,

If our department or area could file our documents any way we wanted, we would sort our files ….

☐ Alphabetically – By _____

☐ Numerically – By _____

☐ Yearly – Event_____

☐ I do not know

If our department or area could label our folders any way we wanted, we would label them (Alphabetically, numerically, by top tab, end tab, by white or color label)

_____

_____

_____

Our department/area understands what documents we create and which are Transitory

☐ Yes

☐ No

Original Document = Is a document that is created or that originates from your area

Transitory Document (Long-Term Value) = Is a copy of a document from another department that you have decided to keep long term by retaining it in an official folder

Transitory Document (Short-Term Value) = Is a copy of a document or notes that are only used for a short time period, thus have short term value

Provide a <u>general overview</u> or List of the documents in your department - area

Original Documents: _____

_____

_____

_____

_____

Transitory Documents (Long Term Value): _____

_____

_____

_____

_____

Transitory Documents (Short Term Value): _____

_____

_____

Document the folders your area creates and provide "standardized" Secondary Titles (if required):

1) **Folder Name:** _____

   Secondary Titles:

   01 – _____

   Documents contained: _____

   _____

   _____

   02 – _____
   Documents contained: _____

   _____

   _____

   03 – _____
   Documents contained: _____

   _____

   _____

   04 – _____
   Documents contained: _____

   _____

   _____

2) Folder Name: _____

Secondary Titles:

01 – _____

Documents contained: _____

_____

_____

02 – _____
Documents contained: _____

_____

_____

03 – _____
Documents contained: _____

_____

_____

04 – _____
Documents contained: _____

_____

_____

Retention and Destruction Process

Utilize the table below to give an overview of how long your records should be retained.

"Department recommended retention" is designed to gather your perspective and might drive change to the University Records Retention Schedule.

Folder Name (General Purpose/Activity)	Folder Retention Code	Retention period	Department comments	Destruction Method (Onsite or Offsite)
1.	Ie. AA000	Ie. 2 years	Ie. Recommend 3 years	Onsite
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				

Our department or area has assessed what documents we manage and has determined what retention codes to use for each folder holding the particular documents.

☐ Yes

☐ No

Our department or area has completed our retention analysis above and has determined that the retention schedule needs to be revised to some degree to meet our area's legal obligations of the University

☐ Yes

☐ No

Revision Comments:_____

_____

_____