

Updated Disposition Report instructions and address 11/2022
No changes were made to records retention

Schedule 108

DOUGLAS COUNTY HEALTH DEPARTMENT

January 25, 2006

Nebraska Records Management Division
3242 Salt Creek Circle
Lincoln, NE 68504
(402) 471-2559

**REQUEST FOR APPROVAL
OF RECORDS RETENTION
AND DISPOSITION SCHEDULE**

SCHEDULE	108
AGENCY, BOARD OR COMMISSION	Douglas County Health Department
DIVISION, BUREAU OR OTHER UNIT	
Supersedes Edition of November 19, 1992	

**TO: STATE RECORDS ADMINISTRATOR
STATE OF NEBRASKA**

PART I -- AGENCY STATEMENT

In accordance with Section 84-1212.01, R.R.S. 1943, approval of the attached records retention and disposition schedule by the State Records Administrator is hereby requested. Retention periods and dispositions have been recommended by this agency after a careful evaluation of all factors listed in Section 84-1212.01, R.R.S. 1943.

SIGNATURE <i>Al. P. T. Ows</i>	
TITLE <i>Health Director</i>	DATE <i>1/12/06</i>

PART II - ARCHIVAL APPROVAL

The attached schedule has been analyzed, all archival and historical material has been properly identified, no disposition except by transfer to the State Archives has been recommended for such material, and this schedule is approved as submitted.

SIGNATURE <i>Andrew I. Faling</i>	DATE <i>Jan. 25, 2006</i>
STATE ARCHIVIST	

PART III -- APPROVAL BY STATE RECORDS ADMINISTRATOR

The attached schedule has been reviewed in accordance with Section 84-1212.01, R.R.S. 1943, and is approved as submitted.

SIGNATURE <i>Jim D. Hale</i>	DATE <i>1/25/06</i>
STATE RECORDS ADMINISTRATOR	

INSTRUCTIONS FOR USING THIS SCHEDULE

Records retention and disposition schedules are designed to serve as your records management guideline for storing and disposing of agency records, **regardless of the media on which they reside**, including paper, microfilm, diskettes, optical disks, CDs, DVDs, servers, computer hard drives, etc. This schedule was written specifically for records unique to your office and the Local Agencies General Records Schedule #24 contains those records common to most local government agencies. This retention schedule, which is approved by the State Records Administrator, provides your only ongoing authority to dispose of records. Listed below are some basic procedures to follow when applying this schedule.

DISPOSING OF RECORDS

1. Check your schedules to see what the retention period is. Note: Your agency's unique schedule will take precedence over General Records Schedule #24 for any items which have differences in retention requirements.
2. Dispose of records that have met their retention periods. Unless there is pending or on going, legal action, records request, or audit.
3. For records requiring a review of, or transfer to the **NE State Historical Society (State Archives)**, your agency is required to contact the State Archives to negotiate the transfer. Additionally, **once the records are accessioned into their collection, they become the property of the State Archives**. The State Archives may remove selected records in accordance with standard archival practices to ensure efficient access, organization and enduring historical value (Nebr. Rev. Stat. §82-107). Please contact their office by calling (402) 471-4783.
4. Complete a Records Disposition Report for the records you dispose. The Records Disposition Report form is located on the Secretary of State Records Management website. https://appengine.egov.com/apps/ne/sos_records_disposition_report. This report establishes that the destruction was performed in your normal course of business.

NON-SCHEDULED RECORDS

Contact a Records Management Specialist in Records Management to see whether the records will fit under an item already on the schedule. If they do not, they must be retained until they are added to the next revision of your schedule.

SCHEDULE UPDATE

It is the responsibility of each agency to periodically update their schedule. A Records Management Specialist in Records Management can assist you with the schedule update, which may involve adding new records series and making revisions to existing items. Keeping your schedule current will ensure you have the ongoing authority to discard records when their useful life has ended.

QUESTIONS

If you have any questions about these procedures, please contact your agency Records Officer or the Records Management Specialist in Records Management. They will help you with any questions the schedule may present, including: transferring records to the State Records Center or microfilming records, scanning records, etc.

**Records Management Division
3242 Salt Creek Circle
Lincoln, NE 68504
402-471-2559**

INDEX

SCHEDULE 108 DOUGLAS COUNTY HEALTH DEPARTMENT

	Item	Page
<u>CHILD HEALTH CLINICS</u>	108-4	9
PATIENT MEDICAL RECORDS	108-4-1	9
<u>DENTAL CLINIC</u>	108-3	8
EMPLOYEE X-RAY BADGE REPORTS	108-3-3	9
MEDICAID TREATMENT PLAN AND PAYMENT REPORTS ...	108-3-2	8
PATIENT CHARTS	108-3-1	8
<u>EMERGENCY RESPONSE COORDINATION</u>	108-6	10
LETTERS OF AGREEMENT	108-6-2	10
SMALLPOX VACCINATION RECORDS	108-6-1	10
<u>EPIDEMIOLOGY AND DISEASE CONTROL</u>	108-9	12
DISEASE CASE REPORT/INVESTIGATION FORMS	108-9-3	13
DISEASE CASE REPORTS/INVESTIGATION INFORMATION (NETSS, NEDSS, HARS)	108-9-14	15
HIV/AIDS FOLLOWUP FORMS.....	108-9-13	15
HIV COUNSELING TESTING SITE LOG OF TESTS.....	108-9-10	14
HIV PARTNER/SPOUSAL NOTIFICATION FORMS.....	108-9-12	14
HIV RAPID TEST RESULTS	108-9-7	13
HIV TEST SITE CLIENT CONSENT FORMS.....	108-9-6	13
HIV TEST SITE CLIENT INFORMATION FORMS	108-9-8	14
HIV TEST SITE CLIENT INTAKE FORMS	108-9-5	13
HIV TEST SITE HIVE POSITIVE CLIENT LOGS	108-9-9	14
HIV TEST SITE LOG OF TESTS.....	108-9-12	15
LABORATORY REPORTS	108-9-4	13
STD MORBIDITY DATABASE.....	108-9-11	14
TUBERCULOSIS CASE REPORTS/MEDICAL RECORDS (FORMERLY NURSES NOTES – TUBERCULOSIS PATIENTS)	108-9-1	12
TUBERCULOSIS SKIN TESTING PERMISSION FORMS.....	108-9-2	12
<u>FOOD AND DRINK</u>	108-10	15
COMPLAINT FORMS	108-10-2	15
FOOD AND DRINK PERMITS	108-10-7	16
FOODBORNE ILLNESS INVESTIGATION REPORTS	108-10-4	16
FOOD ESTABLISHMENT INSPECTION REPORTS.....	108-10-1	15

FOOD PERMIT APPLICATIONS	108-10-5	16
FOOD SAFETY CLASS CARDS	108-10-6	16
LABORATORY REPORTS – FOOD.....	108-10-3	16
<u>IMMUNIZATION CLINICS</u>	108-5	9
AUTHORIZATION OF RELEASE INFORMATION	108-5-3	10
IMMUNIZATION RECORDS.....	108-5-1	9
IMMUNIZATION RECORD CARDS.....	108-5-2	9
<u>LABORATORY</u>	108-13	21
ALCOHOL LICENSES (NON-BEVERAGE).....	108-13-4	21
ATF ALCOHOL PERMITS	108-13-5	21
C.L.I.A. CERTIFICATIONS	108-13-1	21
EPA/NDEQ AUDIT REPORTS	108-13-7	22
RESULTS OF AIR MONITORING TESTS.....	108-13-3	21
WATER TESTING CERTIFICATIONS.....	108-13-2	21
WATER TESTING RESULTS.....	108-13-6	21
<u>MISCELLANEOUS</u>		23
RECORDS DISPOSITION REPORT (BLANK FORM)		23
<u>OFFICE OF THE DIRECTOR</u>	108-7	10
BOARD OF HEALTH RESOLUTIONS	108-7-2	10
DISCIPLINARY REPORTS.....	108-7-1	10
LICENSES	108-7-3	10
<u>SANITATION CONTROL AND LEAD POISONING</u> ..	108-12	19
ANIMAL/BEE PERMITS	108-12-7	20
APPLICATIONS FOR DOMESTIC ANIMAL PERMITS	108-12-6	20
CASE MANAGEMENT RECORDS – LEAD POISONING	108-12-1	19
DEMOLITION REVIEW FORMS.....	108-12-5	20
ENVIRONMENTAL ASSESSMENTS – LEAD POISONING.....	108-12-2	19
MOSQUITO LARVAE SURVEILLANCE FORMS	108-12-9	20
SANITATION COMPLAINT CARDS	108-12-3	19
SANITATION NOTICES OF VIOLATION	108-12-4	19
WEST NILE VIRUS SURVEILLANCE DATA.....	108-12-8	20
<u>SANITARY ENGINEERING</u>	108-11	17
APPLICATIONS FOR PERMIT FOR WATER SYSTEM.....	108-11-4	18
ENVIRONMENTAL COMPLAINT CARDS.....	108-11-7	18
ENVIRONMENTAL HEALTH ASSESSMENT REPORTS	108-11-2	17
INFECTIOUS WASTE TRANSPORT VEHICLE CHECKLIST.....	108-11-6	18
LANDFILL EVALUATION REPORTS	108-11-5	18
SANITARY SURVEYS.....	108-11-3	17
SWIMMING POOL INSPECTION REPORTS.....	108-11-1	17

<u>SEXUALLY TRANSMITTED DISEASE CLINIC</u>	108-1	7
OUTPATIENT MEDICAL RECORDS	108-1-1	7
PATIENT APPOINTMENT SCHEDULES	108-1-3	7
PATIENT CHART AUDITS	108-1-4	7
PATIENT LOGS.....	108-1-2	7
<u>TRAVELER’S CLINIC</u>	108-2	8
PATIENT CHARTS	108-2-1	8
<u>VITAL STATISTICS</u>	108-8	11
APPLICATIONS FOR BIRTH AND DEATH RECORDS	108-8-4	11
BIRTH CERTIFICATES	108-8-5	11
DEATH CERTIFICATES.....	108-8-6	12
NEWBORN (HOMEBIRTH) WORKSHEETS.....	108-8-1	11
PERMITS FOR TRANSIT OR CREMATION	108-8-2	11
WEEKLY MORTALITY REPORTS	108-8-3	11

SCHEDULE 108 – DOUGLAS COUNTY HEALTH DEPARTMENT

108-1 SEXUALLY TRANSMITTED DISEASE CLINIC

108-1-1 OUTPATIENT MEDICAL RECORDS

Confidential medical records of every patient admitted for examination and treatment at the Douglas County Health Department's Sexually Transmitted Disease Clinics. Medical Records will contain, when applicable, the following information:

Case reports which include:

- Laboratory reports
- Patient demographics
- Patients consent forms
- Physician's exam findings
- Prior STD's if known
- Provisional diagnosis
- Reason for attending clinic
- Report of laboratory tests
- Treatments given

May contain, on occasion, other records not specifically listed here.

Dispose of 10 years after patient's last visit to clinic OR 2 years after the patient reaches the age of 21 years, whichever is later.

108-1-2 PATIENT LOGS

List containing identifying and locating information regarding patients admitted for examination and treatment at the Douglas County Health Department Sexually Transmitted Disease Clinics.

Dispose of 1 year after date of the clinic session for which the log was created.

108-1-3 PATIENT APPOINTMENT SCHEDULES

List containing the names and telephones number of patients making appointments to be examined and treated at the Douglas County health Department Sexually Transmitted Disease Clinic-Woolworth location.

Dispose of 1 year after date of the clinic session for which the schedule was created.

108-1-4 PATIENT CHART AUDITS

Description of findings of the audit of Douglas County Health Department Sexually Transmitted Disease Clinic patient charts.

Dispose of after 5 years, provided audit has been completed.¹

108-2 TRAVELERS CLINIC

108-2-1 PATIENT CHARTS

Confidential medical records of every patient admitted for evaluation, administration of vaccines, and provision of prescriptions at the Douglas County Health Department's Travelers Clinic. Medical records will contain, when applicable the following information:

Patient Questionnaire

Physician Assessment/Plan

Planned Immunization Schedule

Clinical Services Receipt

Vaccine Administration/Authorization of Release of Information

May, on occasion, contain some records not specifically listed here.

Dispose of 10 years after patient's last visit to clinic OR 2 years after the patient reaches the age of 21 years, whichever is later.

108-3 DENTAL CLINIC

108-3-1 PATIENT CHARTS

Confidential dental records of every patient admitted for examination and treatment at the Douglas County Health Department's Dental Clinic. Dental records will contain, when applicable, the following:

Patient demographics

Reason for attending clinic.

Patient consent forms

Dentist's exam findings

X-rays

Reports of laboratory tests

Treatments given

Referrals/follow-ups/results/recommendations

May, on occasion, contain some records not specifically listed here.

Dispose of 10 years after the patient's last visit to clinic OR 2 years after the patient reaches the age of 21 years, whichever is later.

108-3-2 MEDICAID TREATMENT PLAN AND PAYMENT REPORTS

Confidential records of dentist's treatment plan for individual patients submitted to the Nebraska Medicaid Office and report of payment made to the Douglas County Health Department by the Nebraska Medicaid Office for services provided.

Dispose of 5 years after payment is received.

108-3-3 EMPLOYEE X-RAY BADGE REPORTS

Records of test results on employee x-ray badges indicating amount of exposure to x-rays during their taking of dental x-rays.

Retain permanently.

108-4 CHILD HEALTH CLINICS

108-4-1 PATIENT MEDICAL RECORDS

Confidential outpatient medical records of every patient admitted to the Douglas County Health Department's Child Health Clinics for examination and treatment. The records will contain, when applicable, the following information:

Patient demographics

Patient (parent) consent forms

Presenting problems/conditions

Physical exam findings

Diagnoses and treatment

Referrals-follow-up, results/recommendations

Laboratory Reports

May, on occasion, contain some records not specifically listed here.

Dispose of 10 years after patient's last visit to clinic or 2 years after the patient reaches the age of 21 years, whichever is later.

108-5 IMMUNIZATION CLINICS

108-5-1 IMMUNIZATION RECORDS

Confidential outpatient immunization record for every patient admitted to the Douglas County Health Department Immunization Clinics for evaluation and administration of vaccines. The immunization record will contain, when applicable, the following information:

Patient demographics

Patient (parent) consent forms

Immunizations administered

Vaccine lot numbers

Authorization to release immunization information to other entities

May, on occasion, contain some records not specifically listed here.

Dispose of 10 years after patient's last visit to the clinic OR 10 years after the patient reaches the age of 21 years, whichever is later.

108-5-2 IMMUNIZATION RECORD CARDS

File card containing patient demographic information, immunization(s) received, and date(s) of administration.

Dispose of 10 years after patient's last visit to the clinic OR 10 years after the patient reaches the age of 21 years, whichever is later.

108-5-3 AUTHORIZATION OF RELEASE OF INFORMATION FORMS

Form completed by patient or parent authorizing the Douglas County Health Department to obtain immunization records of the patient from other health care providers.

Dispose of 1 year after the immunization information is received.

108-6 EMERGENCY RESPONSE COORDINATION

108-6-1 SMALLPOX VACCINATION RECORDS

Confidential records for every Douglas County Health Department employee and community volunteer admitted to the Douglas County Health Department Smallpox Vaccination Clinic. The records will contain, when applicable, the following information:

Patient demographics

Patient consent forms

Medical history

Immunization administered

Physician consultation-if needed

Recommendations

May, on occasion, contain some records not specifically listed here.

Retain permanently

108-6-2 LETTERS OF AGREEMENT

Letters and signed agreements from local businesses, agencies, and institutions confirming that these entities will allow the Douglas County Health Department (or its designee) to utilize their facilities, equipment, and/or other resources, as needed, when the Health Department is responding to a major public health emergency or other disaster situation.

Dispose of 1 year after the business, agency, or institution cancels the agreement.

108-7 OFFICE OF THE DIRECTOR

108-7-1 DISCIPLINARY REPORTS

Confidential records of employee disciplinary hearings and disciplinary actions taken, if any.

Retain permanently.

108-7-2 BOARD OF HEALTH RESOLUTIONS

Resolutions approved by the Douglas County Board of Health at regular or special meetings of the Board.

Retain permanently.

108-7-3 LICENSES

All original documents pertaining to licenses issued to the Douglas County Health Department.

Dispose of 2 years after the expiration of the license.

108-8 VITAL STATISTICS

108-8-1 NEWBORN (HOMEBIRTH) WORKSHEETS

Demographic and medical/behavioral/lifestyle information of an infant born in a home setting and parents. The document will contain, when applicable, the following information:

Demographics of the mother
Demographics of the father
Prenatal medical history of the mother
Labor and Delivery information
Medical information of the newborn

Dispose of 5 years after the date of birth.

108-8-2 PERMITS FOR TRANSIT OR CREMATION

Forms for the authorizing of transit or cremation of the remains of a person who died in Douglas County. The document contains the following information:

Decedent demographics
Signature of person authorizing the transit or cremation of the remains
Disposition of the remains

Dispose of 1 year after issuance of the permit.

108-8-3 WEEKLY MORTALITY REPORTS

Weekly report to the Centers for Disease Control and Prevention regarding the number of deaths, by age group, in the City of Omaha reported to the Douglas County Health Department during the previous week.

Dispose of 5 years after the date of the report.

108-8-4 APPLICATIONS FOR BIRTH AND DEATH CERTIFICATES

Completed applications for certified copies of birth and death certificates Retained by the Douglas County Health Department. The document contains the following information:

Demographic information regarding the person whose certificate is being requested
Signature and demographic information of the requesting person
Documentation of payment of required fees

Dispose of 3 years after date of application.

108-8-5 BIRTH CERTIFICATES

The form is the official record of the birth of a person occurring in Douglas County. The record will include the following information:

Name of person for whom the record is generated
Parent's demographics
Name and signature of medical professional in attendance at the birth
Name and signature of the registrar

Retain permanently

108-8-6 DEATH CERTIFICATES

The form is the official record of the death of a person occurring in Douglas County. The record will include the following information:

Decedent demographics

Cause(s) of death

Names and signature of medical professional certifying the death

Name and signature of registrar

Retain permanently

108-9 EPIDEMIOLOGY AND DISEASE CONTROL

108-9-1 TUBERCULOSIS CASE REPORTS/MEDICAL RECORDS

Confidential records of all active Tuberculosis patients reported to the Douglas County Health Department and children less than four years of age receiving directly observed preventive therapy. The report will contain, when applicable the following information:

Patient demographics

Sign and Symptoms experienced by the patient

Date of onset and duration of the illness

Laboratory results

Possible sources of infection

Other persons known to the patient with similar symptoms or diagnosis

Family members and close contacts

Treatment

Directly observed therapy information

Nurses notes

Physician's order forms

Tuberculosis test results on contacts

Dispose of 10 years after the closing of the case report OR 2 years after the patient reaches the age of 21 years, whichever is later.

108-9-2 TUBERCULOSIS SKIN TESTING PERMISSION/RESULTS FORMS

Patient consent form authorizing Douglas County Health Department personnel to administer a Tuberculosis skin test.

Dispose of 10 years after the date of the test OR 2 years after the person tested reaches the age of 21 years, whichever is later.

108-9-3 DISEASE CASE REPORT/INVESTIGATION FORMS (PAPER)

Confidential individual disease case report and investigation forms for reportable communicable diseases. The documents will include, when applicable, the following information:

Patient demographics
Sign and symptoms experienced by the patient
Date of onset and duration of illness
Possible sources of infection
Laboratory results
Others person known to the patient with similar symptoms or diagnosis
Family members and close contacts
Treatment
May, on occasion, contain other information or records.

Retain permanently all forms generated prior to the year 1993. Records generated in years 1993 and later, dispose of 10 years after the investigation is completed.

108-9-4 LABORATORY REPORTS

Weekly reports from medical laboratories listing reactive tests for reportable communicable diseases. The reports will contain the following information:

Name of laboratory and contact information
Patient demographics
Date off specimen collection
Name of test and test results
Name of physician ordering the test and contact information
May, on occasion, contain other information

Dispose of 10 years after the receipt of the report from the laboratory.

108-9-5 HIV TEST SITE CLIENT INTAKE FORMS

Client data form for persons presenting for services at the Douglas County Health Department HIV Counseling and Testing Sites. The information will include, when applicable, the following information:

Client demographics
Risk information

Dispose of 2 years after the date of the service.

108-9-6 HIV TEST SITE CLIENT CONSENT FORMS

Form signed by client agreeing to be tested for exposure to the HIV. The form will contain the following:

Client demographics
Client signature

Dispose of 2 years after the date of the signing of the form.

108-9-7 HIV RAPID TEST RESULTS

Form containing the result of the rapid test for exposure to the HIV for an individual client presenting at the Douglas County Health Department HIV counseling and testing site.

The form will contain the following information:

Client demographics
Test results

Dispose of 10 years after the date of the test.

108-9-8 HIV TEST SITE CLIENT INFORMATION FORMS (SCANNING)

Copy of computer scanning form containing information on clients who have been provided services at the Douglas County Health Department HIV Counseling and Testing sites. The form contains the following information:

Client demographics

Test results

Client risk information

Dispose of 6 months after the date of the service provided to the client.

108-9-9 HIV TEST SITE HIV POSITIVE CLIENT LOGS

Line listing of clients who have tested positive for HIV at the Douglas County Health Department HIV Counseling and Testing Site. The listing will contain the following information:

Client demographics

Test results

Dispose of 1 year after the date of service provided to the client.

108-9-10 HIV COUNSELING TESTING SITE LOG OF TESTS

Line listing of all persons who have been tested for exposure to the HIV at the Douglas County Health Department HIV Counseling and testing Site and the results of the test(s) performed.

Dispose of 1 year after the date of the service provided to the client.

108-9-11 STD MORBIDITY DATABASE

Computer based listing of all cases of sexually transmitted diseases in Douglas County. The database will contain the following information:

Patient demographics

Laboratory results

Treatment information

Investigation results

Retain permanently.

108-9-12 HIV PARTNER/SPOUSAL NOTIFICATION FORMS

Form containing the information regarding contact or attempted contact with a person reported to the Douglas County Health Department as being HIV positive or having AIDS. The form will contain, when applicable, the following information:

Patient demographics

Laboratory testing (patient reported)

Risk behavior

Medical/case management information

May, on occasion, contain other information

Dispose of 10 years after the date of the interview or last attempted contact.

108-9-13 HIV/AIDS FOLLOW UP FORMS

Form for physician reporting of a patient's HIV/AIDS status. The form will contain, when applicable the following information:

- Patient demographics
- Laboratory results
- Patient HIV/AIDS status
- Name of physician
- May, on occasion, contain other information

Retain permanently.

108-9-14 DISEASE CASE REPORTS/INVESTIGATION INFORMATION - (NETSS, NEDSS, HARS)

Confidential individual disease case report and investigation information for reportable communicable diseases. When applicable, the following information is found:

- Patient demographics
- Signs and symptoms experienced by the patient
- Date of onset and duration of the illness
- Possible sources of infection
- Laboratory results
- Other persons known to the patient with similar symptoms or diagnosis
- Family members and close contacts
- Treatment
- May, on occasion, contain other information

Retain permanently.

108-10 FOOD AND DRINK

108-10-1 FOOD ESTABLISHMENT INSPECTION REPORTS

Results of the inspection by Douglas County health Department registered sanitarians of establishments serving food. The reports contain, when applicable, the following information:

- Name and address of the establishment
- Owner of the establishment
- Violations found, if any
- Code Reference
- Signature of inspector
- Signature of establishment representative

Dispose of 5 years after the date of the inspection.

108-10-2 COMPLAINT FORMS

Citizen complaints regarding food establishments. The complaint form will contain, when applicable the following information:

- Name and address of the establishment
- Nature of the complaint
- Any illness experienced or noted
- Date of visiting the establishment
- May, on occasion, contain other information

Dispose of 5 years after the date of the complaint.

108-10-3 LABORATORY REPORTS-FOOD

Test results of food samples submitted to various laboratories for examination for adulteration or contamination.

Dispose of 3 years after the date of the laboratory report to the Department.

108-10-4 FOODBORNE ILLNESS INVESTIGATION REPORTS

Results of the investigation of suspected food-borne illnesses. The report will contain, when applicable, the following information:

Demographics of person(s) ill

Signs and symptoms of illness

Date of onset and duration of illness

Possible source(s) of illness, including foods consumed

Laboratory results

Other persons known to ill person(s) with similar illness

Treatment

May, on occasion, contain other information or records.

Dispose of 3 years after the completion of the investigation.

108-10-5 FOOD PERMIT APPLICATION FORMS

Application form completed by an individual or corporation to operate a food establishment. The form will contain the following information:

Name and address of person or corporation requesting the permit

Address of the food establishment(s) to be operated

Type and number of facilities to be operated

Fees due

May, on occasion, contain other information

Dispose of 5 years after the date of the application.

108-10-6 FOOD SAFETY CLASS CARDS

Certificate of attendance for individuals successfully completing the Douglas County Health Department food safety class.

Dispose of 5 years after the date of issuance of the certificate.

108-9-7 FOOD AND DRINK PERMITS

Official permit issued allowing a person or corporation to serve food and drink to the public. The permit contains the following information:

Name of person/corporation to whom the permit is issued

Location of the premises for which the permit is issued

Signature of the supervisor of the Food and Drink Section

Dispose of 5 years after issuance of the permit.

108-11 SANITARY ENGINEERING

108-11-1 SWIMMING POOL INSPECTION REPORTS

Reports of inspections of local public/residential swimming pools conducted by registered sanitarians. The reports will contain, when applicable, the following information:

Name and address of the swimming pool

Name of owner

Name of operator

Water quality assessment

Facility assessment

Name of inspecting sanitarian

Pool status

May, on occasion, contain other information

Dispose of 5 years after the date of inspection.

108-11-2 ENVIRONMENTAL HEALTH ASSESSMENT REPORTS

Reports of various environmental health assessments conducted by registered sanitarians. The assessments include the following: general environmental, indoor air quality-residential, indoor air quality-commercial, private water supplies, inorganic or pH water samples, U.S.D.A. water samples, and plan reviews. The reports will include, when applicable, the following:

Name of property owner/ person requesting assessment

Address of the property

Contact person

Results of the assessment

Laboratory Results

Letter to appropriate person(s) reporting results/recommendations

Dispose of 5 years after the date of the assessment.

108-11-3 SANITARY SURVEYS

Report of the inspection and approval sewage disposal systems (septic systems) by registered sanitarians. The report will include, when applicable, the following:

Property address

Name of owner of property

Description of septic tank and disposal field

Sketch of septic tank and disposal field layout

Copy of permit issued

Results of percolation test

May, on occasion, contain other information

Retain permanently.

108-11-4 APPLICATIONS FOR PERMIT FOR PRIVATE WATER SUPPLY SYSTEM

Application form for the installation of water well on private property. The application will include the following information:

- Property location
 - Owner of the property
 - Name of well driller
 - Location of the well
 - Materials used to contract well
 - List of uses of the water from the well
 - Approval and permit number
- May, on occasion, contain other information.

Retain permanently.

108-11-5 LANDFILL EVALUATION REPORTS

Report of inspection of landfills by registered sanitarians. The report will include, when applicable, the following information:

- Owner/operator of the landfill
- Location of the landfill
- Inspector
- Remarks
- Items to be corrected

Retain permanently.

108-11-6 INFECTIOUS WASTE TRANSPORT VEHICLE CHECK LISTS

Report of inspection of vehicles transporting infectious waste. Report will include the following:

- Results of review of manifest document
- Results of inspection of vehicle and safety equipment.

Dispose of 5 years after date of inspection.

108-11-7 ENVIRONMENTAL COMPLAINT CARDS

Card contains information regarding condition or situation that is a possible environmental hazard. The card will contain, if applicable, the following information:

- Location of the possible hazard
- Name and contact information of person filing the complaint
- Nature of the complaint
- Condition found and action taken

May, on occasion, contain other information or records.

Dispose of 5 years after the date of investigation.

108-12 SANITATION CONTROL AND LEAD POISONING PREVENTION

108-12-1 CASE MANAGEMENT RECORDS-LEAD POISONING

Records of persons tested for lead poisoning and managed in the Lead Poisoning Prevention Program. The records will contain, when applicable, the following information:

Patient demographics

Patient history and environmental information

Laboratory results

Exposure information

Case management activity

May, on occasion, contain other information or records.

Dispose of 20 years after release from the Program.

108-12-2 ENVIRONMENTAL ASSESSMENTS-LEAD POISONING

Reports of environmental assessments for lead contamination. The reports will include, when applicable, the following information:

Lead dust wipe analyses

Chain of custody documentation-laboratory samples

Risk assessments

Inspection results

XRF results

Clearance reports

Sampling data

May, on occasion, other information or records.

Dispose of 20 years following patient release from program OR date of last assessment, whichever is later.

108-12-3 SANITATION COMPLAINT CARDS

Card contains information regarding a condition or situation that is a possible sanitary hazard. The card will contain, if applicable, the following information:

Location of the possible hazard

Name and contact information of person filing the complaint

Nature of the complaint

Condition found and action taken

May, on occasion, contain other information or records.

Dispose of 5 years after date of investigation.

108-12-4 SANITATION NOTICES OF VIOLATION

Letter to responsible party informing the party that they are in violation of a sanitation code or regulation. The letter will contain, when applicable, the following information:

Nature of the violation

Code or regulation violated

Correction required

Timeframe in which the correction must be accomplished

Consequences of non-compliance

May, on occasion, contain other information or records.

Dispose of 5 years after correction is completed.

108-12-5 DEMOLITION REVIEW FORMS

Memo to the City of Omaha-Permits and Inspection stating that a premise is free of rodents, pigeons, and/or vermin infestation.

Dispose of 5 years after date of the memo.

108-12-6 APPLICATIONS FOR DOMESTIC ANIMAL PERMIT

Application form completed by an individual wishing to maintain selected animals or bees on their property. The form will contain, when applicable, the following information:

Name of applicant

Location of the property

Species and number of animals/bees

Action taken by the Health Department

Dispose of 5 years after the date of the application.

108-12-7 ANIMAL/BEE PERMITS

Official permit issued allowing for the Retaining of selected animals/bees at a specific location. The permit contains the following information:

Name of the person to whom the permit is issued

Location for which the permit is issued

Signature of the supervisor of Sanitation Control

Retain permanently.

108-12-8 WEST NILE VIRUS SURVEILLANCE DATA

Aggregate data regarding results of sampling for mosquito larvae by location of sampling. The spreadsheet contains the following information:

Location of the sampling

Date of the sampling

Results of the sampling

Retain permanently.

108-12-9 MOSQUITO LARVAE SURVEILLANCE FORMS

Report form containing the results of sampling for mosquito larvae at a specific location. The form contains the following information:

Location of the sampling

Date and time of the sampling

Results of the sampling

Abatement Action taken

Dispose of 2 years after the date of the sampling.

108-13 LABORATORY

108-13-1 C.L.I.A. CERTIFICATIONS

Documentation that the Douglas County health Department Laboratory is certified to perform selected laboratory tests under the Clinical Laboratory Improvement Act rules and regulations.

Dispose of 3 years after the issuance of the certification.

108-13-2 WATER TESTING CERTIFICATIONS

Documentation that the Douglas County Health Department Laboratory is certified by the Nebraska Health and Human Services System to perform selected laboratory tests on water.

Dispose of 5 years after the issuance of the certification.

108-13-3 RESULTS OF AIR MONITORING

Reports of the results of tests for air pollutants performed on samples collected at various sites in Douglas County. The results will contain the following information:

Site of the air sampling

Test results

Dispose of 5 years after the date of the test.

108-13-4 ALCOHOL LICENSES (NON-BEVERAGE)

Permit issued by the Nebraska Liquor Control Commission to the Douglas County Health Department to maintain a supply of ethyl alcohol for use by the Douglas County Health Department Laboratory.

Dispose of 5 years after the expiration of the permit.

108-13-5 ATF ALCOHOL PERMITS

Documentation of fee payment to the Federal Alcohol-Tobacco-Firearms Agency for permission to maintain a supply of ethyl alcohol for use by the Douglas County Health Department Laboratory.

Dispose of 5 years after receipt of fee payment document.

108-13-6 WATER TEST RESULTS

Results of tests performed on water samples submitted to the Douglas County Health Department Laboratory. The results will contain, when applicable, the following information:

Site of collection of the sample

Test results

Dispose of 5 years after the date of the test.

108-13-7 EPA/NDEQ AUDIT REPORTS

Performance audit reports from the Federal Environmental Protection Agency and the Nebraska Department of Environmental Quality regarding the air monitoring testing procedures of the Douglas County Health Department Laboratory.

Dispose of 5 years after the date of the report.

NOTE

1. These records may be disposed of after the required retention period provided the audit has been completed with the audit report released and all related audit comments resolved. Check with the organization that performed the audit, and, if applicable, the Federal cognizant agency if there is a question whether resolution is complete. For records retention purposes only, the issuance of an audit waiver (or an Unaudited Financial Statement for villages) by the Auditor of Public Accounts shall take the place of an actual audit.