This is for information of all concerned that the Board of Governors in its 108th meeting held on 25.10.2021 vide resolution R_108/BOG/12/2021 approved the “Data Retention Policy for IIT Guwahati Telemedicine Portal” for retention of data accumulated through the Institute’s Telemedicine Portal that was launched on 16th March, 2021.

A copy of the Data Retention Policy for IIT Guwahati Telemedicine Portal is attached herewith.
DATA RETENTION POLICY FOR IITG TELEMEDICINE PORTAL

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Introduction: The IITG Telemedicine Portal was launched on 16th March, 2021. In order to streamline the procedure(s) for retention of digital data accumulated through the portal a policy for data retention has been formulated. The inputs from RMPs, CCC and end-users have been taken into the account while drafting the policy. In addition to that the guidelines issued by the government regarding telemedicine practices and also the government orders for medical records retention have formed the base of the policy.
**Scope:** This policy encompasses the various principles or aspects for retention of all kinds of medical records stored in form of digitalised data accumulating in the portal for availing telemedicine consultations and for other patient care uses. The responsibilities of the RMPs and end-users have been mentioned in the policy documents. The data security and privacy clause have been spelt out in the policy. However, the entire scope of the policy will be guided by the latest government policies or guidelines and subject to amendments from time to time or as per the rules of this institute.

**Definitions:**

(1) **RMPs:** RMPs means Registered Medical Practitioners or doctors who are responsible for patient care duties including telemedicine consultation.

(2) **Users:** Users means the patient availing the telemedicine consultation from the RMPs.

(3) **Data retention:** The policies that pertains to un-modifiable data and data management.

(4) **Digital Data:** Any form electronic data that includes electronic files, sms, messages, chat-messages, emails, images, audio clip, video clip, audio-video clips e.t.c.

(5) **Data Privacy:** Data Privacy describes the practices which ensure that the data shared by customers is only used for its intended purpose.

(6) **Data Security:** Data security is the practices of protecting digital information from unauthorized access, corruption, or theft during its entire lifecycle.
Stakeholder and their roles:

(i) RMPs: As per the MCI guidelines on telemedicine practices, RMPs role in keeping the data secured and private is accorded topmost priority. They must ensure that the patient data is kept secured and free from any unauthorised access of any third party.

-See page 16 of MCI guidelines

(ii) Users: Users should provide their identity before indulging in any form telemedicine consultation and should completely abide by the instructions given by the RMPs. Anonymous user can never undertake the consultation from RMPs. The digital data should be uploaded as per the advice of the RMPs should completely match the file size (in pdf, jpeg, e.t.c.). The consent from patient(user) who is willing to avail telemedicine consultation is completely mandatory.

(iii) CCC: The CCC should provide the technical support to users and RMPs and maintain the digital data and data servers used for retaining and retrieval of these data accumulated during consultation. They have to provide all the data to the RMPs before the retention period gets over. The period for the retaining data will be mandated as per the advice of RMPs or per the exiting government orders in this matter. The most important role of CCC will be to provide a digital or virtual platform for facilitating telemedicine consultation.
Policy guidelines:

The policy is drafted based on the MCI guidelines for telemedicine practices in India, 2020 and also as per the IHR 2020. The policy has adopted the standard practices for maintaining the digital data as per existing government orders from GOI or also data privacy as Information Technology Act of GOI. These guidelines will be amended in future based on the guidelines or office order from GOI on telemedicines practices, Information Technology Act and medical records retention policy of the government.

Basic principles for medical records retention under telemedicine practices of IIT Guwahati are as follows:

(1) **Period of data retention:** All form of data *(as indicated in definitions sub-clause (4))* must be compulsorily stored for *period of 03 years* by CCC. After completion of 03 years the data should be handed to the concerned RMP (of a particular patient to who s/he has offered telemedicine consultation in the past) in electronic form.

In case a RMP leaves the Institute or gets retired from service then s/he must hand over all the data under his/her possession during service to the HOS Medical Section.

In case of death of a user who had taken telemedicine consultation the data should be kept for 03(three years) and after that remove that data on expiry of 03 years period.

- See page 22 of EHR Standards, 2016

(2) **Data transfer to RMPs:** All patient data should be handed to RMPs (as mentioned in pt.1) in electronic form either as files/folders or e-mail after completion of the retention period by CCC.

(3) **Data Servers:** The servers used for storing all the digital data will be kept in the CCC for its maintenance under its expert supervision.

(4) **Data Security:** The CCC IITG will be responsible for data security till the retention period and after that RMPs will be responsible for the data security.

(5) **Data Encryption:** All the data should be kept in an *encrypted* form in servers.
Legal aspect of the policy:

1) Custodian and Consultative Mechanism: As per the Institute Technology Act 1961, the Registrar, IIT Guwahati is the Custodian of all records including Telemedicine Data. The Data flows between RMP and Patient with the technical IT support from CCC. The record retention of highly confidential nature will be supervised through a consultative mechanism. The consultative mechanism will be a team consisting of the HoS, Medical Section; the HoC, CCC and their nominees which are directly connected with the process.

2) Controller of Information: As per the Information Technology Act 2000, a controller has to be appointed as a certifying authority. So, the Registrar or his authorised nominee (official) will act as the Controller of Information flowing in and out from the Telemedicine Portal and will also act as the sole authority.

3) Dispute Redressal: For any dispute arising due to Data privacy and retention under Telemedicine Portal, the Director of the Institute or his nominee to be delegated by BoG will act as authority for redressal of disputes.

4) National Medical Commission (NMC): The functioning of telemedicine portal will be determined by the standard practices promulgated by NMC from time to time. The RMPs will act according to the standard practices or guidelines issued from NMC.

REFERENCES:

(1) Telemedicine Practice Guidelines 2020 from Medical Council of India
(2) EHR Standards, 2016, GOI
(3) Information Technology Act, GoI
(4) NMC Guidelines
Disclaimer: The policy has been drafted as per the latest Government orders, acts, rules on Telemedicine practices in India and also Information Technology Act, GOI. However, the policy will be amended in future as per the subsequent government orders on telemedicine practices and directives of Apex Authorities on Medical care in India.