

APPENDIX A	
COUNTWAY TIMING ANALYSIS	
COPE	
Activity	Total Number of Activity Hours
Refoldering	106.5
Collection Review and Processing Planning	24.5
Description	12
Digitization	1
Folder Listing	78.25
MD Tracking	24.25
Rearranging	66
Preservation Photocopying	6.5
Barcoding and Labeling	2.5
Reboxing	9
Special Projects: Series-Level Description (CLIR 2013)	29.5
Folder List Export and Tagging	13.25
MARC/Bib Record Creation/Revision	3
Promoting In-Process and Processed Collections	1
Special Projects: Biographical Note/Authority Record Creation (CLIR 2013)	16.5
Special Projects: Collection-Level Description (CLIR 2013)	11.75
Special Projects: Restrictions Screening - Folder Level (CLIR 2013)	66.75
Special Projects: Restrictions Screening Audits (CLIR 2013)	4.25
Preservation Tasks (Misc.)	6.25
	482.75
LAGAKOS	
Activity	Total Number of Activity Hours
Folder List Export and Tagging	12.25
Collection Review and Processing Planning	6.25
Digitization	0.5
Folder Listing	33.75
MD Tracking	2.5
Rearranging	9.75
Refoldering	28.25
Processing Research	3.75
Barcoding and Labeling	1.5

Finding Aid Review (Processing Staff)	1.75
Electronic Records: Processing and Description	2.75
MARC/Bib Record Creation/Revision	3.5
Promoting In-Process and Processed Collections	2.75
Electronic Media Barcoding and Logging	4.5
Special Projects: Biographical Note/Authority Record Creation (CLIR 2013)	3
Special Projects: Collection-Level Description (CLIR 2013)	2.5
Special Projects: Restrictions Screening - Folder Level (CLIR 2013)	10
Special Projects: Series-Level Description (CLIR 2013)	5.5
Electronic Records: Disk Imaging and File Extraction	8
Pre-Processing (Accession Level) Box and Folder Listing	2.52
	145.27
RELMAN	
Activity	Total Number of Activity Hours
Folder List Export and Tagging	19.25
Collection Review and Processing Planning	10.75
Folder Listing	72.75
MD Tracking	9.75
Rearranging	26
Preservation Photocopying	5
Barcoding and Labeling	2.5
Processing Research	3.5
Special Projects: Series-Level Description (CLIR 2013)	3.75
MARC/Bib Record Creation/Revision	7.5
Promoting In-Process and Processed Collections	5.25
Special Projects: Collection-Level Description (CLIR 2013)	4
Special Projects: Restrictions Screening - Folder Level (CLIR 2013)	37

Special Projects: Restrictions Screening - Series Level Review & Description (CLIR 2013)	3
Special Projects: Restrictions Screening Audits (CLIR 2013)	5.25
Refoldering	55.35
	270.6
LINDEMANN	
Activity	Total Number of Activity Hours
Refoldering	242.75
Special Projects: Digitization, Post: Check-in and Processing	0.75
Special Projects: Digitization, Post: Quality Control	0.75
Preservation: Media Preparation and Management	7
Promoting In-Process and Processed Collections	7.25
Folder Listing	223.25
Records Management: Training	0.5
Special Projects: Biographical Note/Authority Record Creation (CLIR 2013)	8.75
Special Projects: Restrctions Screening - Folder Level (CLIR 2013)	102.75
Special Projects: Restrictions Screening Audits (CLIR 2013)	8.25
Special Projects: Series-Level Description (CLIR 2013)	80.25
Special Projects: Restrictions Screening - Series Level Review & Description (CLIR 2013)	4.75
Special Projects: Collection-Level Description (CLIR 2013)	7
Folder List Export and Tagging	16.75
Reboxing	23.75
Preservation Tasks (Misc.)	12.75
Preservation Photocopying	7.75
MD Tracking	50.25
Rearranging	135.5
Review and Separation of Archival Records from Faculty Papers	1.75

Digitization	0.75
Description	13.5
Collection Review and Processing Planning	48.25
Barcoding and Labeling	8.25
MARC/Bib Record Creation/Revision	3.25
	1016.5
DEPT. OF BIOSTATISTICS	
Activity	Total Number of Activity Hours
Electronic Records: Disk Imaging and File Extraction	0.25
Special Projects: Series-Level Description (CLIR 2013)	2.25
Special Projects: Restrctions Screening - Folder Level (CLIR 2013)	5.5
Special Projects: Collection-Level Description (CLIR 2013)	1
Special Projects: Biographical Note/Authority Record Creation (CLIR 2013)	3
Electronic Media Barcoding and Logging	0.25
MARC/Bib Record Creation/Revision	6.25
Folder List Export and Tagging	7.5
Finding Aid Review (Processing Staff)	1
Editing and Publishing Finding Aids (CSA/HCS)	0.25
MD Tracking	0.75
Barcoding and Labeling	0.5
	28.5
HOPKINS TIMING ANALYSIS	
POLK (per SAA presentation)	
activity_description_general-pickli	Total Number of Activity Hours
5 - Promoting In-Process and Processed Collections	3.5
6 - Description: Authority Control	15.25
7 - Folder Listing	194.05
14 - MD Tracking	3.15
19 - Description	49.75
20 - Editing and Publishing Finding Aids (CSA)	4.75

21 - Finding Aid Review (Processing Staff)	0.25
27 - Rearranging	65
30 - Barcoding and Labeling	1.25
40 - Collection Review and Processing Planning	120.25
41 - Pre-Processing (Accession Level) Box and Folder Listing	4.5
47 - Refoldering	288.4
50 - Screening for PHI/CI: Item Level	196.25
51 - Screening for PHI/CI: Series Level	5.25
52 - Series listing	11.25
53 - Student Assistant Management	98.25
	1061.1
HARDY (per SAA presentation)	
activity_description_general-picklis	Total Number of Activity Hours
5 - Promoting In-Process and Processed Collections	7.5
6 - Description: Authority Control	9.75
7 - Folder Listing	65.5
11 - Preservation Tasks (Misc.)	10
14 - MD Tracking	0.75
17 - Box Listing	1
19 - Description	53
20 - Editing and Publishing Finding Aids (CSA)	4.25
21 - Finding Aid Review (Processing Staff)	1.25
27 - Rearranging	337
30 - Barcoding and Labeling	4.75
34 - Processing Research	23
40 - Collection Review and Processing Planning	51
41 - Pre-Processing (Accession Level) Box and Folder Listing	14
45 - Records Management: Consultations	5
46 - Redaction of PHI/CI: Information level	6.5
47 - Refoldering	148

49 - Screening for PHI/CI: Folder level	4.5
50 - Screening for PHI/CI: Item Level	144.75
51 - Screening for PHI/CI: Series Level	0.5
52 - Series listing	14.5
53 - Student Assistant Management	74.5
	981

STARFIELD

activity_description_general-picklis	Total Number of Activity Hours
5 - Promoting In-Process and Processed Collections	6.5
6 - Description: Authority Control	33.75
7 - Folder Listing	155.25
13 - Accessioning: collection record creation	3.5
14 - MD Tracking	6.75
15 - Digitization	0.25
16 - Integration	0.75
17 - Box Listing	0.5
19 - Description	43.25
20 - Editing and Publishing Finding Aids (CSA)	13
21 - Finding Aid Review (Processing Staff)	4.5
24 - Acquisitions: Donor communications	2.25
27 - Rearranging	189
30 - Barcoding and Labeling	7.75
32 - Administration (Special Projects): Staff Meetings (Internal)	0.5
37 - Folder List Export and Tagging	77
39 - Acquisitions: Physical transfer	0.25
40 - Collection Review and Processing Planning	142
41 - Pre-Processing (Accession Level) Box and Folder Listing	15.5
43 - Reboxing	55
47 - Refoldering	738.75

49 - Screening for PHI/CI: Folder level	0.25
50 - Screening for PHI/CI: Item Level	6
52 - Series listing	19
53 - Student Assistant Management	85
	1606.25
MCCOLLUM/DAY	
activity_description_general-picklis	Total Number of Activity Hours
6 - Description: Authority Control	1.75
7 - Folder Listing	46.75
11 - Preservation Tasks (Misc.)	9.75
14 - MD Tracking	0.75
19 - Description	7
20 - Editing and Publishing Finding Aids (CSA)	6
27 - Rearranging	11.5
32 - Administration (Special Projects): Staff Meetings (Internal)	6.25
40 - Collection Review and Processing Planning	109.5
47 - Refoldering	117
51 - Screening for PHI/CI: Series Level	0.5
52 - Series listing	3.25
53 - Student Assistant Management	14
	334

APPENDIX B

Restrictions Analyses for Processed Collections

HSPH Department of Biostatistics Restrictions Statistics

Biostatistics	# Folders	Harvard University Records - 80 years	Harvard University Records - 50 years	Medical / patient / health records	Student Records	Density of personally identifying information	Total Restricted
Collection Totals:	169	36	169	0	3	0	169
Percentage of total collection:	100%	21.302%	100.000%	0.000%	1.775%	0.000%	100.000%
Percentage of Restricted Folders:	n/a	21.302%	100.000%	0.000%	1.775%	0.000%	100%
Series 00489: I. Administrative Records							
Series I Totals	63	4	59	0	0	0	63
Percentage of Total Series	100.000%	6.349%	93.651%	0.000%	0.000%	0.000%	100.000%
Percentage of Restricted Folders:	n/a	6.349%	93.651%	0.000%	0.000%	0.000%	100.000%
Series 00493: II. Faculty Search and Appointment Records							
Series II Totals	43	30	13	0	0	0	43
Percentage of Total Series	100.000%	69.767%	30.233%	0.000%	0.000%	0.000%	100.000%
Percentage of Restricted Folders:	n/a	69.767%	30.233%	0.000%	0.000%	0.000%	100%
Series 00490: III. Departmental Meetings Records							
Series III Totals	21	2	19	0	0	0	21
Percentage of Total Series	100.000%	9.524%	90.476%	0.000%	0.000%	0.000%	100.000%
Percentage of Restricted Folders:	n/a	9.524%	90.476%	0.000%	0.000%	0.000%	100.000%
Series 00491: IV. Committee Records Student Records							
Series IV Totals	14	0	14	0	1	0	14
Percentage of Total Series	100.000%	0.000%	100.000%	0.000%	6.667%	0.000%	100.000%
Percentage of Restricted Folders:	n/a	0.000%	100.000%	0.000%	6.667%	0.000%	100.000%
Series 00492: V. Course Records Student Records							
Series V Totals	28	0	28	0	2	0	28
Percentage of Total Series	100.000%	0.000%	100.000%	0.000%	7.143%	0.000%	100.000%
Percentage of Restricted Folders:	n/a	0.000%	100.000%	0.000%	7.143%	0.000%	100.000%

Lindemann Restrictions Statistics Consolidated Medical and Psychiatric

	# Folders	Harvard University Records - 80 years	Harvard University Records - 50 years	Medical / patient / health records (Only 4 folders) -And- Psychiatric/Mental Health Records	Student Records	Density of personally identifying information	Total Restricted
Collection Totals:	4451	792	286	413	28	1	1522
Percentage of total collection:	100%	17.794%	6.426%	9.279%	0.629%	0.022%	34.869%
Percentage of Restricted Folders:	n/a	52.037%	18.791%	27.135%	1.840%	0.066%	100%
Series I							
Series I Totals	2485	729	202	71	25	1	1030
Percentage of Total Series	100%	29.336%	8.129%	2.857%	1.006%	0.040%	41.449%
Percentage of Restricted Folders:	n/a	70.777%	19.612%	6.893%	2.427%	0.097%	100%
Series II							
Series II Totals	295	4	3	214	0	0	221
Percentage of Total Series	100%	1.356%	1.017%	72.542%	n/a	n/a	74.915%
Percentage of Restricted Folders:	n/a	1.810%	1.357%	96.833%	n/a	n/a	100%
Series III							
Series III Totals	321	3	6	1	0	0	10
Percentage of Total Series	100%	0.935%	1.870%	0.312%	n/a	n/a	3.115%
Percentage of Restricted Folders:	n/a	30%	60%	10%	n/a	n/a	100%
Series IV							
Series IV Totals	115	23	0	5	0	0	28
Percentage of Total Series	100%	20%	n/a	4.348%	n/a	n/a	24.348%
Percentage of Restricted Folders:	n/a	82.143%	n/a	17.857%	n/a	n/a	100%
Series V							
Series V Totals	160	0	0	3	0	0	3
Percentage of Total Series	100%	n/a	n/a	1.875%	n/a	n/a	1.875%
Percentage of Restricted Folders:	n/a	n/a	n/a	100.000%	n/a	n/a	100%
Series VI							
Series VI Totals	274	29	49	32	2	0	112

Medical / patient /
health records (Only 4
folders)

-And-
Psychiatric/Mental
Health Records

Density of personally
identifying
information

Total
Restricted

	# Folders	Harvard University Records - 80 years	Harvard University Records - 50 years	Psychiatric/Mental Health Records	Student Records	Density of personally identifying information	Total Restricted
Percentage of Total Series	100%	10.584%	17.883%	11.679%	0.730%	n/a	40.876%
Percentage of Restricted Folders:	n/a	25.893%	43.750%	28.571%	1.786%	n/a	100%
Series VII							
Series VII Totals	431	0	25	87	1	0	113
Percentage of Total Series	100%	n/a	5.800%	20.186%	0.232%	n/a	41.449%
Percentage of Restricted Folders:	n/a	n/a	22.124%	76.991%	0.885%	n/a	100%
Series VIII							
Series I Totals	33	4	0	0	0	0	4
Percentage of Total Series	100%	12.121%	n/a	n/a	n/a	n/a	12.121%
Percentage of Restricted Folders:	n/a	100%	n/a	n/a	n/a	n/a	100%
Series IX							
Series IX Totals	337	0	1	0	0	0	1
Percentage of Total Series	100%	n/a	0.297%	n/a	n/a	n/a	0.297%
Percentage of Restricted Folders:	n/a	n/a	100%	n/a	n/a	n/a	100%

Relman Restrictions Statistics _Consolidated Medical and Psychiatric

RELMAN	# Folders	Harvard University Records - 80 years	Harvard University Records - 50 years	Medical / patient / health records (And Psychiatric/Mental Health Records: 1 folder)	Student Records	Density of personally identifying information	Total Restricted
Collection Totals:	417	52	12	34	0	9	107
Percentage of total collection:	100%	12.470%	2.878%	8.153%	0.000%	2.158%	25.899%
Percentage of Restricted Folders:	n/a	48.148%	11.111%	31.481%	0.000%	8.333%	100%
Series I. Professional Correspondence							
Series I Totals	177	23	0	19	0	5	47
Percentage of Total Series	100%	12.994%	0.000%	10.734%	0.000%	2.824%	26.553%
Percentage of Restricted Folders:	n/a	48.936%	0.000%	40.425%	0.000%	10.638%	100%
Series II. Subject Files							
Series II Totals	302	2	1	4	0	2	9
Percentage of Total Series	100%	0.662%	0.331%	1.324%	0.000%	0.662%	2.980%
Percentage of Restricted Folders:	n/a	22.222%	11.111%	44.444%	0.000%	22.222%	100%
Series III. Committee Records							
Series III Totals	37	23	8	1	0	1	33
Percentage of Total Series	100%	62.162%	21.622%	2.703%	0.000%	2.703%	89.189%
Percentage of Restricted Folders:	n/a	69.697%	24.242%	3.030%	0.000%	3.030%	100.000%
Series IV. Writings							
Series IV Totals	300	1	0	2	0	1	4
Percentage of Total Series	100%	0.333%	0.000%	0.667%	0.000%	0.333%	1.333%
Percentage of Restricted Folders:	n/a	25.000%	0.000%	50.000%	0.000%	25.000%	100.000%
Series V. Events							
Series V Totals	67	2	0	0	0	0	2
Percentage of Total Series	100%	2.985%	0.000%	0.000%	0.000%	0.000%	2.985%
Percentage of Restricted Folders:	n/a	100.000%	0.000%	0.000%	0.000%	0.000%	100.000%
Series VI. Personal Records							
Series VI Totals	19	1	3	0	0	0	4
Percentage of Total Series	100%	5.263%	15.789%	0.000%	0.000%	0.000%	0.211%
Percentage of Restricted Folders:	n/a	25.000%	75.000%	0.000%	0.000%	0.000%	100.000%
Series VII. Slides							
Series VII Totals	47	0	0	8	0	0	8
Percentage of Total Series	100%	0.000%	0.000%	17.021%	0.000%	0.000%	17.021%
Percentage of Restricted Folders:	n/a	0.000%	0.000%	100.000%	0.000%	0.000%	100.000%

Hardy Restrictions Statistics 2014

	# Folders	Student/Personnel Information	Medical / patient / health records	Total Restricted
Collection Totals:	1225	137	71	196
Percentage of total collection:	100%	11.184%	5.796%	16.000%
Percentage of Restricted Folders:	n/a	69.898%	36.224%	100%
Series 1. Biographical and Personal Files				
Series 1 Totals	75	0	4	4
Percentage of Total Series	100%	0.000%	5.333%	5.333%
Percentage of Restricted Folders:	n/a	0.000%	100.000%	n/a
Series 2. Correspondence				
Series 2 Totals	90	7	29	33
Percentage of Total Series	100%	7.778%	32.222%	36.666%
Percentage of Restricted Folders:	n/a	21.212%	87.879%	100%
Series 3. Johns Hopkins Institutional Records				
Series 3 Totals	447	116	20	130
Percentage of Total Series	100%	25.951%	4.474%	29.083%
Percentage of Restricted Folders:	n/a	89.231%	15.385%	100%
Series 4. External Institutional Records				
Series 4 Totals	215	13	8	18
Percentage of Total Series	100%	6.047%	3.721%	8.372%
Percentage of Restricted Folders:	n/a	72%	44.444%	100%
Series 5. Conferences, Symposia, Talks, and Visiting Lectureship Files				
Series 5 Totals	76	0	1	1
Percentage of Total Series	100%	0.000%	1.316%	1.316%
Percentage of Restricted Folders:	n/a	n/a	100.000%	100%
Series 6. Research Files				
Series 6 Totals	164	1	1	2
Percentage of Total Series	100%	1%	1%	1.220%
Percentage of Restricted Folders:	n/a	50.000%	50.000%	100%
Series 7. Publication Files				
Series 7 Totals	123	0	0	0
Percentage of Total Series	100%	n/a	n/a	n/a
Percentage of Restricted Folders:	n/a	n/a	n/a	n/a
Series 8. Photographs				

	# Folders	Student/Personnel Information	Medical / patient / health records	Total Restricted
Series 8 Totals	30	0	8	8
Percentage of Total Series	100%	n/a	26.666%	26.666%
Percentage of Restricted Folders:	n/a	n/a	100.000%	100%
Series 9. Sound recordings				
Series 9 Totals	5	0	0	0
Percentage of Total Series	100%	n/a	n/a	n/a
Percentage of Restricted Folders:	n/a	n/a	n/a	n/a

McCollum Restrictions Statistics 2014

	# Folders	Student/Personnel Information	Medical / patient / health records	Total Restricted
Collection Totals:	780	1	24	25
Percentage of total collection:	100%	0.128%	3.077%	3.205%
Percentage of Restricted Folders:	n/a	4.000%	96.000%	100%
Series 1. Harry G. Day's Collection Commemorating Elmer V. McCollum				
Series 1 Totals	564	0	0	0
Percentage of Total Series	100%	0.000%	0.000%	0.000%
Percentage of Restricted Folders:	n/a	0.000%	0.000%	n/a
Series 2. Harry G. Day Files				
Series 2 Totals	101	0	0	0
Percentage of Total Series	100%	n/a	n/a	n/a
Percentage of Restricted Folders:	n/a	n/a	n/a	n/a
Series 3. Elmer V. and Ernestine B. McCollum Papers				
Series 3 Totals	209	1	24	25
Percentage of Total Series	100%	0.478%	11.483%	11.961%
Percentage of Restricted Folders:	n/a	4.000%	96.000%	100%
Series 4. Photographs				
Series 8 Totals	77	0	0	0
Percentage of Total Series	100%	n/a	n/a	n/a
Percentage of Restricted Folders:	n/a	n/a	n/a	n/a
Series 5. Sound recordings				
Series 9 Totals	9	0	0	0
Percentage of Total Series	100%	n/a	n/a	n/a
Percentage of Restricted Folders:	n/a	n/a	n/a	n/a
Series 6. Artifacts				
Series 7 Totals	0	0	0	0
Percentage of Total Series	n/a	n/a	n/a	n/a
Percentage of Restricted Folders:	n/a	n/a	n/a	n/a

Polk Restrictions Statistics 2014

	# Folders	Student/Personnel Information	Medical / patient / health records	Total Restricted
Collection Totals:	1099	222	166	342
Percentage of total collection:	100%	20.200%	15.105%	31.119%
Percentage of Restricted Folders:	n/a	64.912%	48.538%	100%
Series 1. Personal and Biographical Files				
Series I Totals	7	0	0	0
Percentage of Total Series	100%	0.000%	0.000%	0.000%
Percentage of Restricted Folders:	n/a	0.000%	0.000%	n/a
Series 2. Johns Hopkins Institutional Records				
Series II Totals	213	137	29	141
Percentage of Total Series	100%	63.721%	13.625%	66.197%
Percentage of Restricted Folders:	n/a	97.163%	20.567%	100%
Series 3. External Institutional Records				
Series III Totals	31	7	0	7
Percentage of Total Series	100%	22.581%	n/a	22.581%
Percentage of Restricted Folders:	n/a	100%	n/a	100%
Series 4. Research Files				
Series IV Totals	714	78	137	194
Percentage of Total Series	100%	11%	19.188%	27.171%
Percentage of Restricted Folders:	n/a	40.206%	70.619%	100%
Series 5. Publication Files				
Series V Totals	134	0	0	0
Percentage of Total Series	100%	n/a	n/a	n/a
Percentage of Restricted Folders:	n/a	n/a	n/a	n/a

Starfield Restrictions Statistics 2014

	# Folders	Student/Personnel Information	Medical / patient / health records	Total Restricted	Notes
Collection Totals:	3113	1070	3	1073	
Percentage of total collection:	100%	34.372%	0.096%	34.468%	
Percentage of Restricted Folders:	n/a	99.720%	0.280%	100%	
Series 1. Biographical and Personal Files					
Series I Totals	65	5	0	5	
Percentage of Total Series	100%	7.692%	0.000%	7.692%	
Percentage of Restricted Folders:	n/a	100.000%	0.000%	100%	
Series 2. Correspondence Files					
Series II Totals	499	499		499	Entire series at risk for CI/PHI, screen on demand
Percentage of Total Series	100%	100.000%	unknown	100.000%	
Percentage of Restricted Folders:	n/a	100.000%	unknown	100%	
Series 3. Johns Hopkins Institutional Affiliations					
Series III Totals	332	332		332	Entire series at risk for CI/PHI, screen on demand
Percentage of Total Series	100%	100.000%	unknown	100.000%	
Percentage of Restricted Folders:	n/a	100.000%	unknown	100%	
Series 4. Assessment Instruments					
Series IV Totals	261	24	unknown	24	
Percentage of Total Series	100%	9.195%	unknown	9.195%	
Percentage of Restricted Folders:	n/a	100.000%	unknown	100%	
Series 5. International Society for Equity in Health (ISEqH)					
Series V Totals	89	14	unknown	14	
Percentage of Total Series	100%	15.730%	unknown	15.730%	
Percentage of Restricted Folders:	n/a	100.000%	unknown	100.000%	
Series 6. External Institutional Records					
Series VI Totals	368	112	unknown	112	
Percentage of Total Series	100%	30.435%	unknown	30.435%	
Percentage of Restricted Folders:	n/a	100%	unknown	100%	
Series 7. Editorial Records					
Series VII Totals	41	41	unknown	41	
Percentage of Total Series	100%	100.000%	unknown	100.000%	

	# Folders	Student/Personnel Information	Medical / patient / health records	Total Restricted	Notes
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Percentage of Restricted Folders:	n/a	100%	unknown	100%	
Series 8. Conferences, Presentations, and International Collaborations					
Series VIII Totals	451	3	unknown	3	
Percentage of Total Series	100%	66.500%	unknown	66.500%	
Percentage of Restricted Folders:	n/a	100%	unknown	100%	
Series 9. Transparencies and Slides					
Series IX Totals	101	0	0	0	
Percentage of Total Series	100%	n/a	n/a	n/a	
Percentage of Restricted Folders:	n/a	n/a	n/a	n/a	
Series 10. Research Files					
Series X Totals	518	37	3	40	
Percentage of Total Series	100%	7%	0.579%	7.722%	
Percentage of Restricted Folders:	n/a	92.500%	7.500%	100%	
Series 11. Publication Files					
Series XI Totals	334	3	0	3	
Percentage of Total Series	100%	0.898%	n/a	0.898%	
Percentage of Restricted Folders:	n/a	100.000%	n/a	100.000%	
Series 12. Photographs					
Series XII Totals	54	0	0	0	
Percentage of Total Series	100%	n/a	n/a	n/a	
Percentage of Restricted Folders:	n/a	n/a	n/a	n/a	
Series 13. Electronic Files					
Series XIII Totals	n/a	n/a	n/a	n/a	Series not processed yet
Percentage of Total Series	n/a	n/a	n/a	n/a	
Percentage of Restricted Folders:	n/a	n/a	n/a	n/a	

APPENDIX C: PROCESSING COMPARISON OF A HIPAA (HOPKINS) AND A NON-HIPAA COVERED REPOSITORY, AS PRESENTED AT THE ANNUAL CONFERENCE OF THE SOCIETY OF AMERICAN ARCHIVISTS, AUGUST 2014

ALAN MASON CHESNEY MEDICAL ARCHIVES OF THE JOHNS HOPKINS MEDICAL INSTITUTIONS														
	% of collection restricted per Federal Mandate: HIPAA	% of collection restricted per Institutional Mandate	Pre-processing extent for collection in cubic feet	Post-processing extent for collection in cubic feet	% of collection that is restricted	Hours to process collection	Hours required to identify and apply restrictions	% of processing time to identify and apply restrictions	Average processing time per cubic foot (entire collection, pre-processing volume)	Average processing time per cubic foot (entire collection, post-processing volume)	Complexity	Series containing the most restrictions	% of series restricted	
William George Hardy and Miriam Pauls Hardy Collection, 1875; 1930-2008 (inclusive)	5.796	11.184	28	21	16	981 (Project Archivist, 6 student assistants)	156.25	15.927	31.05	46.71	5: Extremely difficult	II. Correspondence	36.666	
B. Frank Polk Collection, 1972-1990	15.105	20.2	31	24	31.119	1061.1 (Project Archivist, 6 student assistants)	201.1	18.989	34.22	44.21	2: Somewhat easy	II. Johns Hopkins Institutional Records	66.197	
CENTER FOR THE HISTORY OF MEDICINE, FRANCIS A. COUNTWAY OF MEDICINE														
Erich Lindemann papers, 1885-1991 (inclusive), 1950-1974 (bulk):	% of collection restricted per Ethical Mandate: Health information about individuals	% of collection restricted per Federal Mandate: United States government records found in non-governmental repositories	% of collection restricted per Local Mandate: Identifying information about individuals found in manuscript collections	Pre-processing extent for collection in cubic feet	Post-processing extent for collection in cubic feet	% of collection that is restricted	Hours to process collection	Hours required to identify and apply restrictions	% of processing time to identify and apply restrictions	Average processing time per cubic foot (entire collection, pre-processing volume)	Average processing time per cubic foot (entire collection, post-processing volume)	Complexity	Series containing the most restrictions	% of series restricted
Collection 2 and 3: Stephen W. Lagakos papers, 1979-2009 (inclusive), 1995-2009 (bulk) and Harvard School of Public Health, Department of Biostatistics records, 1981-2009 (inclusive), 1999-2003 (bulk)*	9.279	0	0.022	111.5	87.52	34.869	1016.5	115.75	11.38	9.111 (1 processor and 1 assistant)	11.61 (1 processor and 1 assistant)	4: Difficult	Series II: West End Research Project	74.915

Survey on Research Access to Protected Records Containing Health

About the survey

This survey is being conducted by the Center for the History of Medicine, Francis A. Countway Library of Medicine, and the Alan Mason Chesney Medical Archives of the Johns Hopkins Medical Institutions as part of a joint effort to develop best practices for enabling access to special collections containing protected health information (PHI) and other types of access-protected ("restricted") records. For the purposes of this survey, health information (protected or otherwise) is defined according to the HIPAA Privacy Rule (1996) as:

"Information, including demographic information, which relates to: 1) an individual's past, present, or future physical or mental health or condition, 2) the provision of health care to the individual, OR 3) the past, present, or future payment for the provision of health care to the individual, AND that identifies the individual or for which there is a reasonable basis to believe can be used to identify the individual. Protected health information includes many common identifiers (e.g., name, address, birth date, Social Security Number) when they can be associated with the health information listed above."

For example, per HIPAA, a medical record, laboratory report, or hospital bill would be PHI because each document would contain a patient's name and/or other identifying information associated with the health data content.

By responding to this survey, you are helping libraries and archives improve how they describe records and make hidden collections available to researchers in more useful ways.

Thank you!

Finding aids and access

1. Have you used manuscript collections or archival records as part of your research?

- Yes
- No

2. If yes, have you used a collection guide ("finding aid") that included information about whether or not patient or other health-related records in the collection had access restrictions?

- Yes
- No

3. How have you learned about the presence of restricted records for the majority of the collections you have used (or were interested) in using?

- A librarian or archivist
- Online using a finding aid
- Online using a library catalog record

Other (please specify)

Survey on Research Access to Protected Records Containing Health

4. What are the kinds of records you were interested in using, but were restricted? Check all that most often apply:

- Medical records and indices (whether patient, diagnostic, or other) maintained by a healthcare provider, such as a hospital or medical practice
- Medical imaging records, such as x-rays
- Photographs of patients
- Psychiatric or other mental health-related records, such as psychotherapy notes
- Research records (such as datasets, human subject research information, etc.) that contain personally identifiable information ("personal identifiers"), such as names, addresses, phone numbers, medical records numbers, etc.
- Other (please specify)

Use of IRB

5. Was submitting a request to an Internal Review Board (IRB) to use the records a possibility?

- Yes
- No

6. If yes, did you end up submitting an IRB to access the records you were interested in using?

- Yes
- No

7. If no, why not?

Barriers to use

Survey on Research Access to Protected Records Containing Health

8. What do you think is the most significant barrier to your use of records containing confidential/protected health information held by special collections, archives, and museums?

- The IRB process takes too long
- Too much paperwork is required to get access to restricted records
- I see records that look interesting in catalogs or collection guides, but I can't tell if they will be useful
- Nothing is digitized
- Repositories aren't open when I have time to do my research
- I don't think I'll be able to quote, reference, or use the records in publications
- No one will tell me if I can use the records or not
- This does not apply to me. There are no barriers to my use of records

Other (please specify)

9. What descriptive information do you think is missing from library catalog records or collection guides (such as those for a manuscript collection)? What information would be most useful to you in deciding whether or not a collection has information relevant to your research?

Ways to Maximize Access

Survey on Research Access to Protected Records Containing Health

10. How useful would having the following descriptive information be in determining whether or not you would submit an IRB to use restricted records containing protected health information?

	Not very useful	Somewhat useful	Very useful	Does not apply to my research
Average age of patients at time of treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Date span of records	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diagnosis/condition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Duration of treatments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Genetic information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Geographic region covered	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Names of medical devices used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescribed medications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Race of patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sex of patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Surgical procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Treating physician/surgeon	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)

Survey on Research Access to Protected Records Containing Health

11. How useful would knowing that the following record formats were in a group of restricted records be to your determining whether or not to submit an IRB?

	Not very useful	Somewhat useful	Very useful	Does not apply to my research
Admission/registration records	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Autopsy records	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Billing information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case files	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consultation files	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Correspondence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diagnostic indices	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family medical histories	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Genetic testing records	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Graphs and charts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospital policies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Immunization records	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Insurance claims	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Informed consent records	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lab notebooks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Microscope slides/specimens	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Photographs/medical imaging	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patient histories	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patient questionnaires	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patient summaries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription books/logs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Research protocols	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Surgical logbooks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)

Comments and Demographics

12. Do you have comments regarding access to special collections containing health records?

Survey on Research Access to Protected Records Containing Health

*13. How do you identify yourself?

- A student (any field)
- A professor/instructor of history, the history of medicine, or the history of science
- A professor/instructor of another Humanities sub-discipline or a different discipline
- A researcher (no academic affiliation)
- A physician or healthcare provider with an interest in the history of medicine or science
- A librarian or archivist

14. How long have you identified as the above?

- 1-5 years
- 6-10 year
- 11-15 years
- Over 15 years

15. If we have questions about your responses to the survey, can we contact you to follow-up?

- Yes
- No

16. If so, please provide your name, affiliation, and email address:

THANK YOU FOR YOUR PARTICIPATION!

List of researcher recommendations re: finding aids and patient records

History of Medicine Working Group meeting, 10 March 2014

1. Provide information on the types of restrictions and outline the steps a researcher needs to take to apply for access.
2. Provide a sample/model completed Access Board application. Something to help guide researchers on how to fill out the application.
3. Clearly state Public Services is available to advise them on 1) making a case for access and 2) how redaction can be accomplished so that the researcher can include that information in an Access Board application.

[For 1 -3, I see there being a need to add a new page in the “Research and Access” section on the website related to restrictions with a downloadable version of the Access Board Application, a model application, and a statement to the effect of “unprocessed collections may be accessible if there is a demonstrated need.”]

4. If an Access Board request is approved, researchers want explicit information about whether or not they can quote/cite the records. Jess mentioned that the Board often returns applications with the “other” box checked, which can also be confusing.
5. Provide links to sample records, such as surveys, protocols, codebooks, etc. [Samples would need to characterize a group of records, not be a random selection. Could put in Omeka or in the DRS.]
6. It is more helpful if groups of records (such as correspondence) include some indication as to the content, especially if there are clearly articulated topics/threads or named correspondents. It was indicated that this can be difficult to do because processors can't look at everything and that processors do not want to emphasize one subject over another as it may be considered interpretive on the part of the archivist. [The compromise would be to sample and overtly state that the topics of the correspondence are the product of sampling.]
7. More information about the processing practices employed. Talk about sampling/what we do. [While this has improved, we can always do more]
8. A way for researchers to leave feedback/notes about a collection that the next user of the collection could access
9. Reconsider how we present our holdings information. Bibliographic records with the “Unprocessed. Closed to research” notice in the Holdings/852 display can scare away new researchers from putting in a request to use an unprocessed collection, while the “severity” of

the note is intended to discourage anyone and everyone from trying to get at unprocessed records before they can be properly cited, etc. Most often, inexperienced researchers won't contact us, so we don't know how many people would actually like to use that collection. Is there a happy medium? Requests for unprocessed collections inform processing planning and we do permit access to unprocessed collections when possible.

RECOMMENDED PRACTICES FOR ENABLING ACCESS TO MANUSCRIPT AND ARCHIVAL COLLECTIONS CONTAINING HEALTH INFORMATION ABOUT INDIVIDUALS

Phoebe Evans Letocha, Alan Mason Chesney Medical Archives of the Johns Hopkins Medical Institutions
Emily R. Novak Gustainis, Center for the History of Medicine, Francis A. Countway Library of Medicine

2015 January 1

ABOUT

The following recommendations were developed by the [Alan Mason Chesney Medical Archives of the Johns Hopkins Medical Institutions](#) and the [Center for the History of Medicine at the Francis A. Countway Library of Medicine](#) in an effort to enable access to manuscript and archival collections containing protected health information (PHI) and other types of access-protected records containing health information about individuals. This work was made possible through the generous funding of [the Council for Library and Information Resources' Cataloging Hidden Special Collections and Archives](#) program (2012: [Private Practices, Public Health: Privacy-Aware Processing to Maximize Access to Health Collections](#)).

The recommendations need not be pursued in sequential order. Repositories are encouraged to pursue some policy recommendations concurrently or to test one of the many descriptive enhancements. It is the hopes of the authors that these recommendations will help alleviate many of the concerns repositories have related to collecting and preserving health services records, especially those that are not affiliated with hospitals or medical schools.

DETERMINING AN INSTITUTION'S STATUS AND POLICY NEEDS

- Repositories should train staff to recognize [individually identifiable health information](#), regardless of whether or not they are entities covered by the Health Insurance Portability and Accountability Act ([HIPAA](#)). Repositories that are HIPAA-covered should provide training to familiarize staff with legal requirements.
- Repositories should survey their holdings to determine the extent to which they include individually identifiable health information that may be protected by federal or state laws.
- Repositories should consult with their administration and legal counsel to determine their status under [HIPAA](#); the [Federal Common Rule for the Protection of Human Subjects](#); and their state's medical records laws.
- Repositories should document their status under such rules and statutes and determine their institution's risk tolerance, as 1) laws such as HIPAA allow institutions to be more restrictive than the law requires, and 2) some donor agreements may require restrictions beyond that which is covered by HIPAA.
- Repositories should create intra-organizational partnerships to align policies, for example, among special collections repositories at the same institution, medical records/health information management departments in hospitals, and/or institutional records management offices.
- Repositories holding records of outside institutions that contain individually identifiable

health information should consult with the depositing institution and with their own legal counsel to determine whether housing the records would make the repository subject to HIPAA business associate agreements.

- Repositories should review the types of requests that they receive for access to individually identifiable health information and develop access review processes relevant to the type of use requested, such as medical genealogy, biography, and research as defined by HIPAA and the Common Rule.

IMPLEMENTING POLICY AND FOSTERING PROCESS TRANSPARENCY

- Repositories, to the extent possible, may want to create an impartial Access Board or Privacy Board or consult with an Institutional Review Board (IRB) to review applications for access to protected health information and medical records in their holdings. An archivist with knowledge of the holdings should be designated to be part of the review process, either as an advisor to or as a member of the review board. If no Access Board is possible, repositories should be prepared to explain why access can be granted to some users and not others.
- Repositories should document their decision-making processes and policies and apply them consistently. Decision trees may be helpful tools to review access decisions (see Johns Hopkins [examples](#)).
- Repositories should publish their access and use policies on their websites and should provide copies of any application forms online; researchers should be reminded that publishers may also have their own privacy requirements as a condition of accepting a manuscript for publication.
- Repositories should clearly articulate the steps a researcher or other user would need to take to apply for access and the application workflow, so that users know how far in advance they will need to make an application before they may be granted access.
- Repositories may wish to provide model applications or a process by which applicants can ask questions or seek guidance on the application process so that they can successfully complete the application.
- Repositories should create a user agreement for patrons to sign that communicates personal liability for the misuse or distribution of health information about individuals.

COMMUNICATING THE NATURE OF RESTRICTIONS

- Repositories should provide non-technical information on their websites about the kinds of access restrictions their users will encounter when considering the use of records, regardless of whether restrictions are imposed by: Federal law (HIPAA, [FERPA](#)); United States government records laws; state law; gift agreement; deposit agreement; or institutional policy.
- Repositories should provide at least one example of each of the restrictions found in their collections using a published or otherwise publicly available finding aid or catalog record to illustrate the restrictions.
- Repositories should explain where users can find information about access restrictions, such as publicly accessible catalog records, online finding aids, or published inventories. Repositories should provide information about the gaps in systems where information is generally provided (such as restrictions only being noted in catalog records for collections that have been processed), as well as overtly state when information about access restrictions is only available through consultation with Public Services staff.

- Repositories should embed information regarding the presence of access restrictions at all levels of hierarchical description. Collection-level access descriptions may alert users to the presence of restrictions, but it is series, subseries, and folder-level notices regarding access status that enable users to understand which restrictions apply to records of interest.
- Repositories should clearly articulate their policies regarding citation. Access Board and IRB applications should clearly indicate if citation is permitted, and if so, repositories should have specific examples for citing records in collections that are not accessible without access approval and, if the collection is unprocessed, whose physical organization may change in the future.
- Repositories may want to allow and encourage users to deposit a code key to medical records and other protected records that cannot be cited by identifiers, such as patient name or medical record number, without authorization. Repositories should clearly state in finding aids when records have been redacted or removed from the collection.

DESCRIBING RECORDS TO BEST ENABLE DISCOVERY AND ACCESS

The following recommendations are intended to illustrate the rich descriptive information that archivists can offer without revealing patient names or other identifiers. When selecting descriptive approaches, processors should balance the needs of their research communities with local processing practices to determine which of the following descriptive enhancements could improve discoverability and use of their collections.

- When describing collections containing health information, communicate the specific record formats in which health information is found. A developing list of different kinds of records containing health information and their scope may be found [here](#). Examples include: admission records; autopsy records; case files; diagnostic indices; doctor-patient correspondence; medical records; patient histories; prescription logs; surgical logbooks; and specimens. If you are not sure of the kind of record you have, try to create a redacted copy of the record (or a page or two from a volume) and consult an archivist or librarian who more routinely encounters these types of records.
- Descriptions should overtly state if a collection is a part of a much larger, original group of records, as well as inform users as to what happened to the rest of the records or where they may be found. (For example, when a collection consists of twenty boxes transferred to the archives as a representative sample from an original 100 boxes of records, indicate that the remaining eighty boxes were destroyed per institutional policy.) Specimens related to a collection that are housed elsewhere should be indicated, regardless of whether or not they can be accessed.
- Processors should identify when records were created for a specific research study or when doctors assembled sets of patient records as source material for specific publications.
- Processors should record types of commonly collected information about patients in the records, such as diagnoses, names, dates of birth/death, and ages at time of treatment. As time or expertise permits, processors should sample the records and incorporate in to the description patient-related information, such as marital status, number of children, race, ethnicity, occupation, and place of residence or employment; and treatment-related information, such as the names of frequently mentioned doctors, surgeons, midwives, mental health professionals, and/or dentists encountered, the names of pharmaceuticals, types of medical treatments and procedures, and instrumentation and devices used. A developing list of variables may be found [here](#).
- Because processing methodologies vary from repository to repository, processing

- information in finding aids should include how record descriptions were created, such as through a percentage of records sampled per container or per alphabetical or numeric run.
- Repositories should enable opportunities for user enhancement of collection descriptions, particularly for unprocessed or infrequently used collections. A survey instrument or quick conversation with a researcher may help contextualize records, add to lists of procedures or treatments employed, or enrich collection-level descriptions of holdings. Users may also provide examples of “the patient’s own words” that can be included anonymously in finding aids to help characterize records. Similarly, health care providers familiar with the creation of specific categories of patient record types can help contextualize records based on their clinical experience of how records are used. Health care providers may also be able to decipher medical shorthand or abbreviation unfamiliar to archivists who don’t have specialized medical training or familiarity with local institutional terms.
 - Repositories should consider digitally imaging redacted versions of records and embedding them in finding aids in order to visually communicate how information is organized in the records. Repositories can also consider embedding blank versions of survey instruments, commonly found forms in medical records, pages from codebooks, and protocols.

APPENDIX G

	Name	Method of Cost Computation	Total	CLIR Funds	Cost Sharing
Salaries & Wages	Linda Klouzal	100% of annual compensation	\$ 60,774.00	\$ 50,000.00	\$ 10,774.00
	Phoebe Evans Letocha	20% of annual compensation	\$ 18,778.00	\$ -	\$ 18,778.00
	Graduate and Undergraduate Student Assistants	avg. \$11.22 per hour, 2,771 hours	\$ 31,568.76	\$ 19,665.00	\$ 11,903.76
Fringe Benefits	Linda Klouzal	35.5% of salary base (3/1/13 - 6/30/13); 34.5% of salary base (7/1/13 - 9/30/14)	\$ 21,073.24	\$ 17,750.00	\$ 3,323.24
	Phoebe Evans Letocha	35.5% of salary base (3/1/13 - 6/30/13); 34.5% of salary base (7/1/13 - 9/30/14)	\$ 6,517.41	\$ -	\$ 6,517.41
	Graduate and Undergraduate Student Assistants*	8% of pay during periods of non-enrollment	\$ 981.05	\$ 524.00	\$ 457.05
Supplies & Materials	Software licenses for Eloquent archival management system		\$ 1,200.00	\$ 1,200.00	\$ -
	Archival rehousing supplies (folders)		\$ 2,236.00	\$ 2,236.00	\$ -
TOTAL			\$ 143,128.46	\$ 91,375.00	\$ 51,753.46

*Students by FY	FY15	FY14	FY13	Total	Budget	Remaining		
CLIR Hours		416.5	1938.19	416.25	2,770.94	1710.00	-1060.94	
CLIR Salaries	\$	6,034.40	\$	21,245.23	\$ 4,289.13	\$ 31,568.76	\$ 19,665.00	\$(11,903.76)
CLIR Cost/hr	\$	14.49	\$	10.96	\$ 10.30	\$ 11.39	\$ 11.50	\$ 11.22