Durham Community Housing Directives
Housing Services Division | Financial Housing Services
605 Rossland Rd E, Whitby L1N 6A3
905-668-7711 | 1-800-372-1102 | www.durham.ca

Subject:	**Records and Information Management (RIM)**
Directive Number:	**OPR 03-07**
Date:	**August 2026**

Purpose

Establish clear and consistent requirements for creating, maintaining, retrieving, storing, retaining, and disposing of records and information maintained by all Region of Durham Community Housing Providers operating under the *Housing Services Act, 2011*, use of the centralized wait list system and/or authorized to administer housing programs or any other agreement. This directive outlines the requirements necessary to ensure the efficient, effective and accountable management of records within each housing portfolio across the Region of Durham.

As the designated Service Manager under the *Housing Services Act, 2011*, the Region of Durham is required to establish policies, directives and procedures to ensure that official housing records are managed in accordance with applicable legislation, regulations and local policy. This includes ensuring that the records are securely maintained throughout their lifecycle, while supporting consistent business practices, regulatory compliance, transparency, and accountability in the administration of community housing programs.

This directive applies to all records created, received or maintained by Community Housing Providers in any medium (paper, electronic, email, etc.).

Definitions

Active Records – Information records created/received in any format that are referred to on a daily, monthly or annual basis to support business processes. Such records are typically housed in a secure location where they can be retrieved and/or referenced easily.

Inactive Record – Refers to those records that have low reference activity, usually less than once per month, but are still preserved until their retention period has been fulfilled. Such records are typically housed in a secure inactive records storage location.

Records Management Program – An organization-wide framework that establishes policies, procedures, systems and responsibilities required to manage records and information throughout their entire lifecycle. It is in place to

ensure that records are accurate, accessible, secure, organized and retained for the periods required by legislation, service agreements and organizational needs. Its purpose is to support operational efficiency, transparency, compliance and the preservation of reliable evidence of decisions, actions and transactions.

A Records Management Program typically includes:

- A records management policy or bylaw
- A records classification system and file plan
- A retention schedule prescribing how long records must be kept
- Procedures for secure storage, access, protection and disposal of records
- Defined roles and responsibilities
- Staff training and awareness requirements
- Monitoring, auditing, and continuous improvement processes.

File Plan – the way in which records are organized into categories, for example: Tenant or Member Files, Financial Records, Governance Records, Maintenance Records, etc.

Retention Schedule – Is a schedule setting out the periods for which the official records are to be retained. Such a schedule will include the timing for the transfer of records from active to inactive status and time periods for destruction.

Retention Period – Is the period of time which records must be kept before they may be disposed of. It is usually stated in months or years and may also be contingent upon the occurrence of an event (e.g. tenancy/membership termination).

Destruction – Is the physical disposal of records by means of burning, pulping, shredding, disintegration, and the electronic disposal of data by mean of deletion.

Legal Hold – A requirement to suspend destruction of records due to ongoing or reasonably anticipated litigation, investigation, audit or access to information request. Records subject to a legal hold must not be destroyed until the hold is formally lifted.

Personal Information – Information about an identifiable individual contained in any record including but not limited to:

- Name, address, contact information

- Date of birth and identification numbers
- Income and financial information
- Household composition
- Information related to RGI eligibility, special priority, or support needs
- Any other information that can identify a tenant or member, applicant, or household member

Privacy Incident – Any accidental or unauthorized event involving personal information that could indicate improper collection, use, disclosure, access or loss and requires assessment to determine whether it is a privacy breach.

Community Housing Provider(s) – within this document, this refers to non-profit Community Housing Providers, co-operative Community Housing Providers, all located within the Region of Durham.

Roles and Responsibilities

Durham Region (Service Manager)

- Issue and update this directive and all related processes and/or tools.
- Monitor Community Housing Provider compliance through audits, such as Operational or RGI reviews and reporting as required.
- Approve any Community Housing Provider requests for deviations from the retention schedule.
- Receive all formal access requests.
- Receive privacy incident reports from Community Housing Providers, provide Community Housing Providers with the Privacy Incident Report to complete and then coordinate follow-up with the Region's Access and Privacy Office, and determine any further reporting or notification requirements.

Community Housing Provider Board/Executive

- Ensure governance oversight is exercised in a manner that protects tenant or member and applicant personal information.
- Provide responsive records in the event of an access request.
- Ensure suspected or confirmed privacy incidents are reported to Housing Services in accordance with this directive.

- Board members must not access, request, or be provided with tenant or member or applicant specific personal information, except where required by law or expressly authorized and anonymized for governance purposes.

- Adopt and enforce a Records Management Program consistent with this directive.

- Appoint a designated staff(s) responsible for implementation and training.

Community Housing Provider - RIM Lead (Property Management or Administrative Staff)

- Maintain the Community Housing Provider's retention schedule and file plans, ensuring secure storage, timely disposition, and documentation of destruction.

- Create and maintain accurate records; comply with retention, security, and confidentiality requirements; and, where a privacy incident is suspected or confirmed, take immediate steps to contain the incident, report the matter to Durham Region Housing Services within 24-72 hours.

- Complete the Privacy Incident Report regarding the incident and return to Durham Region Housing Services.

Community Housing Provider – All Staff

- File documents consistently according to file plan

- Maintain accuracy and completeness of records

- Protect personal information

- Immediately report suspected privacy incidents or records-related concerns to the Community Housing Provider's designated lead or supervisor.

Personal Information Protection

Community Housing Providers must protect information collected, used, stored, shared and disposed of as part of administrating community housing programs.

Personal information includes any recorded details about an identifiable individual, for example, contact information, identification numbers, income and financial details, household composition, and information related to rental subsidy eligibility or special priority needs.

Personal information may only be collected when necessary for delivering housing programs, including

- Determining eligibility
- Administering subsidies
- Managing tenancies/membership
- Assessing priority requests
- Meeting Service Manager reporting requirements

Collection of personal information must be limited to what is required, to administer housing programs and must be supported by appropriate consents where applicable. Personal information must only be used or disclosed for the purpose of which it was collected, unless the individual has provided explicit consent, disclosure is authorized by law, or it is necessary for administering programs under the Housing Services Act, 2011.

Personal information will not be used for secondary purposes without authority and/or consent unless legally permitted (e.g. fraud prevention, law enforcement requests).

Community Housing Providers must protect personal information by having administrative, physical and technical safeguards in place. These include policies, secure electronic systems, locked filing and storage areas, and limiting access to staff who need the information to do their job. These records are to be kept for the required period outlined in the records retention schedule and destroyed in a way that prevents the information from being recovered.

If a privacy incident is suspected or confirmed, the Community Housing Provider must take immediate steps to contain the incident, prevent further unauthorized access, and notify the Service Manager within 24-72 hours. The Community Housing Provider will be provided the Privacy-Incident Report from the Service Manager and will submit it to Housing Services as the first point of contact. Housing Services will then work with the Region’s Access and Privacy Office to review the incident, determine whether it is a privacy breach, and assess whether notification to the Information and Privacy Commissioner of Ontario and affected individuals is required.

Privacy Incident Reporting

Community Housing Providers must report any suspected or confirmed privacy incident involving personal information to Housing Services as soon as possible and no later than 72 hours after becoming aware of it.

If it is determined as a privacy incident Housing Services will provide the Community Housing Provider with the Privacy Incident Report which is to be completed and submitted to Housing Services.

Once the completed report is received, Housing Services staff will liaise with the Region's Access and Privacy Office to obtain any additional information required and assess the incident. This review will determine whether the incident is a privacy breach and, if so, whether it must be reported to the Information and Privacy Commissioner of Ontario and to affected individuals. Community Housing Providers must cooperate fully with any follow-up requests and provide additional records or information needed to support the review.

Requirements

Creation and Classification

Community Housing Providers must create and maintain records that document decisions, transactions, eligibility determinations, rent and rental subsidy calculations, tenancy/member management, complaints and financial controls.

Records must be organized according to the Community Housing Provider's internally approved file plan, which must align with the minimum retention schedule.

Access and Privacy

Maintain safeguards appropriate to sensitivity, ensuring confidentiality, integrity and availability of personal information through the lifecycle of the file.

When a request for access is received by the Service Manager, the Service Manager will request the specific record(s) from the relevant Community Housing Provider to comply with the Municipal Freedom of Information and Protection of Privacy Act. The record(s) must not be destroyed until the request, and any appeals are fully concluded in accordance with the minimum retention schedule.

Storage and Security

Active and Inactive records must be stored in a secure location onsite. Contracts with storage or destruction vendors must stipulate security, confidentiality and proof of destruction requirements.

Retention and Destruction

Community Housing Providers must apply the minimum retention periods in the Minimum Retention Schedule section. If another law or funding agreement requires longer retention, the longer period applies.

At the end of retention, dispose of records securely and maintain a destruction log. The Information and Privacy Commissioner of Ontario has a fact sheet for useful guidance on record destruction.

Monitoring, Compliance and Audit

The Region of Durham's Housing Services may conduct periodic file reviews or audits. Community Housing Providers must supply policies, schedules, destruction logs, and sample files upon request. Non-compliance may lead to remedial action under service agreements. Follow-up audits or corrective action requirements may be issued as necessary.

Transfer of Records and Custody

Community Housing Providers must ensure appropriate controls are in place to maintain custody, integrity, and security of all records when a property management agreement ends or a property management firm changes.

Minimum Retention Schedule

Electronic records are equal in status to paper if authenticity, integrity, and accessibility are ensured for the full retention period. They must follow secure storage, retention schedules and destruction standards.

Tenant/Member Household Files – RGI, RGI-MSP or other rental subsidized units

Tenant/Member files must contain all information to support eligibility and rent decisions. Household file contents include:

- initial application
- eligibility checks
- annual and in-year reviews
- notices of assessments
- rental subsidy decisions and notices
- signed occupancy agreements/lease
- addenda and renewals
- income/asset verification as required
- completed, signed and dated declaration and consent forms for all members of the household who are 16 years of age or older.
- all notices of decisions
- correspondence.

Tenant/Member files/records (active and inactive) are to be retained for the tenancy duration plus 5 years after move-out, termination, or death.

There may be certain tenancies that have been long in length to which a Community Housing Provider may have both an Active and Inactive Record for a tenancy/membership. Community Housing Providers are required to ensure that Inactive Records are accessible when required for audit purposes.

Applicant Files

Applicant files must contain an individual's application for subsidy, transfers, consent form(s) and supporting documents for priority and modified unit requests.

When an applicant becomes housed, the information provided to the Community Housing Provider at the time of offer shall be transferred to the individual's tenant or member file.

For applicants who are refused or denied a unit, the Community Housing Provider must retain all documentation provided by the applicant, along with copies of refusal or denial records, for 7 years. These records are considered part of the applicant file.

Upon request, or as part of a review or appeal, copies of the documentation used to support refusal or denial decisions must be provided to Durham Region Housing Services (or DASH, where applicable).

In-Situ Applicants

When an in-situ applicant is approved, the documentation and verification used to grant in-situ status must be included in the tenant or member file.

When an in-situ applicant is denied, the documentation and verification used in the ineligible determination are considered part of the applicant file and must be stored accordingly. A copy of the in-situ denial letter must also be placed on the market tenant or member file.

Financial and Project Records

Annual financial statements, ledgers, invoices, subsidy and reconciliation records for each fiscal year must be retained by the Community Housing Provider for at least 7 years after the end of the fiscal year to which the record relates.

Governance and Corporate Records

Board minutes, bylaws, policies, and annual reports must be retained in accordance with legislative requirements. The Region of Durham will review the last one to two years of this information when required.

Health and Safety, Incident or Complaint Records

Incident reports, health and safety logs and complaints which are under investigation must be retained for 2 years from the closure of the incident and be extended if there is litigation or claims that could be reasonably anticipated.

Facilities, Capital or Asset Records

Building plans, capital project files, warranties and major maintenance should be retained for the life of the asset plus 2 years to support audits and warranties. Routine maintenance records will be retained for a minimum of 2 years.

Employment Records (Community Housing Provider staff or contracted staff)

Employment or contractor records directly related to tenants or members, complaints, investigations, or housing program delivery must be retained for the duration of the staff member's employment. The Region of Durham will review the last one to two years of this information.

Exceptions and Legal Holds

Records must not be destroyed if they are subject to a legal hold. Community Housing Providers must immediately suspend destruction when notified of litigation, investigation, audit or access to information requests. Destruction may resume only when the legal hold is formally lifted by the Region of Durham Housing Services or the appropriate legal authority.

Resources

- Quick Reference: Durham Region – Minimum Records Retention Schedule
- Privacy Incident Reporting Process Guide
- Privacy Incident Report Form - Housing Provider

Legislative Authority

Housing Services Act, 2011, s. 79 – 81, 169 - 176

Ontario Regulation 367/11, s. 102–103, 145–147