5.2.6 Electronic Mail Use and Retention

<table>
<thead>
<tr>
<th>Chapter 5 - Information Technology</th>
<th>Original Effective Date: June 2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section: 5.2 Infrastructure Solutions</td>
<td>Date Last Reviewed: May 2023</td>
</tr>
<tr>
<td>Responsible Entity: Vice President and Chief Information Officer</td>
<td>Date Last Revised: July 2010</td>
</tr>
</tbody>
</table>

I. Purpose

The purpose of this policy is to establish permissible use and records retention requirements for all UT Health San Antonio email addresses.

II. Scope

This policy applies to all faculty, staff, trainees and students in all business units, departments, centers, and programs who are assigned a UT Health San Antonio (UTHSA) email address (@uthscsa.edu) and conduct IT University activities with that email address.

III. Policy

A. Acceptable Use

Electronic mail (e-mail) is an official and expected communication form to conduct UT Health San Antonio (UTHSA) business. As such, all faculty, staff, and students will be issued an UTHSA e-mail address and account for electronic communication supporting our education, research, and service missions.

E-mail messages created, received, retained, used, or disposed of using any UTHSA electronic mail system are considered official state documents. Users of e-mail are expected to be ethical and responsible in their use. Faculty, staff, and students are expected to make efficient use of computing resources. Wasteful and disruptive activities, such as sending chain letters, broadcast messages, or other unwanted material is a misuse of UTHSA resources. An unwanted message may be perceived by the recipient as abusive, threatening, or harassing, especially if repeated. Such communications may be considered a breach of UTHSA policies and state law.

Information classified as "Confidential/High Risk" data must be encrypted if it is not sent to a mail address of "username@uthscsa.edu". (See the Handbook of Operating...
5.2.6 Electronic Mail Use and Retention

Policies (HOP), Policy 11.1.12, E-mailing Protected Health Information. Instructions for securing e-mail are at Secure Email.

E-mail is provided to facilitate state and UTHSA business; however, brief and occasional e-mail messages of a personal nature (so called "incidental" use) may be sent and received if the following guidelines and restrictions are met:

1. Personal use of e-mail is a privilege, not a right. As such, the privilege may be revoked at any time and for any reason. Abuse of the privilege may result in appropriate disciplinary action.

2. All e-mail can be recorded and stored along with the source and destination.

3. Employees have no right to privacy with regard to e-mail. Management has the right to view employees' e-mail.

4. Email messages are the property of the State of Texas. Management has the right to review employees' messages. Also, e-mail messages are subject to the requirements of the Texas Public Information Act and the laws applicable to state records retention (see Records Retention below).

5. Employees should be aware that when sending an e-mail message of a personal nature, there is always the danger of the employees' words being interpreted as official UTHSA policy or opinion. Employees are responsible for clearly expressing in their personal correspondence that their statements and opinions do not represent official UTHSA policy.

6. Personal e-mail should not impede the conduct of UTHSA business.

7. Racist, sexist, threatening, or otherwise objectionable language is strictly prohibited.

8. E-mail should not be used to conduct a "private" business for personal monetary interests or gain.

9. Employees should limit subscription to mailing lists for personal use consistent with "incidental" use.

10. Personal e-mail should not cause the state to incur a direct cost in addition to the general overhead of e-mail.

11. This policy applies to e-mail used with UTHSA and e-mail used conjointly with the Internet, and does not supersede any state or federal laws, or any other UTHSA policies regarding confidentiality, information dissemination, or standards of conduct.

B. Record Retention

As official documents, e-mail must be maintained in accordance with state mandated record retention requirements. However, electronic mail messages are not considered
5.2.6 Electronic Mail Use and Retention

one record type for retention purposes. The content and function of the e-mail message determines the retention period for that message.

Central e-mail servers are backed-up each night and back-up tapes are maintained for two weeks. These procedures are in place for emergency restoration of e-mail services and do not meet record retention standards.

It is the user's responsibility, with guidance and training from the Records Management Officer, to manage e-mail messages according to Records Retention Schedule.

As a general rule, it is the responsibility of the sender of e-mail messages with UTHSA's e-mail system and recipients of the messages received from outside UTHSA to retain the messages for the approved retention period.

E-mail generally, but not always, falls within the following common record series categories (each with a distinct retention requirement):

1. Transitory Information, 1.1.057 - Records of temporary usefulness that are not an integral part of a records series of an agency, that are not regularly filed within an agency's record keeping system, and that are required only for a limited period of time for the completion of an action by an official or employee of UTHSA, or in preparation of an on-going records series. Retention: AC (after purpose of record has been fulfilled).

2. Administrative Correspondence, 1.1.007 - Subject to archival review. Retention: 3 years.

3. General Correspondence, 1.1.008 - Retention: 1 year.

For assistance on e-mail classification for record retention purposes, consult the "Records Retention Schedule" and view "Records Retention Guidance for Email".

For more information on record retention issues related to e-mail, including approved retention method, consult the HOP, Policy 2.2.1, Records Management.

IV. Definitions

There are no defined terms used in this Policy.

V. Related References

There are no related documents associated with this Policy.

VI. Review and Approval History

A. The approving authority of this policy is the University Executive Committee.
B. The review frequency cycle is set for three years following the last review date, a time period that is not mandated by regulatory, accreditation, or other authority.

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Action Taken</th>
<th>Approved By</th>
<th>Date Approved</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/2000</td>
<td>Policy Origination</td>
<td></td>
<td></td>
</tr>
<tr>
<td>07/2010</td>
<td>Policy Revision</td>
<td></td>
<td></td>
</tr>
<tr>
<td>07/2019</td>
<td>Policy Review</td>
<td></td>
<td></td>
</tr>
<tr>
<td>05/2023</td>
<td>Policy Review</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>