SCOTTISH HOSPITAL SERVICE

DESTRUCTION OF HOSPITAL RECORDS

1. The Schedule accompanying this memorandum authorises the destruction of various types of hospital records after certain specified periods.

2. All hospital records are subject to the provisions of the Public Records (Scotland) Act, 1937, and may be destroyed only in accordance with that Act. The phrase "hospital records" should be taken in its widest sense as applying to all types of documents accumulated by hospital authorities, ranging from records of historic interest to printed acknowledgments. A Schedule has been prepared in terms of Regulations dated 10th December, 1940 (S.I. 1940/2107) made under section 12 of the 1937 Act, authorising the destruction of various types of records after specified periods. A copy of the Schedule is enclosed and further copies may be obtained on request from the Department of Health for Scotland, St. Andrew's House, Edinburgh, 1.

3. The Schedule is in two parts; (i) Notes which, among other things, set out those records which may not be destroyed at all, and (ii) a List and Particulars of those records which may be destroyed after specified periods of time have elapsed. In any case where a hospital wishes to destroy a document but there is doubt whether the Schedule gives authority for this to be done, the Department and the Scottish Record Office, Register House, Edinburgh, should be consulted.

4. It should be noted that the List and Particulars merely sets out the minimum period at the expiry of which hospital authorities may destroy certain classes of records, but it places no obligation upon them to do so, then or later. An important purpose of the List is to ensure as far as possible that no documents of public value are destroyed; it is still for the hospital authorities to decide, once the minimum retention period is over, whether other considerations would justify the continued retention of documents. For example, the period of retention of important medical records (Item 24(a) in the List and Particulars) should be determined, subject always to the minimum laid down, in the light of medical considerations with particular reference to clinical and research requirements; the general tendency should be to keep them as long as it is practicable to do so.

5. It should be noted that accounting records (e.g., Items 3 and 4 in the List and Particulars) include those relating to transactions with patients' monies and valuables but not those relating to transactions with endowment monies. It is for Boards of Management themselves to decide about the life of documents relating to endowments.

6. One of the main objects of the Schedule is to ensure the preservation of any documents which are, or may in future become, of historical interest, and hospitals should look very carefully at any old documents in this light before disposing of them, even though they may fall under one of the headings in the List and Particulars. The Public Records (Scotland) Act, 1937, prohibits in any case the disposal of any documents of earlier date than 1800. Any more recent document contained in the List and Particulars should be preserved if there is reason for supposing that it may be of historical interest now or in the future. The Scottish Record Office will be glad to advise in individual cases. Attention is drawn to paragraph 7 of the Notes to the Schedule.

7. With regard to the micro-filming of hospital records in general, the position is that, as indicated in the Notes to the Schedule, any document of which the Schedule authorises the eventual destruction may be micro-filmed after three years, the original then being destroyed and the micro-film retained for at least the remainder of the statutory period. Documents referred to in paragraph 4 of the Notes to the Schedule must be preserved in the original. The same is true of any document which, though belonging to one of the classes in the List and Particulars, is intended for permanent preservation because it contains matter of historical interest.

8. Hospital authorities should approach the local Head Postmaster informing him of (a) confidential and/or (b) non-confidential waste for destruction and giving details of each. The Head Postmaster will arrange for his contractor to supply the sacks and "confidential waste" labels when appropriate. When the sacks have been filled the hospital should advise the Head Postmaster who will arrange for collection by the contractor. The contractor is required to furnish to the Head Postmaster a certificate that "confidential waste" has been disposed of in accordance with the prescribed rules.

9. If the Head Postmaster for some reason is unable to arrange for the disposal of valueless records held by hospitals they should inform the Department who will consult Her Majesty's Stationery Office.

Department of Health for Scotland,
Edinburgh, 1. 30th July, 1958.

Hos/9/7

PUBLIC RECORDS OF SCOTLAND

DEPARTMENT OF HEALTH FOR SCOTLAND

NATIONAL HEALTH SERVICE, SCOTLAND

EIGHTH SCHEDULE

Containing

A LIST AND PARTICULARS

of certain classes of documents, existing or accruing in Hospitals and Offices of Hospital Authorities, which are not considered of sufficient public value to justify their preservation by the Keeper of the Records of Scotland.

Prepared as required by Regulations dated 10th December, 1940, by the Lord Justice General and Lord President and the Secretary of State under Section 12 of the Public Records (Scotland) Act, 1937.

DE 7233/1

NOTES

1. By the National Health Service (Scotland) Act, 1947, the Secretary of State for Scotland became responsible for the records of hospitals and hospital authorities so far as the records relate to interests transferred to the Secretary of State by the Act or to matters for which he is responsible under the Act.

2. Where the descriptions of classes of documents included in the Schedule refer to Form numbers or to Acts and Statutory Instruments, the references are those current at the time the Schedule is made; they do not preclude the application of the Schedule to documents used for the same purpose but bearing a different, or no, reference number, or accruing under Acts or Statutory Instruments which supersede without substantially amending the ones named.

3. Any of the documents mentioned in the "List and Particulars" which are required to be kept for a period of more than three years may be micro-filmed at the end of three years and then destroyed, provided that the micro-films are kept for the remainder of the retention period laid down.

4. THE FOLLOWING CLASSES OF DOCUMENTS ARE EXCLUDED FROM THE SCHEDULE AND WILL BE PRESERVED IN THE ORIGINAL:-

(a) Minute books (including minute books of Management Boards of former voluntary hospitals and their subcommittees).

(b) Title Deeds, correspondence and other documents of permanent importance relating to the transfer of hospital property to the Secretary of State; to the apportionment and vesting in the Secretary of State of interests in premises used partly for hospital and partly for other purposes; to the purchase, disposal and leasing of property; to the grant of leases, casements, licences and other rights over hospital property or to the Secretary of State; and to the transfer and discharge of mortgages.

(c) Correspondence and other documents relating to town and country planning matters.

(d) Annual reports of hospital authorities, including annual reports of Boards of Management of former voluntary hospitals.

(e) (i) Contract documents, drawings, bills of quantities and other documents (i.e., excluding those referred to in Item 20 of the List and Particulars) relating to building and engineering works.

(ii) Site plans, surveys, record drawings, etc., having a permanent value.

(iii) Record documents relating to building and engineering projects which have been abandoned or deferred.

(f) Records relating to births and deaths.

(g) Registers of admissions and discharges.

(h) Registers of staff employed, if in book form.

(i) In mental hospitals and mental deficiency institutions, the following documents, most of which are prescribed in the Lunacy (Scotland) Acts, 1857 to 1913, the Mental Deficiency (Scotland) Acts, 1913 and 1940, and the Mental Deficiency (Scotland) Acts (General Board's) Regulations 1914 to 1940:-

Alphabetical register
Admission documents
Patients' Books (for Reports by visiting Commissioners, etc.)
General registers
Medical records or patients' records (Case Books); other than as listed in Item 27 of the List and Particulars.

(j) Accounts and statements prepared in pursuance of regulations 15 and 16 of the National Health Service (Hospital Accounts and Financial Provisions) (Scotland) Regulations, 1948 (S.I. 1948/2038).

(k) Master inventory registers recording items of furniture, furnishings and equipment not held on store charge.

(l) All documents of earlier date than 1800.

5. Former E.M.S. medical records for the classes of patients set out in the Appendix to this Note are of interest to the Ministry of Pensions and National Insurance, and if any come to light the Department should be informed. Medical records relating to similar classes of patients held by former Ministry of Pensions hospitals should in no circumstances be destroyed.

6. Records relating to a Government Department or belonging to a local authority should not be destroyed without the consent of that Department or authority.

7. All classes of documents to be destroyed in accordance with this Schedule will first be examined by a competent officer, who will withdraw for preservation any documents containing matter likely to be of value as a precedent, or for treatment of a patient during his lifetime, or of historical, medical or legal interest, or useful for social and economic research. For this purpose a competent officer would generally be considered to be one who is fully familiar with the type of work to which the documents relate; in the case of medical records it should be a doctor.

APPENDIX

The classes of patient referred to in paragraph 5 of the Note are as follows:-

(a) Civilian casualty, i.e.

(i) a civilian who has sustained a war injury (broadly speaking, a physical injury caused by enemy action, or by action against the enemy, or by crashes of British, allied or enemy aircraft); or

(ii) a Civil Defence member who has sustained a war service injury (broadly speaking, a war injury or other physical injury sustained in the performance of duty as a member of a Civil Defence organisation). ("Physical injury" in (i) and (ii) above includes tuberculosis and any other organic disease, and the aggravation thereof.)

(b) Mercantile Marine casualty or sick, i.e., a seafaring person (of any nationality from a British ship or of British nationality from a foreign ship) suffering from any injury or sickness arising out of service at sea or from a war injury ashore (see (a)(i) above).

(c) Allied Merchant seamen (other than from British ships).

(d) Police casualty or sick.

(e) Service casualty or sick.

(f) Allied and Overseas Forces.

(g) Canadian Fire Fighters.

(h) Canadian Forestry Corps personnel.

(i) Australian Forestry Corps personnel.

(j) New Zealand Forestry Corps personnel.

(k) Enemy prisoners of war or detained enemy merchant seamen.

LIST AND PARTICULARS

of Classes of Documents which may be destroyed as specified below

Number and class of documents	Period after which, or date on which documents may be destroyed
1. Estimates (including supporting calculations and statistics).	Three years after the end of the financial year to which they relate.
2. Audit reports and associated documents.	Five years after the end of the financial year to which they relate.
3. Principal ledger records (other than those referred to in paragraph 4(j) of the prefatory Note) including such documents as cash books, ledgers, income and expenditure journals, etc.	Ten years after the end of the financial year to which they relate, provided that, in the case of records relating to the period before 5th July, 1948, a separate summary of the hospital's accounts is retained in the hospital's annual reports or elsewhere.
4. Departmental cost accounts.	Five years after the end of the financial year to which they relate.
5. Minor accounting records:-	Six years after the end of the financial year to which they relate (in the case of debtors' records, six years after the end of the financial year in which the accounts are paid or written off).
(a) Vouchers and associated documents - invoices, receipted statements, discharged cheques, cheque counterfoils, pay-in slips, duplicate bills and receipt books, income vouchers, petty cash vouchers, etc.	
(b) Other minor accounting records - pass books and bank statements, petty cash books, subsidiary records of income and debtors, etc.	
6. Salaries and wages records - employees' individual pay records and personal history records.	Eleven years after the end of the last financial year to which they relate.
7. Pay sheets and records of unpaid salaries and wages.	Six years after the end of the financial year to which they relate.
8. Major establishment records (other than those referred to in paragraph 4(h) of the prefatory Note): including personal files, letters of appointment, contracts, references and related correspondence and records of sick leave.	Six years after the officer leaves the service of the hospital or on the date on which the officer would reach the age of 70, whichever is the later; provided that if an adequate summary of the personal and health record is kept for this period the main records may be destroyed six years after the officer leaves the service of the hospital.
9. Minor establishment records: including attendance books, annual leave records, time sheets, duty rosters, and other documents of ephemeral importance.	Two years after the end of the year to which they relate.

Number and class of documents	Period after which, or date on which documents may be destroyed
10. Superannuation records:	
(a) Original forms S.B.7.	Two years after the end of the financial year in which the officer leaves the service of the employing authority.
(b) Duplicate forms S.B.203 and 204.	Three years after the septennium to which they relate.
11. Documents relating to unsuccessful applications for posts.	One year after the vacancy is filled.
12. Inventories, not in current use (other than those referred to in paragraph 4(k) of the prefatory Note) of furniture, furnishings and equipment not held on store charge.	Two years after the end of the financial year in which the inventory ceased to be in use.
13. Major stores records - stores ledgers and equivalents.	Six years after the end of the financial year to which they relate.
14. Minor stores records - requisitions, issue vouchers, transfer vouchers, goods received notes, etc.	Three years after the end of the financial year to which they relate.
15. Minor supplies records: including invitations to tender and unaccepted tenders, routine papers relating to catering and demands for furniture, equipment, stationery and other supplies.	Three years after the end of the financial year to which they relate.
16. Agreements and simple contracts (and documents subsidiary to these) which are only of temporary or minor importance, i.e., short-term agreements, and minor contracts; papers preliminary or subsidiary to contracts; documents relating to contracts for the supply of goods.	Six years after the end of the financial year in which the agreement or contract expires.
17. Documents relating to contractual arrangements with hospitals, etc., outside the National Health Service:	
(a) Documents relating to the contractual arrangements.	Six years from the termination of the arrangement.
(b) Documents relating to periodical financial settlements made under the contract.	Six years after the end of the financial year to which they relate.
18. Undertakings signed by patients admitted to beds designated under section 4 or section 5 of the National Health Service (Scotland) Act, 1947.	Six years.

Number and class of documents	Period after which, or date on which documents may be destroyed
19. Any documents relating to legal actions or to complaints including accident record sheets.	Six years after the end of the financial year in which the incident occurred; or, where an action has been commenced, when a final judgment has been given.
20. Records (other than those included in paragraph 4(e) of the prefatory Note) relating to capital and other building works or improvements; including plans and specifications prepared for temporary purposes and papers relating to them.	Two years after they have ceased to be effective.
21. Engineers' inspection reports on boilers, lifts, etc.	When the plant to which they relate goes finally out of use.
22. Statistical and other returns which were required for ephemeral purposes only and have ceased to be effective.	One year after the end of the period to which they relate.
23. Annual statistical returns required by the Department of Health for Scotland.	Six years after the end of the period to which they relate.
24. Medical records and allied documents in hospitals other than mental hospitals and mental deficiency institutions:	
(a) Medical records including: clinical notes (which include reports from pathological, radiological and other special departments, X-rays, electro-cardiographic and electro-encephalographic records); blood transfusion records; records of all types of special departments (including almoners' records); consent forms of all types; operation books; casualty notes; Appliance Order Forms Nos. 1, 2 and 3; day and night nursing report books.	Six years after the conclusion of the patient's treatment at the hospital, provided that where the patient dies in hospital the records may be destroyed three years after death. Destruction of any clinical notes is subject to the overriding provisions of paragraph 7 of the prefatory Note.
(b) Ancillary records, including prescriptions, departmental registers, appointment sheets, attendance registers, etc.	Three years after the conclusion of the patient's treatment at the hospital.
(c) Four-hourly temperature charts, fluid intake or output charts or other similar ephemeral records; provided that they reveal no abnormal conditions and that no notes are written on them.	Upon discharge of the patient provided the patient is discharged without incident.

Number and class of documents	Period after which, or date on which documents may be destroyed
25. Records relating to dangerous drugs and poisons:	
(a) Registers, record books, prescriptions and other documents kept, issued or made under the Dangerous Drugs Regulations, 1953:	
(i) Registers, books or records.	Three years from date of last entry.
(ii) Other documents.	Three years from date on which issued or made.
(b) Non-statutory records relating to dangerous drugs.	" " " " "
(c) Records of medicines included in the First Schedule to the Poisons Rules, 1952, and supplied to out-patients.	Three years from the date of the last entry relating to the supply of such a medicine.
26. Mass miniature radiography records:	
(a) Normal large films and their cards.	Five years after the date on which the film was taken.
(b) Abnormal large films and their cards.	Ten years after the date on which the film was taken.
('Large films' are taken in special cases where the original radiograph, which is on microfilm, is unsatisfactory in quality or an abnormal condition in the subject is suspected. The microfilms themselves will be kept for research purposes for the present.)	
27. In mental hospitals and mental deficiency institutions the following documents -	
Register of Accidents.	Six years after last entry.
Register of Escapes.	" " " " "
Register of Absences on Probation or Licence.	" " " " "
Register of Physical Condition on Admission.	" " " " "
Register of Visitors.	" " " " "
Register of Restraint and Seclusion.	Five years after last entry.
Day and night nursing report books.	Ten years after last entry.
Daily Register (and Supplementary Record).	Two years after last entry.

Number and class of documents	Period after which, or date on which documents may be destroyed
Dispensary book or medicine card or sheet.	Two years after last entry.
Caution cards.	Two years after patient's discharge, removal or death.
Post-mortem records.	Six years after patient's death.
28. Correspondence and other papers of minor or ephemeral importance, not covered by the foregoing classes: including - advertising matter; covering letters; reminders and letters making appointments; anonymous or unintelligible letters; drafts; duplicates of documents known to be preserved elsewhere (unless they have important minutes on them); indexes and registers compiled for temporary purposes; routine reports; punched cards; and other documents which have ceased to be of value on settlement of the matter involved.	Forthwith.

Signed on behalf of the
Department of Health for Scotland

J.Y. SUTHERLAND

Assistant Secretary and
Establishment Officer.

21st March, 1958.

Certified by

JAMES FERGUSON

Keeper of the Records
of Scotland.

24th March, 1958.

Approved

JOHN S. MACLAY

Secretary of State

19th June, 1958.