

Collection Policy

Repository name: Lothian Health Services Archive (GB239)

Address: University of Edinburgh Main Library, 30 George Square, Edinburgh, EH8 9LJ

Purpose

This document outlines the purpose and activities of Lothian Health Services Archive (LHSA) and the processes followed when accepting new material into the Archive.

Collection Policy

1. LHSA mission statement and collecting remit

LHSA is NHS Lothian's (NHSL) archive, managed by the University of Edinburgh (UE). LHSA collects important records created by NHSL and its predecessor bodies and hospitals (LHB collections), in addition to material donated by individuals and health-related organisations about health and healthcare in the Lothians (GD collections).

LHSA keeps only a small, but significant, selection of records – those designated as worthy of permanent preservation (for research significance, legal need, and to ensure transparency and accountability). These records are evidence of important activities in healthcare and in the lives of medical staff and patients. This material usually makes up around two to five percent of all records produced.

2. Authority to collect

LHSA is owned and core funded by NHSL; it is project funded by a variety of institutions, including the Wellcome Trust. LHSA was formed under agreement between the Lothian Health Board and the University of Edinburgh in 1980, supported by the Scottish Records Office (now the National Records of Scotland). LHSA is the designated archive for NHSL under compulsory Element 7 of NHSL's model records management plan in compliance with the Public Records (Scotland) Act 2011 (PRSA). PRSA requires Scottish public authorities to have proper arrangements in place for the management of the records they produce. LHSA achieved Archive Service Accreditation in 2014, the UK standard for best practice in archive services, which requires regular review.

LHSA's activity is governed by the following legislation and Scottish Government guidance:

[Freedom of Information \(Scotland\) Act 2002](#)

[General Data Protection Regulation 2016](#)

[UK Data Protection Act 2018](#)

[Scottish Government Records Management: Health and Social Care Code of Practice \(Scotland\)](#)

3. Scope of LHSA holdings

a) Physical formats

LHSA collects records across material forms, including paper (loose paper and bound), electronic (born-digital records), and a range of audio-visual carriers (such as cinefilm, x-ray film, and audio cassette). The physical material on which the information is recorded is less important than the nature of the information / evidence itself. Whilst LHSA collects records across physical formats, we

may prioritise some records on our ability to both access information on them both now and in the future. For this reason, we may ask for material to be donated to us in certain formats (in the case of born-digital records, for example).

LHSA does not collect objects, allowing for some rare exceptions. LHSA staff can advise on appropriate heritage organisations to which historical objects may be offered.

b) Content

LHSA collects evidence of important decisions and activities related to local hospitals and healthcare across material formats. Although all records inside this remit are considered for permanent preservation, those relating to collection strengths (for example, local history of HIV/AIDS, and local psychiatric care) or those that fill notable collection gaps (such as community-led health activism) may be prioritised.

c) Time period

LHSA collects records worthy of permanent preservation, regardless of the time they were created. However, due to their relative scarcity outside LHSA, all surviving records created by NHS predeceessor bodies in or before 1948 are accepted.

d) Geographical scope

LHSA's holdings relate to hospitals and healthcare in Edinburgh and the Lothians. We can advise on appropriate collecting repositories relevant to health-related records about other areas of Scotland and / or UK. In certain key collection areas (such as the local history of HIV/AIDS), material outside the immediate local area is considered at the discretion of the LHSA Archivist, when its relevance to activity in Edinburgh and the Lothians can be clearly defined.

e) Exclusions

LHSA does not collect: objects (except for those of particular relevance to hospitals/medicine in the Lothians), material collected/created outside Edinburgh and the Lothians, published books or journals, or general practice records.

4. Collecting processes

a) Accessions

LHSA receives material into the Archive (accessions) in two ways:

i) NHS: LHSA works with NHS to identify and facilitate the transfer of significant records for permanent preservation. This material is transferred in line with the Public Records (Scotland) Act 2011 and the latest version of the [Scottish Government Records Management: Health and Social Care Code of Practice \(Scotland\)](#). Ownership of this material remains with NHS.

ii) Non-NHS organisations and individuals: LHSA advises and liaises with organisations and individuals outside NHS to identify and secure potential archive material on a gift basis. LHSA does not accept collections on deposit. Ownership of this material is transferred to NHS. Where copyright rests with donors, we ask that this is transferred to LHSA.

Purchase of potential archive material falls outside LHSA's remit.

Appropriate documentation is completed for all accessions to LHSA. Methods of physical / electronic transfer to LHSA are discussed with donors on a case-by-case basis.

b) Appraisal

Before or following accession, donations are assessed on their suitability for permanent preservation. This appraisal is a necessary part of the archival process, ensuring that physical and digital storage space is used effectively, and improving the management, access, and discovery of archival records.

Where material transferred from NHSL, any records not worthy of permanent preservation will be destroyed in line with the [Scottish Government Records Management: Health and Social Care Code of Practice \(Scotland\)](#). Donors outside NHSL can specify their own wishes about material not retained by LHSa (covering destruction, return to donor or offer to another repository). Records designated for destruction are handled according to NHSL secure destruction protocols and governed by rigorous procedures outlined in the LHSa Deaccession and Disposal Policy.

Numerous records of the same type (such as case notes) may also be sampled before or on accession to the Archive, either by donors or LHSa staff. This decision is a contextual one, and is at the discretion of the LHSa Archivist.

LHSa recognises that appraisal and sampling, though essential to archival management, are subjective and non-neutral processes. Where appraisal decisions have been made prior to or following donation, these decisions are recorded and transparent.

5. Public access to LHSa records

In accordance with the [Freedom of Information \(Scotland\) Act 2002](#), LHSa records are open to public access unless they fall under an exemption. The most common exemptions covering LHSa material relate to personal and sensitive data about living individuals, and to the health records of the deceased. If records fall under an exemption, no general public access will be permitted. LHSa have developed robust processes with NHSL to permit legitimate researchers access to patient-identifiable information under strict conditions.

Finding aids to collections in the form of lists or catalogues are made public when complete. Brief descriptions of significant new accessions are submitted to the UK National Archives every year and are published on the LHSa website.

6. Further resources

This document works alongside:

- LHSa Collections Development Policy
- LHSa Collections Management Policy
- LHSa Collections Information Policy
- LHSa Preservation and Conservation Policy
- LHSa Deaccession and Disposal Policy

7. Key dates

Date of initial policy: December 2020

Date of last review: August 2021

Date for review: August 2022

Appendix 1

LHSA Accession Procedure

Useful terminology

Depositor: used for the person giving the record(s) to LHSA regardless of the classification of the accession.

Accrual: related material being added to a collection already accessioned, such as regular issues of hospital magazines. An accession form and Deed of Gift need only be signed for the first instance.

Transfers: records from NHS Lothian are classed as transfers. Ownership remains with NHS Lothian.

Gifts: donations from all other organisations or individuals are classed as gifts. Ownership and copyright (where it rests with the donor) is transferred to LHSA.

Deposits: deposits are avoided wherever possible due to the associated long-term collection management issues. In certain circumstances, e.g. where the historic value of the record(s) is high and might otherwise not be maintained within a research archive environment, LHSA will consider accessioning records under a deposit agreement. A charge may be attached.

Completion of Accessions Database

The accessions database is found at: LHSA>Accessions>Accessions Database; it is divided into three sections which should all be completed.

Admin Info: this section contains administrative information about the record(s) being accessioned, please add:

- A sequential accession number (in the first two columns) N.B. the format of the accession number should be the year of the accession (two digits) followed by the number of the accession (three digits) YY/NNN, e.g. 11/004; 12/021 (i.e. same format as used in the Locations Database)
- Date of accession
- Accruals expected? (e.g. for Pelican Journal, NHS publications)
- Title: a brief note of the record(s), e.g. Rosslynlee patient registers
- Description: the physical extent, e.g. 10 volumes, and note approximate linear metreage
- Indicate whether the accession is a transfer, gift or deposit (see section 2)
- Name of depositor
- Date range of accession
- Location where it is to be housed
- Any relevant extra notes

Archival Info: this section details information on the provenance of the record(s), please add:

- Accession number (in the first two columns)
- Provenance: who created the record(s) and where they have been kept since
- Archival history: relevance/context of creator to history of medicine e.g. why we are taking it
- Existing finding aid: from depositor or whether there is a catalogue for the collection the records will be put into

- DPA and FOISA conditions: whether there are any confidentiality restrictions, including whether they fall under the Scottish Government Records Management: Health and Social Care Code of Practice (Scotland)
- Access conditions: whether there are any further restrictions, e.g. because of condition or sensitive nature of the material
- Copyright: whether held by another individual or organisation
- Notes: any other relevant information.

Depositor Info: this section provides information about the depositor, please add:

- Accession number (in the first two columns)
- Name of depositor/person in depositing organisation
- Address of depositor/person in depositing organisation
- Phone number of depositor/person in depositing organisation
- Email address of depositor/person in depositing organisation
- Relationship to creator: whether they are the creator or collector, the chain by which they are now the depositor, or their job title within relevant organisation.

Accession paperwork

An accession form must be completed for all accessions and signed by the depositor (the form is held at J:\LHSA\LHSA\ACCESSIONS\Forms\Forms). The accession form contains the same information sections as the accessions database.

A printed copy of the form is kept in the relevant year's accessions folder, along with any relevant information provided by the depositor.

A new electronic folder is created within the relevant accessions year (e.g. LHSA>Accessions>Accessions2010) named with the accession number and a brief description e.g. Acc 10-001 Astley Ainslie Prosthetics Dept. An electronic version of the accessions form is saved to this folder.

Gifts only: a Deed of Gift form is completed and signed by the depositor (the form is held at J:\LHSA\LHSA\ACCESSIONS\Forms\Forms). Forms specific to oral history accessions (including consent forms) and accessions of high quality digital surrogates are also at this filepath. The depositor should indicate whether items not worthy of permanent preservation should be disposed of or returned. A printed copy of the Deed of Gift is added to the accessions folder and an electronic copy held within the relevant accession folder.

Deposits only: the Deposit Agreement form is completed and signed by the depositor (the form is held at J:\LHSA\LHSA\ACCESSIONS\Forms\Forms). A printed copy of the Deposit Agreement is added to the accessions folder and an electronic copy held within the relevant accession folder.

Accession correspondence

Paper correspondence concerning the accession should be added to the accessions folder.

Electronic correspondence is kept in the electronic accessions folder.

A new email folder is created within the LHSA email account (e.g. Accessions 2010> Acc 10-024) to store all emails concerned with the accession. One month after the accession has arrived, these emails should be transferred to the electronic accessions folder so that all relevant correspondence and information relating to the accession is in one place. Any subsequent email correspondence should be saved directly to the electronic accessions folder.

Retention of accession records

The main physical and digital administration records that LHSA generate are retained indefinitely in order to provide an effective audit trail of transfers and donations. Since personal data is recorded in accession records, donors' consent to the retention of their personal data is a condition of accession, as explained in LHSA's [Privacy Notice](#).

Method of transfer of accession to LHSA

Wherever possible, the material should be delivered to LHSA by the depositor, or by NHS van/courier in the case of the transfer of large volumes of material from NHS Lothian.

For non-patient records, small, paper-based items in good condition can be posted to LHSA using recorded delivery where absolutely necessary. Avoid if possible due to high risk of loss.

In circumstances where it is not possible for the depositor to deliver or post the accession to LHSA, a collection can be made by taxi.

Condition assessment

All newly-accessioned material is quarantined until inspection by the LHSA Manager or, where the LHSA Manager is unavailable, a CRC conservator in collaboration with a member of LHSA staff; nothing should be transferred to a store until the inspection has taken place.

For large accessions, the LHSA Manager will assess the collection prior to transfer to LHSA, wherever possible.

The material is re-housed following inspection following the guidelines in the LHSA Preservation and Conservation Policy. This may be temporary or long-term housing depending on subsequent cataloguing requirements. The housing is labelled with the accession number until a permanent collection reference number is assigned during cataloguing. All marking/labelling of objects and enclosures should be in line with the 'Conservation Guidelines' document (J:\LHSA\LHSA\Business\LHSA Operational Manual\Staff induction\Conservation induction).

Location

After a condition assessment, a store location should be allocated for the material and the location details added to:

- the *Admin Info* section of the Accessions Database
- the LHSA Locations Database

- the physical Accession Form.

The LHSA Archivist should be notified of any changes to location resulting from repackaging or cataloguing.

Online accession information

The Accessions awaiting cataloguing pages on the LHSA website should be updated on a regular basis. Each year, the LHSA Archivist will complete the Accessions to Repositories survey collated by The National Archives.

Cataloguing

Once the accession has been transferred to the store, details are passed to the LHSA Archivist who will place it on the cataloguing priority spreadsheet (J:\LHSA\LHSA\FINDING AIDS\Cataloguing\Cataloguing Priorities). Once an accession has been catalogued, the Archivist completes the 'Classmark added' and 'Date Classmark added' sections of the Accessions Database. The cataloguing priority spreadsheet should be updated on a monthly basis with all accessions received in the previous month.

After completion of cataloguing, the cataloguer adds any records exempt from disclosure under the Freedom of Information (Scotland) Act 2002 to LHSA's FOI database (LHSA>Access>FOI>LHSA Freedom of Information Database).