

WELSH HEALTH CIRCULAR



Cynulliad Cenedlaethol Cymru
The National Assembly for Wales

Parc Cathays
Caerdydd CF10 3NQ

Cathays Park
Cardiff CF10 3NQ

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For Action by:

Health Authorities - Chief Executives
NHS Trust - Chief Executives

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For Information to: See Attached List

Sender: Mr John Morgan, Director, Health Information Management & Technology Division, NHS Directorate, National Assembly for Wales, Cathays Park, Cardiff, CF10 3NQ

National Assembly contact(s) : Nia Watkins, Programme Co-ordinator: Data Quality and Health Records Management, Health Information & Technology Division 2, NHS Directorate, Cathays Park, CF10 3NQ, 029 2082 3640 - email: [nia.watkins@GRO-C](mailto:nia.watkins@gro-c)

Enclosure(s): Appendix A – C

A Welsh Language version of this circular will follow as soon as it is available

Tel: 029 20825111 GTN: 1208 3640
Llinell union/Direct line: 029 2082 3640
Ffacs/Fax: 029 2082 5146
Minicom: 029 2082 3280
<http://cymruweb.wales.nhs.uk>

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Dear Colleague,

Summary

1. The primary function of this Circular is to improve the management of NHS healthcare records in NHS Trusts and Health Authorities. The Circular:-
 - sets out the legal obligations for all NHS bodies to keep proper records;
 - explains the actions needed from Chief Executives and other managers to fulfil these obligations, which include;
 - NHS organisations to draw up a records management strategy.
 - Such strategies should be drawn up and agreed by April 2002.
 - Each NHS organisation should identify a specific senior manager responsible for co-ordinating, publicising and monitoring implementation of the records management strategy and details of the named manager should be sent to the National Assembly for Wales.
 - NHS Trusts and Health Authorities should develop action plans for effective records management services for all staff groups, record types and media.
 - Records management services and controls should be included in NHS Trust and Health Authority IM&T strategies
 - Organisations should be working towards ensuring that these principles and standards within this circular are applied in all areas of record keeping
 - provides guidelines on good practice;
 - explains the requirements to select records for permanent preservation;
 - lists suggested *minimum* periods for retention of NHS records, and indicates where further information may be found.
2. This circular replaces circulars WHC(89)60 'HSM: Preservation, retention, & destruction of records: Responsibilities of DHA's under the public records acts', WHC(94)23 'Retention of maternity records - Revision of WHC (89)60' and WHC(94)59 'Preservation, retention and destruction of health records', which are cancelled.

What Records are Covered in this Circular

3. NHS Records are public records, as defined in the First Schedule of the Public Records Act 1958 (Appendix A, para. 1.4 of this circular includes an illustrative list of types of records covered). This circular does not cover GP health records, guidance for which is set out in WHC(99)7 'Preservation, Retention & Destruction of GP General Medical Services Records Relating to Patients' (replacing FHS 42/94 or FHS forms, which are covered in EC2/68). The good practice described here, however, is as relevant to the management of GP records as it is to those of Health Authorities and NHS Trusts.

Background

The importance of sound records management practices in the NHS

4. Records management is most effective when it commands commitment from senior managers and is regarded as a professional activity requiring specific expertise.
5. Records are a valuable resource because of the information they contain. That information is only usable if it is correctly recorded in the first place, is regularly up-dated, and is easily accessible when it is needed. Information is essential to the delivery of high quality evidence-based health care on a day-to-day basis and an effective records management service ensures that such information is properly managed and is available:-
 - to support patient care and continuity of care;
 - to support day to day business which underpins delivery of care;
 - to support evidence based clinical practice;
 - to support sound administrative and managerial decision making, as part of the knowledge base for NHS services;
 - to meet legal requirements, including requests from patients under access to health records legislation;
 - to assist clinical and other audits;
 - to facilitate multi-professional working;
 - to support improvements in clinical effectiveness through research and also support archival functions by taking account of the historical importance of material and the needs of future research;

- whenever, and wherever there is a justified need for information, and in whatever media it is required.

Key Objectives

6. NHS Trusts and Health Authorities should draw up a records management strategy, identifying the resources needed to ensure that records of all types (administrative as well as clinical) are:-
 - properly controlled;
 - readily accessible and available for use, and eventually;
 - archived or otherwise disposed of.
7. Such strategies may already be in place, otherwise they should be drawn up and agreed by April 2002 (when this circular is due for review), with implementation well in hand by April 2003, including arrangements to monitor progress and compliance.
8. Each NHS organisation should identify a specific senior manager responsible for co-ordinating, publicising and monitoring implementation of the records management strategy. The name, title and contact details of the named manager should be sent to Nia Watkins, Programme Co-ordinator: Data Quality and Health Records Management, Health Information Management & Technology Division, NHS Directorate, National Assembly for Wales, Cathays Park, Cardiff CF10 3NQ, Tel GRO-C or email [GRO-C">nia.watkins@GRO-C](mailto:nia.watkins@<span style=), by 31st December 2000 so that progress can be monitored and future contact relating to Health Record Management in Wales can be made. Consideration should also be given to including records management in formal audits.
9. The National Assembly for Wales will be working towards ensuring that an all-Wales development of health records management services is in line with the national strategy for information management and that NHS Trusts and Health Authorities develop action plans for effective records management services for all staff groups, record types and media.

Legal Obligations and Good Practice

10. All NHS records are public records under the terms of the Public Records Act 1958 S.3(1)-(2). Chief Executives and senior managers of all NHS organisations are personally accountable for records management within their organisation and have a duty to make arrangements for the safe-keeping of those records under the overall supervision of the Keeper of Public Records. The Department of Health is the liaison point between them and the Public Record Office (PRO) whose responsibility includes permanent preservation.
11. Other legal obligations exist (see below and Appendix A) in respect of particular classes of records, especially those containing personal information. The guidance in this circular and its appendices will help managers to appreciate and carry out their obligations for all types of records within their care.

Issues to be Addressed

12. The 1995 Audit Commission report, *'Setting The Record Straight - A Study of Hospital Health Records'*, criticised the poor standard of NHS record keeping and strongly recommended that corrective action should be taken. The key issues to be addressed are the:-
 - legacy of low priority given to records management and related facilities;
 - lack of awareness of the importance of good record keeping;
 - lack of information sharing between professions and work units;
 - tendency to treat records as personal rather than corporate assets;
 - lack of co-ordination between paper and electronic information strategies;
 - need to maintain confidentiality whilst legitimately freeing information.
13. This has given rise to a range of concerns e.g. the question of 'What constitutes an adequate health record?', an issue which will require further exhaustive consultation across the whole health sector.
14. The Caldicott *'Review of Patient Identifiable Information'* also raised concerns about the management of NHS records. The Review, published in December 1997, is the report of a committee set up by the Chief Medical Officer for England to review all patient-identifiable information which passes between NHS

organisations, including to non-NHS bodies, for purposes other than direct care, medical research or in response to statutory requirements. All of the Committee's 16 recommendations were accepted by Ministers and a Caldicott Advisory Sub-Group is now overseeing this implementation in Wales.

15. In the main, the Committee was satisfied that the flows of information containing patient-information were justified but the Committee was concerned at the general lack of awareness of confidentiality and information security requirements throughout the NHS at all levels. The Committee was also concerned at the NHS's ability to limit access to patient information to those who truly need to know. Guidance based on their recommendations is due to be published during 1999. Elements of the guidance are referred to in this circular for the sake of completeness.
16. Additionally, the Caldicott Review recommended that 'Guardians' of patient information should be created to safeguard and govern the uses made of confidential patient information within NHS organisations. WHC (99)92 'Caldicott Guardians In the NHS' calls for each Health Authority, Special Health Authority, NHS Trust and Local Health Groups to appoint a Caldicott Guardian, ideally at Board level, by no later than 14 June 1999. Records managers should liaise closely with their local Guardian to ensure that their records management strategy is in line with national and local guidance and protocols on confidentiality.
17. '*Better Information - Better Health, Information Management and Technology for Health Care and Health Improvement in Wales, a Strategic Framework 1998-2005*' sets describes the wider health agenda as requiring the availability of information about health needs of the population, and the provision of better information for patients and the public about healthy living and service choice. Increasingly, information will be created, stored, and disseminated electronically as work progresses towards the implementation of Electronic Patient Records (EPR) and Electronic Health Records (EHR). The underlying principles for effective records management set out within this Circular apply equally to electronically held records.
18. Records management services and controls should be included in NHS Trust and Health Authority information management and technology strategies, which should themselves be prepared in the context of '*Better Information - Better Health*'. As the strategy evolves, the practical issues of access to records, security and training etc, will require consultation and further guidance.
19. Each of the three major initiatives noted above impacts on the management of records and new practice (and guidance on practice) will evolve in the light of these and other developments.

20. Health and administrative records are core resources for the NHS. They must be properly safeguarded and used efficiently, and all staff - managerial, administrative, professional and medical - must follow the appropriate guidelines and supporting corporate strategies. At the same time, it is important to ensure that resources and procedures for records management are proportionate and appropriate to each organisation.
21. Local Health Groups (LHGs) should operate in accordance with the strategy of their Health Authority in respect of all records which appertain to the business of the LHG.

Confidentiality and Data Protection

22. All NHS bodies and those carrying out functions on behalf of the NHS have a common law duty of confidence to patients and a duty to maintain professional ethical standards of confidentiality. Everyone working for or with the NHS who records, handles, stores, or otherwise comes across patient information has a personal common law duty of confidence to patients and to his or her employer. The duty of confidence continues even after the death of the patient, or after an employee or contractor has left the NHS.
23. In general, any personal information given or received in confidence for one purpose may not be used for a different purpose or passed to anyone else without the consent of the provider of the information. This duty of confidence is long established at common law. However, it is not an absolute duty and can be subject to an overriding public interest. Medical historical and epidemiological research is based on patient information. Usually, the information is anonymised so that individual patients cannot be identified. In such cases, the use of the information is generally accepted as being not incompatible with the duty of confidence. Where identifiable information is used, in the absence of consent (express or implied), it is necessary to consider whether any public interest in the research outweighs the duty of confidence, having regard to all the circumstances. Any research using patient records must first be approved by a Local Research Ethics Committee.
24. There are other statutory restrictions on the disclosure of information:-
 - The NHS (Venereal Diseases) Regulations 1974 and the NHS Trusts (Venereal Diseases) Directions 1991, prevent the disclosure of any identifying information about a patient examined or treated for a sexually transmitted disease (including HIV and AIDS) other than to a medical practitioner (or to a person employed under the direction of a medical practitioner) in connection with and for the purpose of either the treatment of the patient and/or the prevention of the spread of the disease.

- The Human Fertilisation and Embryology Act 1990, as amended by the Human Fertilisation and Embryology (Disclosure of Information) Act 1992, limits the circumstances in which information may be disclosed by centres licensed under the Act.
 - The Abortion Regulations 1991 impose obligations on medical practitioners who carry out terminations of pregnancy to notify the Chief Medical Officer and to provide detailed information about the patient. The Chief Medical Officer may then only disclose that information in accordance with the provisions of the Regulations.
25. The Caldicott Committee recommended that NHS organisations should be held accountable, through clinical governance procedures, for continuously improving confidentiality and security procedures governing access to and storage of personal information.
26. The implementation in March 2000 of the Data Protection Act 1998, which covers both computerised and certain manual personal data, establishes a set of principles with which users of personal information must comply. For instance, the fair and lawful processing of information; the collection and processing of information only for specific purposes; the obligation to ensure that information is accurate, and up-to-date, and retained in a form which identifies the subject only for as long as is necessary for the purpose. The Act imposes statutory restrictions on the use of personal information, including health information. Specific guidance will be issued once the necessary secondary legislation is passed.
27. The disclosure provisions of the Data Protection Act 1998 extend coverage to some records which are not subject to automated processing. Most of the provisions of the Access to Health Records Act have been replaced by broadly equivalent provisions in the new Act.

Available Guidance

28. *‘For The Record - Managing NHS Records’* (Appendix A - attached). These guidelines offer an overview of the key issues and solutions, and best practices for NHS teams to follow when preparing a records management strategy. It represents the joint National Assembly for Wales, Department of Health and Public Record Office view of how records should be administered and sets the standard required of the NHS.

29. *'For The Record - NHS Retention & Disposal Schedule'* (Appendix B - attached) updates the retention schedule previously issued with circular WHC(89)60, and has been approved by the Public Record Office. It sets out minimum retention periods for NHS records of all types, except for GP health records specifically excluded (see **Exclusions**), and indicates which are most likely to be appropriate for permanent retention in archives held on behalf of the nation. It also explains the reasoning behind the determination of minimum retention periods, including legal requirements, where relevant. Further comment on the retention schedule will be welcomed, and updates will be posted to a master schedule on the Department of Health's web site for NHS Records - www.doh.gov.uk/nhsexec/manrec.htm.
30. DGM(96)43, *'The Protection and Use of Patient Information'*, the National Assembly for Wales guidance on confidentiality. This guidance is being revised to take account of the provisions of the Data Protection Act 1998.
31. The Caldicott Committee Report on the *'Review of Patient-Identifiable Information'*, December 1997, and subsequent guidance on improving confidentiality and security, including implementation (*Implementing the recommendations of the Caldicott Report* and the *appointment of Guardians* included in WHC (99)92, *Caldicott Guardians*).
32. WHC (99)7, *'Preservation, Retention and Destruction of GP General Medical Services Records Relating to Patients'* (Replacement for FHSL 42/95).
33. EC 2/68, *'Disposal of Records which have lost their value'*, which includes coverage of FHS forms, such as GP claims for payment of fees and allowances.
34. *'Better Information - Better Health: An Information Management and Technology for Health Care and Health Improvement in Wales – A Strategic Framework 1998 – 2005'*, sets out plans for the development of Electronic Patient Records and Electronic Health Records, and for their implementation as part of the wider information strategy of the NHS.
35. The Health Archives Group's booklet: *'Hospital Patient Case Records - A Guide To Their Retention and Disposal'*, supplements the Department of Health's guidelines by providing practical advice about the selection processes of records disposal. This publication is a good example of professional archivists working to extend national guidance for use in specific circumstances.
36. WHC (95)24, *'Health Service Use of Ionising Radiations'*, gives specific advice on record keeping for procedures and treatments, such as X-Rays, which use ionising radiations.

37. Information on obtaining copies of the guidance listed above, and further professional advice on a range of topics can be obtained from Appendix C, a list of useful contacts.

Future Developments

38. These guidelines will be updated (or replaced) as necessary to keep pace with future developments arising from changes in the organisation and management of the NHS, the application of the Data Protection Act 1998, the Human Rights Act and the proposed Freedom of Information Act.
39. The proposed Freedom of Information Act is likely to lead to greater openness concerning NHS administrative records, but the disclosure of health records will continue to be restricted along the lines of the current legislative restrictions in particular by the common law of confidentiality and the Data Protection Act 1998.

Structure and Content of Casenotes

40. Principles of good practice for casenotes were set out in 'Setting the Record Straight' 1999, Audit Commission update.
41. These were derived from:-
- Professionals – Doctors, Nurses and other healthcare professionals.
 - Tunbridge Report (1965).
 - The Department of Health HSC (89) 20 / HSC 1999/053.
 - Institute of Health Record Information and Management IHRIM (UK).
42. Organisations should be following these guidelines along with the principles set out in Appendix A to ensure that best practice is achieved across Wales.
43. The principles of good practice for casenotes:-
- The patient should be clearly identified and the casenotes should set out diagnosis, history, treatment, outcomes, results and care plans.
 - Casenotes should be kept neat and tidy with legible entries signed and dated, preferably in black ink.
 - Records should be kept up to date and filed in chronological order with the most recent on top.
 - Casenote folders and the contents should have clear structure, which is agreed with users, and should be organised into sections.

- There should be a policy determining which documents should remain in the casenotes after discharge(culling).
- There should be one set of casenotes for each patient.

Quality of Record Keeping

44. The quality of record keeping can be further assessed using 17 Standards, which were produced from the above principles based upon good practice concerning legibility, patient identification, nursing records, diagnostic tests, structure, confidentiality and housekeeping of notes.

- i) There are no loose sheets of paper in the casenotes
- ii) There is a contents index or filing order
- iii) There are section dividers
- iv) There are multiple spines
- v) The folder is marked confidential
- vi) There is a patient identification or front sheet
- vii) The notes appear to be tidy
- viii) Test results are fixed to a proper mount sheet
- ix) The casenote folder is in a good state of repair
- x) There are no personal details about the patient on the outside cover
- xi) The next stage of the patient's treatment is clear
- xii) There is a discharge summary or letter for the last episode
- xiii) The latest history sheet is legible
- xiv) There is a diagnosis for the last episode
- xv) There is evidence of nursing care for the last episode
- xvi) The latest page of nursing notes is legible
- xvii) The patients name is on papers relating to the last episode

45. Organisations should be working towards ensuring that these principles and standards along with those attached to this circular are applied in all areas of record keeping.

The Way Forward

46. The National Assembly for Wales is aware of the issues facing Health Record Managers throughout Wales and has appointed a Health Records Project Manager for Wales in recognition of that fact to support the development of health records management within Wales. The Health Record Project Manager (HRPM), Nia Watkins, will be carrying out a review throughout organisations in Wales in an effort to improve record keeping standards and processes as set out in this circular.

47. The HRPMP will be working with Health Records Managers to encourage improvements in quality standards and sharing of best practice. Other work programmes towards standards for the structure and content of the health record are being undertaken simultaneously, the progress of which will be disseminated across Wales.

Associated Documentation

Appendix A : For the Record – Managing NHS Records: Department of Health Guidelines

Appendix B : For The Record – NHS Retention & Disposal Schedule (incorporating B1, Retention and Disposal Schedule; B2, Principles used in determining policy regarding the retention and storage of essential maternity records and B3, List of approved places of deposit for public records.

Appendix C : List of useful contacts

Further Information

Further information regarding this circular or the associated documentation can be obtained from Nia Watkins, Programme Co-ordinator: Data Quality and Health Records Management, Tel: GRO-C, Email: [GRO-C">nia.watkins@GRO-C](mailto:nia.watkins@<span style=)

Richard Phillips

Deputy Director
Health Information Management & Technology

Division

**Appendix A to Health Service Circular WHC (2000)71
(For The Record: Managing records in NHS Trusts & Health
Authorities)**

Appendix A

For The Record: Managing NHS Records

Department of Health Guidelines

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For The Record: Managing NHS Records - Department of Health Guidelines

1. INTRODUCTION

1.1 What to do about earlier circulars and guidance?

The last guidance was issued in 1989 as Welsh Health Circular **WHC (89)60**. It was due to be replaced in 1994 but was instead extended for a further period. That circular is now cancelled and copies should be destroyed. It has been superseded by **WHC (2000) 71** and these new guidelines. Also superseded and cancelled is circular **WHC (94)23**, which recommended extended retention periods for maternity records. The revised and recommended retention periods are now incorporated in Appendix B, which also contains the statement of 'Principles in determining policy on retention and storage of essential maternity records', from the British Paediatric Association, the Royal College of Midwives, the Royal College of Obstetricians and Gynaecologists and the United Kingdom Central Council for Nursing, Midwifery and Health Visiting, which was issued with WHC(94)23.

Guidance on GP medical records is set out in **WHC(99)7** (replacing FHSL 42/94). FHS forms, such as GP claims for payment of fees and allowances, continue to be covered by EC 2/68.

1.2 What do the new guidelines tell us?

The new guidelines go into greater detail than the previous circular did and cover good practice for managing all types of NHS records, their creation, use, and final disposal. They outline the current best practices in records management and are divided into sections for ease of reference.

1.3 Retaining and disposing of records

Appendix B, the NHS Retention and Disposal Schedule, sets out the minimum document retention periods based on legal and other requirements. *It is important to stress that these are the minimum requirements and there may be circumstances where records could be kept for longer periods for specific purposes.* The Appendix also covers how to arrange for the permanent preservation of historically important items. N.B. All of these guidelines have the approval of the Public Record Office and should be used in the context of this circular.

1.4 What sorts of records does it cover?

These guidelines apply to NHS records of all types, including:-

- Patient health records (Electronic or paper based; including those concerning all specialities, but excluding GP medical records). This includes private patients seen on NHS premises.
- Accident & Emergency, Birth, and all other Registers.
- Theatre Registers & Minor Operations (and other related) Registers.
- Administrative records (including e.g. personnel, estates, financial and accounting records; notes associated with complaint-handling).
- X-Ray and Imaging reports, output and images (but see also WHC (95)24, 'Health Service Use of Ionising Radiations', which gives specific advice on record keeping for procedures and treatments, such as X-Rays, which use ionising radiations).
- Photographs, slides, and other images.
- Microform (i.e. fiche/film).
- Audio and video tapes, cassettes, CD-ROM etc.

- Computer databases, output, and disks, etc, and all other electronic records.
- Material intended for short-term or transitory use, including notes and 'spare copies' of documents.

The guidance applies to any material which holds information gathered as part of your work in the NHS, and this list is not exhaustive. It is important to remember, that the ownership and copyright in these records as a rule is with the NHS Trust or Health Authority, not with any individual employee or contractor.

2. SHARED RESPONSIBILITY FOR NHS RECORDS

2.1 Public Records

All NHS records are public records under the terms of the Public Records Act 1958 S.3(1)-(2). The Act sets out broad responsibilities for everyone who works with such records, and provides for guidance and supervision by the Keeper of Public Records.

2.2 Statutory responsibility

The Secretary of State for Health, all Health Authorities, NHS Trusts and other NHS bodies have a statutory duty to make arrangements for the safe-keeping and eventual disposal of their records. This is carried out under the overall guidance and supervision of the Keeper of Public Records. The Keeper is answerable to Parliament via the Lord Chancellor.

In practice, the Public Record Office (PRO) advises the Department of Health's Departmental Record Officer (DRO) on how to manage Departmental and all types of NHS records. The DRO is the liaison point with the PRO and issues guidance for you to follow.

2.3 Managerial accountability and responsibility

Chief Executives and senior managers are personally accountable for the quality of records management within their organisations, and all line managers and supervisors must ensure that their staff, whether administrative or medical, are adequately trained and apply the appropriate guidelines. For example, Medical Records Officers who have lead responsibility for hospital patient case records and manage the 'records library' and other storage units where they are kept, must have an up-to-date knowledge of the laws and guidelines concerning confidentiality, data protection and access to patient information in particular. Caldicott Guardians, to be appointed in each NHS organisation by 31 March 1999, are responsible within their organisations for approving and ensuring that national and local guidelines and protocols on the handling and management of confidential personal information are in place.

2.4 Individual responsibility

In practice, **you** are responsible for any records which you create or use. This responsibility is established at, and defined by, the law. Furthermore, as an employee of the NHS, any records which you create are public records.

Everyone working for or with the NHS who records, handles, stores, or otherwise comes across information has a personal common law duty of confidence. The Data Protection Act 1998 now places statutory restrictions on the use of personal information, including health information.

Personal information (e.g. about a patient) processed/kept for any purpose should not be kept for longer than is necessary for that purpose. Patient information may not be passed on to others without the patient's consent except as permitted under Sch 2 and 3 of the Data Protection Act 1998 or where applicable, under the common law where there is an overriding public interest. Further guidance on this often difficult issue can be obtained from the Department of Health's guidance, DGM (96) 43 – 'The Protection and Use of Patient Information', and more will be issued as part of the implementation of the Caldicott Report on Patient-Identifiable Information (see WHC (99)92, '*Implementing the recommendations of the Caldicott Report, and Caldicott Guardians*'). WHC (99)92 will be updated to cover any new or altered restrictions arising from implementation of the Data Protection Act 1998.

The Audit Commission regularly monitors performance and has issued reports which strongly criticised record keeping in the NHS. Also, the Health Service Commissioner has a statutory right to obtain relevant records when investigating a complaint. If records are missing or inadequately maintained, the Commissioner will criticise that in his report.

3. BEST PRACTICES IN RECORDS MANAGEMENT

The Public Record Office has recently published a Records Management Standard which states that:

"A systematic and planned approach to the management of records within an organisation, from the moment they are created to their ultimate disposal, ensures that the organisation can control both the quality and the quantity of the information that it generates; it can maintain that information in a manner that effectively serves its needs, those of government and of the citizen; and it can dispose of the information efficiently when it is no longer required".

Public Record Office Records Management Standards, 1998.

The full text of these standards is available in hard-copy from the Public Record Office (Kew, Richmond, Surrey, TW9 4DU. Tel: 0181-876-3444), or electronically via the Public Record Office Website on the Internet at <http://www.pro.gov.uk>.

These revised guidelines draw on advice from the PRO and the best practices followed by a wide range of organisations in the public and private sectors. They also take account of the findings of the Audit Commission's 1995 report: 'Setting The Record Straight (A study of hospital medical records)'; and a recent efficiency scrutiny conducted by the Prime Ministers Efficiency Unit and the PRO. Further advice and information is available on request (see Appendix C for a list of useful contacts).

The guidelines provide:-

- A framework for consistent, coherent and compatible records management.
- A set of values with robust yet flexible (where appropriate) standards.
- Integration with other co-developing initiatives legal, organisational and technological.
- A reference point against which continual improvement and consultation can take place e.g. on what constitutes a definitive patient record.

4. SETTING THE NHS STANDARD

4.1 What are the general principles to follow?

Records are valuable because of the *information* they contain and that information is only usable if it is correctly and legibly recorded in the first place, is then kept up to date, and is easily accessible when needed. The following section, together with the details in Appendix B, 'The NHS Retention and Disposal Schedule', identifies the specific actions, managerial responsibilities, and minimum time periods for the effective management of records from creation, through day-to-day use, selection, storage, maintenance and finally, disposal.

4.2 Good record keeping ensures that:-

- you can work with maximum efficiency without having to waste time hunting for information;
- there is an 'audit trail' which enables any record entry to be traced to a named individual at a given date/time with the secure knowledge that all alterations can be similarly traced;
- those coming after you can see what has been done, or not done, and why;
- any decisions made can be justified or reconsidered at a later date.

4.3 This is vitally important in cases such as:-

- providing patient care;
- clinical liability;
- parliamentary accountability;
- purchasing and contract or service agreement management;
- financial accountability;
- disputes or legal action.

4.4 It is therefore vital that you always:-

- record any important and relevant information, making sure that it is complete;
- ensure that it is legible so that it can easily be read and reproduced when required;
- put it where it can be found when needed;
- keep it up-to-date.
- if necessary, share information rather than copying it in order to reduce risks to confidentiality;
- suitably dispose of records as soon as possible (subject to national and local retention periods).

4.5 What needs to be done to achieve the best standards?

Managers in all work units (e.g. personnel, finance, medical records library, operating theatre, clinics, physiotherapy, occupational and speech therapy, orthodontics, Accident & Emergency, etc) need to ensure that staff are aware of the current rules on such issues as Data Protection and access to patient information. They should also be aware of the vital role that records play in delivering health care but, as the Audit Commission reports have shown, there is considerable room for improvement as many NHS units have failed to look after their records properly. This Circular and its appendices are targeted at helping to achieve these necessary improvements. Each unit should have a comprehensive records management programme which includes cost-effective management of non-current as well as active records, and which takes account of their unit's risk management strategy.

Senior managers must ensure that all staff are involved in this programme, which should encompass:-

- profile raising and publicity;
- appropriate resources including training;
- review of procedures and implementation plan for specific actions arising;
- monitoring individual and organisational compliance.

4.6 Roles and Responsibilities

The DRO can offer practical advice but it is likely that Chief Executives and senior managers will need to:-

4.7 Raise the profile of records management by:-

- nominating a local senior manager to take the lead responsibility;
- appointing a local records manager (accountable to the senior manager);
 - giving them both the appropriate cross-organisational authority to get things done;
 - determining their relationship with internal audit and management teams;
 - ensuring that they have the necessary competency;
- developing an organisational records management strategy;
- including records management in business unit objectives and plans;
- including progress reports in periodic reports to their Board.

4.8 The Records Manager will need to:-

- assess the current standard of record keeping;
- develop professional standards and co-ordinate and liaise with colleagues within the health sector to develop best practice;
- determine the various users' business needs;
- conduct a records audit (to identify what records collections already exist and why);
- categorise records series according to their subject matter, value, and rate of use;
- establish access controls.

4.8.1 Rationalise records collections by:-

- encouraging users to share records and the information they contain (but subject to Data Protection and agreed confidentiality guidelines);
- ensuring effective cross-referencing or merging (e.g. of all records for the same patient).

4.8.2 Then put the proper controls in place by:-

- ensuring local application of these guidelines and the accompanying retention and disposal schedule;
- producing local standards covering all types of records (both administrative and medical), in consultation with appropriate local bodies e.g. Community Health Councils (CHC) and ethics committees;
- promulgating the standards by issuing local guidelines.

4.8.3 Publicise and promote the local guidelines by (for example):-

- implementing a formal training programme to launch and support the guidelines;
- including records management in induction training and staff handbooks;
- staging awareness raising sessions using real examples to demonstrate the benefits;
- running a poster and flier campaign, and articles in house journals;
- speaking at team briefings and other meetings.

4.8.4 And finally, maintain standards by:-

- promoting quality through the professional skills and qualifications of key players;
- encouraging all staff to follow the procedures, guidance and best practice;
- monitoring performance through quality control and internal audits;
- identifying areas where improvements could be made;
- reporting performance standards to the Chief Executive, senior managers, and Board and also to other parties e.g. CHCs and the public at large.

4.9 Implementation should be proportionate and appropriate

This guidance will necessarily be applied differently according to the individual circumstances of each NHS Trust and Health Authority. For example, smaller NHS Trusts may find that the role of Records Manager is best performed as part of the duties of one or a number of existing managers. What is important is that:-

- senior management takes active responsibility for records management;
- the resources devoted to records management are adequate for the work to be done;
- legal obligations are met, and
- policies and procedures are carried out consistently and appropriately.

5. CREATING RECORDS

5.1 What is a record?

In the context of this guidance, a record is anything which contains information (in any media) which has been created or gathered as a result of any aspect of the work of NHS employees - including consultants, agency, or casual staff.

5.2 What is record registration?

Registration is a system which allocates a unique identifier (number or alphabetical prefix) to each item, and which records that sequentially in a 'register' or index. Registration in this sense is additional to that needed to meet legal obligations for registration with third parties, such as the Data Protection Act 1998.

5.3 What should be registered?

In accordance with long-standing national procedures, clinical records - including electronic ones such as the Electronic Patient Record (EPR) - are routinely created and registered for each patient when they first visit a clinician. In addition, Hospital Accident & Emergency Departments, Imaging & Pathology, and other units who receive direct referrals may have a separate registration system. A unique identifier, e.g. the NHS Number, is normally allocated to patients, but their name, address, date of birth, their General Practitioner's name, and other data are used as additional cross-checks.

Not every administrative record needs to be registered. The local records manager will need to determine, together with business managers and other interested parties such as the local Caldicott Guardian, which categories of record are important enough to warrant formal registration and to make this clear in the locally produced instructions. Registration will depend on the organisation's business need to maintain accountable records of particular activities, its information needs, how many records there are on that particular topic or in that series, and on any legal obligations for registration with third parties, such as the Data Protection Act 1998. Some examples of registered file series are personnel and appointments, payroll, finance, estates, Korner returns, and performance monitoring. With the development of Electronic Patient Records (EPR) and Electronic Health Records (EHR), there will be a need to identify every item which is patient related with the relevant NHS Number to provide the necessary links through all electronic records.

5.4 What is a suitable registration system?

You may already have a workable system (e.g. Patient Administration System - PAS; Hospital Information System - HIS; Electronic Patient Record - EPR) in place. In this case, the records manager will need to confirm that it continues to meet all business requirements, which must include its user friendliness and also satisfies any legal obligations for registration with third parties. Systems will need to be adapted to conform with these requirements. The organisation may decide to have more than one system, depending on the complexity of its records management requirements; there are no hard and fast rules. Note, however, that GP's are currently obliged to maintain their clinical records required under paragraph 36 to Schedule 2 of the NHS (GMS) Regulations 1992, on specific forms provided by the Health Authority. They may supplement or duplicate (but not replace) those forms with data/records held on a computer.

Individual documents may be registered, but it is normal practice to create a file (folder, box-file, etc.) to hold all the documents on each subject, and to register the file(s) for each series.

5.5 What are the best practices in registration?

The best practice principles of registration are:-

- the file title must be unique;
- the reference identity assigned to each file must be unique;
- both must be relevant to and easily understood by all users;
- the identifier should be restricted to no more than four elements;
- each element should relate to a different hierarchical level of the file title;
- details should be recorded both on the file cover and in the register.

At a minimum the file description should identify:-

- its title;
- its registration identifier (e.g. number or prefix used in register);
- the date it was registered (opened);
- the date it is due to be closed and reviewed, destroyed, or archived.

6. USING RECORDS AND RECORD TRACKING SYSTEMS

6.1 The value of information

We all spend most of our working lives creating, collecting, and recording information - whether that is via a simple note of a telephone conversation, a large report, or personal data about a specific patient or their treatment - but each of these records is only as valuable as the information it contains, and that is only of value if it can be found when needed, and then used effectively. The NHS Executive encourages improvements in records management across the NHS, and each individual has a key role to play in maximising benefits to patient care through effective record keeping.

6.2 The importance of knowing where information can be found

Accurate recording and knowledge of the whereabouts of all records is essential if the information they contain is to be located quickly and efficiently. One of the main reasons why records get misplaced or lost is because their next destination is not recorded anywhere.

6.3 What information should be included?

Tracking mechanisms should record the following (minimum) information:-

- the item reference number or other identifier;
- a description of the item (e.g. the file title);
- the person, unit or department, or place to whom it is being sent;
- the date of the transfer to them.

6.4 Manually operated tracking systems

Common methods for manually tracking the movements of active records include the use of:

- a paper register - a book, diary, or index card to record transfers;
- file 'on loan' (library-type) cards for each absent file, held in alphabetical or numeric order;
- file 'absence' or 'tracer' cards put in place of absent files.

Manual systems often suffer because they are rarely updated, quickly rendering such systems ineffective.

6.5 Electronically operated tracking systems

Automated methods of tracking include the use of:-

- a computer database in place of paper/card index;
- bar code labels and readers linked to computers;
- workflow software to electronically track documents.

6.6 What are the advantages of an electronic tracking system?

An electronic system can drastically reduce the amount of paper generated, and therefore the volume of paper to be stored. Using an electronic tracking system rather than, for example, a card index can be more efficient - speeding up information retrieval times, reducing mis-filing, and the problems associated with the use of absence markers. Barcoding improves the speed and accuracy of recording file movements by replacing manual keying of data with automatic reading of barcodes. Portable, hand held, barcode readers can be particularly useful for large sites or stores. In all of these examples the biggest benefit lies in the automatic and immediate updating of the file movement database to record the latest information as it happens.

Such systems allow multiple users to access them at the same time via networked computers; and also provide readily accessible management information on file activity levels, quantities, file titles, and 'bring forward' on due date for destruction. None of these can easily be achieved manually.

6.7 What makes a successful system?

A well thought-out tracking system - manual or electronic - will meet all user needs and will be supported by adequate equipment. It will provide an up-to-date and easily accessible movement history and audit trail. The success of any tracking system depends on the people using it and therefore, all staff must be made aware of its importance and given adequate training and updating.

7. STORING PAPER RECORDS EFFICIENTLY

7.1 A matter of common sense

When a record is in constant or regular use, or is likely to be needed quickly, it makes sense to keep it within the business unit responsible for the related work. Storage equipment for current records will usually be adjacent to users i.e. their desk drawers or nearby cabinets, to enable information to be appropriately filed so that it can be retrieved when it is next required. Records must always be kept securely and when a room containing records is left unattended, it should be locked. A sensible balance should be achieved between the needs for security and accessibility.

Where a non-NHS agency or individual is contracted to carry out NHS functions, the contract must draw attention to obligations on confidentiality and to restrictions on the use of personal information, including those specified by the Data Protection Act 1998. The contract must require that patient information is treated and stored according to specified security standards, and is used only for purposes consistent with the terms of the contract. Action that will be taken in the event of confidence being breached (e.g. termination of contract) should be specified.

7.2 Making an informed choice

There is a wide range of suitable office filing equipment available. The following factors should be taken into account:-

- compliance with Health & Safety regulations (must be the top priority);
- security (especially for confidential material);
- the user's needs (must be a major consideration);
- type(s) of record to be stored;
- their size and quantities;
- usage and frequency of retrievals;
- ergonomics, suitability, space efficiency and price.

7.3 Let the business need determine it

As the business need for quick access to particular records reduces, it may be more efficient to move the less frequently used material out of expensive offices and into cheaper accommodation. This usually facilitates the use of more effective and space efficient storage options e.g. mobile racking or specially equipped warehouse-type units with automated retrieval.

7.4 Contracting-out information storage and retrieval

Off-site storage can be especially beneficial for less frequently used material, and private sector companies are capable of providing secure and efficient information storage and retrieval services for all types of record. In 1996/97 the joint scoping study by the Prime Minister's Efficiency Unit and the PRO concluded that such options should be routinely considered for all government records. It is an option which NHS units should also actively consider, especially as part of a Public Private Partnership Initiative.

8. NON-PAPER RECORDS

8.1 Microfilm, microfiche and digital scanners

Microfilm and fiche have been used for many years and Courts will accept them as evidence. Their use may continue and, whilst they can be operated in tandem with computers, there is a gradual move away from film/fiche in favour of computer storage of digital images captured through scanners. Both microfilm readers and computers can be linked to scanners to capture incoming paper mail, and to direct fax-in/out facilities.

Microfilming comes into its own as a relatively cost-efficient way to capture and store images of otherwise bulky or deteriorating archival material:-

- to minimise storage costs of materials which would otherwise face destruction;
- to make copies available for other uses (such as research) whilst safeguarding the original;
- to reduce the storage space occupied by low activity paper records.

It is common practice to make copies for office use, keeping the masters securely stored. Note that the provisions of the Data Protection Act 1998 on registration of records and restriction of disclosure, relate to microfilmed records as well as to other personal records.

There is considerable scope for reducing the costs by getting together with other NHS units to jointly commission the microfilming of records. It is worth noting that converting images into a digitised format (i.e. onto a computer, or CD-ROM etc) is cheaper from microfilm than it is from paper, so transfer onto film might be a good initial move.

Despite its relative cheapness, microfilming still costs money. There is little point in going through the time-consuming conversion process only to allow the microfilm to deteriorate. There are industry standards for both creation and storage and these should be implemented.

8.2 Visual records (Advice contributed by the Health Archives Group)

Many hospitals, and some other health bodies, have large collections of visual images - either as artistic images and still photographs (which may be prints, negatives, slides, transparencies, and electronic-readable images) or as moving images (film or video).

The teaching and historical value of medical photographs should be considered, especially where innovative procedures or unusual conditions are involved. Some of this material may be considered for permanent preservation and the advice of a local archivist should be sought.

In the case of photographs, the quality of image available from negatives or original prints should be considered and new prints may be made in cases where the original is deteriorating. In the case of moving images, advice may be sought from the Keeper of Documentary Films, National Film Archives (see Appendix C).

Photograph and film collections assembled by medical and other staff through their work within NHS organisations, should be regarded as Public Records and subject to these guidelines. Note that the provisions of the Data Protection Act 1998 on registration of records and restriction of disclosure, relate to photographs of identifiable individuals as well as to other personal records. Further information is provided in 'Making and Using Visual and Audio Recordings of Patients', General Medical Council, September 1997.

8.3 Information Technology

Increasingly, information technology is being introduced into the workplace. In some areas up to 85% of all documents are now produced electronically and this trend places new demands on managing records. For instance, if an electronic document is to be produced as evidence in court cases it will only be accepted if assurances can be given that the computer was not being misused and was operating properly at the time the record was produced. NHS Trusts and Health Authorities should take their own legal advice to ensure that their systems fully comply with current requirements, and in any case where they may have doubts. (See HSC 1998/153, *'Using Electronic Records in Hospitals: Legal requirements and Good Practice'*, which has not been released in Wales)

There is also an increase in the use of electronic transfer using intranets and NHS networks. Managers will need to address the implications for storage, security and training, etc. in the light of local implementation of such systems.

The principles of good records management practice described in these guidelines apply equally to records created electronically; the concern is the content or information and not the medium of delivery.

In some hospitals, X-Rays (including ultrasound, scanning, and other diagnostic imaging techniques) are captured and managed digitally. This is usually managed via a Picture Archiving Communications System (PACS), the functions of which include digital storage of images and reporting functions.

The EPR was piloted at Burton and Wirral hospitals. Others, including Bethlem & Maudsley, Horizon, and Winchester & Eastleigh NHS Trusts have since pioneered the concept of advanced EPR and Integrated Clinical Workstations (ICWS). There are plans to add on multi-media and voice activated facilities.

Further information about these and other developments is included in *'Better Information – Better Health : Information Management & Technology for Health Care and Health Improvement in Wales'* and good practice guidelines are available in HSC1998/153 *'Using Electronic Patient Records in Hospitals: Legal Requirements and Good Practice'*, which has not been released in Wales.

Further advice is available from the NHS Executive Information Management Group or (from April 1999) the NHS Information Authority (NHSIA) - see the attached list of useful contacts in Appendix C.

9. SELECTION OF NHS RECORDS FOR PERMANENT PRESERVATION

All NHS records are public records under the terms of the Public Record Act 1958. Public records over 30 years old and selected for permanent preservation must be transferred to the PRO or kept in a place of deposit, appointed under S.4(1) of the 1958 Act. Guidance on selection is given in the introduction to '*For The Record: NHS Retention and Disposal Schedule*' (Appendix B to this circular).

In general, records worthy of preservation from NHS Trusts and Health Authorities are appropriate for deposit in the nearest Local Authority Record Office which has been approved by the PRO. In a very few instances individual hospitals have made suitable arrangements and have themselves been appointed as places of deposit.

It should be kept in mind that the PRO expects the standards of storage and access to records in places of deposit to match those found in the PRO itself. The relevant standards are spelt out in the PRO's own guidance '*Beyond the PRO: Public Records in Places of Deposit*'. Free copies of this document, and information about the nearest or most appropriate place of deposit for the records of particular NHS institutions, can be obtained from the Head of Archive Inspection, The Public Record Office, Kew, Richmond, Surrey, TW9 4DU (Tel: 0181-392-5262). A list of approved places of deposit, with telephone and fax numbers, is included in Appendix B.

As the resource implications of being appointed as a Place of Deposit are likely to be significant, it is strongly recommended that anyone considering making an application should first contact the PRO Head of Archive Inspection at an early stage. It is highly unlikely that an application will succeed without a firm commitment to employ a professionally qualified archivist.

10. DISPOSING OF UNWANTED RECORDS (see also Section 9 on preservation)

10.1 How long should records be retained?

The length of the retention period depends upon the type of record and its importance to the business of the NHS Trust or Health Authority. The destruction of records is an irreversible act, whilst the cost of keeping them can be high and continuing. The Department's guidance '*For The Record : NHS Retention & Disposal Schedule*' in Appendix B takes account of legal requirements and sets out the **minimum** retention periods for both clinical and administrative records. You have local discretion to keep material for longer, subject to local needs, affordability and, where records contain personal information, the requirements of the Data Protection Act 1998. The schedule may not be a complete list of everything you may come across and you may need to seek advice or consult outside. You will find a list of helpful contacts in Appendix C of this guidance, but you should first consult your local records manager.

10.2 Who makes the decision?

There are two principal options - to destroy or to dispose for example, by passing on to another organisation. As can be seen from Appendix B, some records have fixed retention periods (for example, invoices can safely be destroyed six years after receipt), whilst others will need more careful consideration. In many cases the staff on the section which ordinarily uses them will be able to decide. Operational managers are responsible for making sure that all records are periodically and routinely reviewed to decide what can be disposed of in the light of local and national guidance. A multi-disciplinary Health Record Committee and/or Health Records User Group, reporting as necessary to senior management, should be established to advise on local policy, particularly for the retention, archiving, or disposal of sensitive personal health records. Input from local practitioners should be a key element of a records management strategy.

10.3 What are the options for disposal?

Most NHS records are destroyed as soon as practicable after the expiry of the relevant minimum retention period, but there are other options for disposal. The destruction of records is an irreversible act, so it is vital to consider all the options and get the decision right. Disposal does not just mean destruction. It can also mean the transfer of records from (say) paper onto microfilm or computer; or from one user to another. It could involve depositing it with an organisation which wishes to carry on using it e.g. a hospital or Local Authority Record Office, the PRO or another bona fide research body, for example a university or established research institute recognised by the Local Research Ethics Committee. Advice about these options (and the implications of the Public Record Act) is available from the PRO and others - see the attached list of useful contacts at Appendix C - and in the introduction to Appendix B.

10.4 What are the rules on destruction?

Most NHS records, even administrative ones, contain sensitive or confidential information. **It is therefore vital that confidentiality is safeguarded at every stage** and that the method used to destroy such records is fully effective and secures their complete illegibility. Normally, this will involve shredding, pulping, or incineration. This can be done on site, or via an approved contractor, but it is the responsibility of the NHS Trust or Health Authority to satisfy itself that the methods used throughout the process provide adequate safeguards against accidental loss, or disclosure of their contents. It is recommended that a brief description be kept of everything that has been destroyed, when, and by whom and where a contractor is used, they should be required to sign confidentiality undertakings and to produce written certification as proof of destruction.

11. KEEPING POLICIES UNDER REVIEW

Circumstances and priorities change and it is important that all policies and procedures are regularly reviewed to ensure that they continue to reflect best practice, and the legal and business needs of the organisation. A number of developments, e.g. Caldicott, Data Protection, and extension of information technology into EPR and EHR, have already been identified as drivers for the evolution of records management practice. As the practical implications are identified, this guidance will be updated to reflect the latest position.

**Appendix B to Health Service Circular WHC (2000) 71
(For The Record: Managing records in NHS Trusts & Health Authorities)**

Appendix B

For The Record: NHS Retention & Disposal Schedule

Contents:

- B1 - Retention and Disposal Schedule**
- B2 - Principles to be used in determining policy regarding the retention and storage of essential maternity records**
- B3 - List of approved places of deposit for public records**

B1 - NHS Retention and Disposal Schedule

Introduction

The destruction of records is an irreversible act, while the cost of preserving records worthy of permanent preservation is high and continuing. The criteria which follow are intended to give guidance on how long records should be kept for business purposes and on the identification of records of permanent value.

In each NHS Trust and Health Authority, records managers must ensure that records no longer required for business use are reviewed as soon as practicable under the criteria set out below so that ill-considered destruction is avoided. This schedule identifies **minimum** retention periods. The review will determine whether records are to be selected for permanent preservation, destroyed or retained by the NHS Trust or Health Authority for research or litigation purposes.

Whenever the schedule is used, the guidelines listed below should be followed:-

- i. Local business requirements/instructions must be considered before activating retention periods in this schedule.
- ii. Decisions should also be considered in the light of the need to preserve records, whose use cannot be anticipated fully at the present time, but which may be of value to future generations.
- iii. Recommended minimum retention periods should be calculated from the end of the calendar or accounting year following the last entry on the document.
- iv. Where the period of retention column is marked with an asterisk (*), the documents described must be considered for permanent preservation and the advice of the chief archivist of an appropriate place of deposit¹ obtained.
- v. The selection of files for permanent preservation is partly informed by precedent (the establishment of a continuity of selection) and partly by the historical context of the subject (the informed identification of a selection). General rules should be drawn up locally, using the profile of material which has already been selected, and the history of the institution or organisation (including pioneering treatments and examples of excellence) within the context of its service to the local and wider communities.
- vi. The provisions of the Data Protection Act 1998 must also be complied with.

¹ Places of deposit for public records

A list of these approved places of deposit, with telephone and fax numbers which were fully up-to-date in the autumn of 1998, is attached as Appendix B3. In cases where there is any doubt about the most appropriate place of deposit, advice should be sought from Archive Inspection Services, Public Record Office, Kew TW9 4DU (tel: 0181 392 5262; fax: 0181 392 5284).

- vii. The Department is considering a proposal to establish a national selection policy. This policy could identify regions in which records of a specialism would have precedence in selection for permanent preservation because of a history of regional excellence or innovation in a particular discipline.

The schedule does not seek to cater for all eventualities: the responsible records managers need to consider whether exceptional circumstances (e.g. events of local or national significance reflected in the records) require the long-term preservation of the records.

It is intended that the Retention Schedule will be regularly updated to reflect and incorporate new and additional records series. In support of this we welcome comments on any aspect of this retention schedule.

Records selected for permanent preservation should be transferred to the relevant place of deposit for public records appointed by the Keeper of Public Records, exercising powers under S.4(1) of the 1958 Public Records Act which have been delegated to her by the Lord Chancellor. In most cases the appropriate place of deposit is the nearest Local Authority Record Office, although in a very few cases a hospital has been appointed as a place of deposit for its own records.

Note on authorities for suggested retention periods:-

Many of the retention periods set out below are carried forward unchanged from the previous circular on this topic WHC(89)60 and its predecessors. The periods recommended thus reflect long-standing good practice, and established thinking about the usefulness of the records for business and periods during which the records support necessary accountability. In the case of some records, especially ledgers, some contracts and certain financial records, statutory authorities apply; where this is known to be the case, the relevant legislation or regulation is mentioned in the Notes column of the table.

Comments and suggestions on the retention schedule should be addressed to:-

The Departmental Record Officer
Department of Health
Premier Buildings
Brunswick Street
Nelson
Lancashire BB9 0HU
Tel: 0113 25 45000/ 47311

Record Type/Sub Type	Retention Period (Years)	Notes
Abortion - Certificate A (Form HSA1) and Certificate B (Emergency Abortion)	3	Abortion Regulations 1991, Statutory Instrument No. 499
Accident Forms		See Litigation dossiers
Accident Register (RIDDOR)	3	Reporting of injuries, diseases and dangerous occurrences regulations, reg. 7; Social Security (Claims and Payments) Regulations, reg. 25
Accident & Emergency Registers		Local decisions should be made with regard to the permanent preservation of these records, in consultation with relevant health professionals and places of deposit.
Accounts - Annual (Final - one set only)	Permanent	
Accounts – Cost	3	
Accounts - Working Papers	3	
Accounts - Minor records (pass books; paying-in slips; cheque counterfoils; cancelled/discharged cheques (other than cheques bearing printed receipts - See Receipts); accounts of petty cash expenditure; travelling and subsistence accounts; minor vouchers; duplicate receipt books; income records; laundry lists and receipts.)	2	From completion of the audit
Admission books		Local decisions should be made with regard to the permanent preservation of these records, in consultation with relevant health professionals and places of deposit.
Advance Letters	6	
Advice Notes	1.5	
Agendas		See Meeting Papers
Agreements		See Contracts
Approval Files (Contracts)	*	
Approved Suppliers Lists	11	Consumer Protection Act 1987
Audit Records - original documents	2	From completion of the audit
Audit Reports (including Management Letters, VFM reports and system/final accounts memorandum)	2	After formal clearance by Statutory Auditor

Record Type/Sub Type	Retention Period (Years)	Notes
Bank Statements	2	From completion of the audits
Benefactions	*	
Bills, receipts and cleared cheques	6	
Birth registers (i.e. register of births kept by the hospital)		Local decisions should be made with regard to the permanent preservation of these records, in consultation with relevant health professionals and places of deposit.
Budgets	2	From completion of the audit
Buildings and engineering works, inclusive of major projects abandoned or deferred - key records, (e.g. Final accounts, surveys, site plans, bills of quantities)	Permanent	
Buildings and engineering works, inclusive of major projects abandoned or deferred - town and country planning matters and all formal contract documents (e.g. Executed agreements, conditions of contract, specifications, "as built" record drawings and documents on the appointment and conditions of engagement of private buildings and engineering consultants.	*	The general principle to be followed in regard to these records is that they should be preserved for the life of the buildings and installations to which they refer.
Buildings - papers relating to occupation (but not Health & Safety information)	3	After occupation ceases. Construction Design Management Regulations 1994
Capital Charges Data	2	From completion of the audit
Capital Paid Invoices		See Invoices
Cash Books	6	The Limitation Act, 1980
Cash Sheets	6	The Limitation Act, 1980
Complaints		See Litigation dossiers

Record Type/Sub Type	Retention Period (Years)	Notes
Computerised records		The recommended minimum retention periods apply to both paper and computerised records, though extra care needs to be taken to prevent corruption or deterioration of the data. Re-recording/migration of data will also need to be considered as equipment and software become obsolete. For guidance, See the Public Record Office guidance, <u>Management and Appraisal of Electronic Records</u> (1998).
Contracts - non sealed (property) on termination	6	The Limitation Act, 1980
Contracts - non sealed (other) on termination	6	The Limitation Act, 1980
Contracts - sealed	*	Contracts under seal and associated records should be kept for a minimum of 15 years
Cost accounts		See Accounts
Creditor Payments	3	
CVs for non-executive directors (successful)	5	Following term of office
CVs for non-executive directors (unsuccessful applicants)	2	Following term of office
Day Files	0.5	
Death registers (i.e. register of deaths kept by the hospital)		Local decisions should be made with regard to the permanent preservation of these records, in consultation with relevant health professionals and places of deposit.
Debtors' records - cleared	2	From completion of the audit
Debtors' records - uncleared	6	
Deeds of Title	Permanent	
Delivery Notes	1.5	
Demand Notes	6	
Diaries - office - on completion	1	
Discharge books (i.e. register of those discharged by the hospital)		Local decisions should be made with regard to the permanent preservation of these records, in consultation with relevant health professionals and places of deposit.
Drawings		See Plans and Buildings

Record Type/Sub Type	Retention Period (Years)	Notes
Engineering works		See Plans and Buildings
Equipment		See Products - Liability
Establishment records - major (e.g. Personal files, letters of appointment, contracts references & related correspondence)	6	Keep for 6 years after subject of file leaves service, or until subject's 70th birthday, whichever is the later. Only the summary needs to be kept to age 70; remainder of file can be destroyed 6 years after subject leaves service.
Establishment records - minor (e.g. attendance books, annual leave records, duty rosters, clock cards, timesheets)	2	
Estimates: including supporting calculations and statistics	3	
Expense Claims	2	From completion of the audit
Financial records	See under individual headings. However, once the period of retention for audit purposes is complete (2 years from completion of the audit), documents not required for permanent preservation may be destroyed provided a properly compiled microfilm record is retained for the remainder of the prescribed period, embodying a suitable certificate by the treasurer as to its accuracy and completeness. This does not apply to forms SD55 (ADP) and SD 55J	
Forms – Surgical Appliances - AP1, 2, 3, and 4	2	From completion of the audit
Forms – Superannuation - SD55 (ADP) and SD55J (copies)	10	Originals are sent to NHS Pensions Agency
Funding Data	6	
FWH - Personal Record of Hours Actually Worked	0.5	
Health records - personal/patients		See Hospital patient case records
History of Authority or Predecessors, its organisation and procedures	*	
History of Hospitals	*	

<p>Hospital patient case records (individual)</p> <p>N.B. This retention schedule does not cover GP medical records. Guidance on their retention can be found in HSC 1998/217 and ECL 2/68, both of which remain current at the time of issue of this circular.</p> <p>Any reference to " conclusion of treatment" in the following recommended minimum retention periods, should be taken to include all follow-up checks and action in connection with the treatment.</p>	<p>The retention periods which are listed below reflect minimum requirements of clinical need. Personal health records may be required as evidence in legal actions; the minimum retention periods take account of this requirement. It is not necessary to keep every piece of paper received in connection with patients. NHS Trusts and Health Authorities should determine, in consultation with their health professionals, which elements should be considered as a permanent part of the record, and which should be transient and discarded as their value ceases.</p> <p>Before any destruction takes place, ensure that</p> <p>(a) there is consultation with the relevant health professional body or records committee and actions clearly minuted;</p> <p>(b) any other local clinical need is considered; and</p> <p>(c) the value of the records for long-term research purposes has been assessed, in consultation with an appropriate place of deposit.</p>
<p>- pre-1948 records</p>	<p>Should by now have been transferred for permanent preservation or destroyed. Any pre-1948 records which still exist should be considered for permanent preservation, undergoing an appraisal procedure as described in the box above.</p>
<p>- Children and young people</p>	<p>Until the patient's 25th birthday, or 26th if young person was 17 at conclusion of treatment; or 8 years after patient's death if death occurred before 18th birthday.</p>
<p>- Donor records</p>	<p>11 years post transplantation. Committee on Microbiological Safety of Blood and Tissues for Transplantation(MSBT); guidance issued in 1996.</p>
<p>- Maternity (all obstetric and midwifery records including those of episodes of maternity care that end in stillbirth or where the child later dies)</p>	<p>25 years - see Appendix B2 for additional guidance on retention and storage of maternity records previously issued with WHC(94)23</p>
<p>- Mentally disordered persons (within the meaning of the Mental Health Act 1983)</p>	<p>20 years after no further treatment considered necessary; or 8 years after the patient's death if patient died while still receiving treatment.</p>

- Oncology	8 years after conclusion of treatment, especially when surgery only involved. Consideration may wish to be given to BFCO(96)3 issued by the Royal College of Radiologists which recommends permanent retention on a computer database when patients have been given chemotherapy and radiotherapy.
- Patients involved in clinical trials	15 years after conclusion of treatment. EEC Note for Guidance: Good Clinical Practice for Trials on Medicinal Products in the European Community, section 3.17 (see – Pharmacology & Toxicology 1990, 67, 361-372.)
- General (not covered above)	8 years after conclusion of treatment.

Notes on preservation of patient records for historical purposes

1. In the light of the latest trends in medical and historical research, it may be appropriate to select some of these records for permanent preservation. Selection should be performed in consultation with health professionals, and archivists from an appropriate place of deposit. If records are to be sampled, specialist advice should be sought from the same health professionals and archivists. If a NHS Trust or Health Authority has taken on a leading role in the development of specialised treatments, then the patient records relating to these treatments may be especially worthy of permanent preservation.
2. If a whole run of patient records is not considered worthy of permanent preservation but nevertheless contains some material of research value, then the option of presenting these records to local record offices and other institutions under S.3(6) of the Public Records Act 1958 should be considered. Advice on the presentation procedure may be obtained from the PRO's Archive Inspection Services.
3. If a whole run of patient records is considered worthy of permanent preservation but there is a lack of space in the relevant place of deposit to store these records, it may be appropriate to make a microfilm copy and then destroy the paper originals. Microfilms should be produced in accordance with the British and International Standard BS ISO 6199: 1991, copies of which can be purchased from the British Standards Institute.

Notes on the destruction of confidential patient records

1. Destruction of confidential records must ensure that their confidentiality is fully maintained. Normally destruction should be by incineration or shredding. Where this service is provided by a contractor it is the responsibility of the NHS Trust or Health Authority to satisfy itself that the methods used throughout all stages including transport to the destruction site provide satisfactory safeguards against accidental loss or disclosure.

Record Type/Sub Type	Retention Period (Years)	Notes
Hospital Services	10	
Indexes	Lifetime	Registry lists may describe public records marked for permanent preservation, or contain the record of management of public records. They should in these cases be retained permanently. File-lists and document lists, where public records or their management are not covered, should be retained until they have no further administrative use.
Income and expenditure journals	6	
Industrial Relations (not routine staff matters)	*	
Inspection Reports - e.g. Boilers, lifts etc.	Lifetime	Normally retain for the lifetime of an installation. However, it is necessary to assess whether obligations incurred during the lifetime may not be invoked until afterwards, in which case a judgement must be made. If there is any measurable risk of a liability in respect of installations beyond their operational lives, records of this kind should be retained indefinitely.
Inventories (not in current use) of items having a life of less than 5 years	1.5	
Invoices	6	The Limitation Act, 1980
Job Advertisements	1	
Job Applications (following termination of employment)	3	
Job Descriptions (following termination of employment)	3	
Korner Records		See Patient Activity Data

Record Type/Sub Type	Retention Period (Years)	Notes
Laboratory records		Local decisions should be made with regard to the permanent preservation of these records, in consultation with relevant health professionals and places of deposit.
Land Surveys/Registers	*	
Laundry Lists and Receipts	2	From completion of the audit
Leases	*	
Leavers Dossiers (provided summary retained)	6	
Ledgers	6	The Limitation Act, 1980
Letters of appointment		See Establishment records - major
Litigation Dossiers (complaints including accident reports)	10	Where a legal action has been commenced, keep as advised by legal representatives.
Maintenance contracts - routine		See contracts
Manuals - operating	Lifetime	See Inspection reports
Manuals - policy and procedure	*	
Maps	*	
Maternity records		See Hospital patient case records
Medical records		See Hospital patient case records
Meeting Papers - committees, sub-committees, predecessors (Master copies)	Permanent	
Midwifery records		See Hospital patient case records - Maternity records
Minutes of the NHS Trust or Health Authority, major committees and sub-committees - signed	Permanent	

Record Type/Sub Type	Retention Period (Years)	Notes
Minutes - reference copies	1	
Mortgage documents (acquisition, transfer and disposal)	Permanent	
Nominal Rolls	6 (max.)	As a general rule, it may be appropriate for only the current nominal roll and the immediately preceding roll to be kept.
Non-Exchequer funds records	Although technically exempt from the Public Records Acts, it would be appropriate for authorities to treat these records as if they were not so exempt. See Income and expenditure journals, etc.	
Nurses Training Records	30	
Obstetric records		See Hospital patient case records - Maternity records
Operating Theatre registers		Local decisions should be made with regard to the permanent preservation of these records, in consultation with relevant health professionals and places of deposit.
Patient Activity Data	3	
Pay Roll - full-time medical staff	6	For superannuation purposes authorities may wish to retain such records until the subject reaches benefit age.
Pay Roll - other staff	6	
PAYE Records	6	
Personnel Files		See Establishment records - major
Pharmacy records		Local decisions should be made with regard to the permanent preservation of these records, in consultation with relevant health professionals and places of deposit.

Record Type/Sub Type	Retention Period (Years)	Notes
Photographs	*	
Plans – Building (As Built)	*	
Plans – Building (Detailed)	Lifetime	See Inspection reports
Plans – Engineering	Lifetime	See Inspection reports
Press Cuttings	1	
Private patient records admitted under section 58 of the National Health Service Act 1977 or section 5 of the National Health Service Act 1946.	Although technically exempt from the Public Records Acts, it would be appropriate for authorities to treat such records as if they were not so exempt. See Hospital patient case records.	
Products - Liability	11	Consumer Protection Act 1987
Project Files (over £100,000) on termination - including abandoned or deferred projects	*	
Project Files (less than £100,000) on termination	6	
Project Team Files - summary retained	3	
Property Acquisitions Dossiers	Permanent	
Property Disposal Dossiers	Permanent	
Quality Assurance Records	12	
Receipt for registered and recorded delivery mail	1.5	
Receipts	6	The Limitation Act, 1980
Record of custody and transfer of keys	1.5	
Reports (major)	Permanent	
Requisitions	1.5	
Research and Development (Scientific, Technological and Medical)	*	

Record Type/Sub Type	Retention Period (Years)	Notes
Salaries		See Wages
SD55(ADP) and SD55J		See Forms
Serious Incident Files	*	
Site Files		See Contracts
Software licences	Lifetime	
Specifications	6	The Limitation Act, 1980
Staff Records		See Establishment records - major
Stock Control Reports	1.5	
Stores Records - major (stores ledgers etc.)	6	
Stores Records - minor (requisitions, issue notes, transfer vouchers, goods received books etc.)	1.5	
Structure Plans (LA's)	*	
Study Leave Applications	1.5	
Subject Files	*	
Superannuation Accounts	10	
Superannuation Registers	10	
Supplies records - minor (e.g. invitations to tender and inadmissible tenders, routine papers relating to catering and demands for furniture, equipment, stationery and other supplies)	1.5	
Surgical Appliances - Forms		See Forms

Record Type/Sub Type	Retention Period (Years)	Notes
Surveys - building and engineering works	*	
Tax Forms	6	
Tenders (successful)		See Contracts
Tenders (unsuccessful)	6	The Limitation Act, 1980
Time Sheets		See Establishment Records - minor
Title Deeds		See Deeds of Title
Trusts Administered by RHAs - Terms of	Permanent	
Trust documents without permanent relevance	6	
VAT Records	6	In some instances, a shorter period may be allowed but agreement must be obtained from Customs & Excise - see Appendix C for contact details
Wages/Salary Records	10	For superannuation purposes authorities may wish to retain such records until the subject reaches benefit age.
Ward registers		Local decisions should be made with regard to the permanent preservation of these records, in consultation with relevant health professionals and places of deposit.
X-ray films (including other image formats for all imaging modalities)		Local decisions should be made with regard to the preservation of these records, which are considered to be of transitory nature
X-ray registers		Local decisions should be made with regard to the permanent preservation of these records, in consultation with relevant health professionals and places of deposit.

Record Type/Sub Type	Retention Period (Years)	Notes
X-ray reports (including reports for all imaging modalities)		To be considered as a permanent part of the patient record - See Hospital patient case records

B2 - Principles to be used in determining policy regarding the retention and storage of essential maternity records.

**British Paediatric Association
Royal College of Midwives
Royal College of Obstetricians and Gynaecologists
and the
United Kingdom Central Council for Nursing, Midwifery and Health
Visiting**

Joint Position on the Retention of Maternity Records

Principles to be used in determining policy regarding the retention and storage of essential maternity records.

1. All essential maternity records should be retained. 'Essential' maternity records mean those records relating to the care of a mother and baby during pregnancy, labour and the puerperium.
2. Records that should be retained are those which will, or may, be necessary for further professional use. 'Professional use' means necessary to the care to be given to the woman during her reproductive life, and/or her baby, or necessary for any investigation that may ensue under the Congenital Disabilities (Civil Liabilities) Act 1976, or any other litigation related to the care of the woman and/or her baby.
3. Local level decision making with administrators on behalf of the health authority must include proper professional representation when agreeing policy about essential maternity records. 'Proper professional' in this context should mean a senior medical practitioner(s) concerned in the direct clinical provision of maternity and neonatal services and a senior practising midwife.
4. Local policy should clearly specify particular records to be retained AND include detail regarding transfer of records, and needs for the final collation of the records for storage. For example, the necessity for inclusion of community midwifery records.
5. Policy should also determine details of the mechanisms for return and collation for storage, of those records which are held by mothers themselves, during pregnancy and the puerperium.

List of maternity records to be retained

6. Maternity Records retained should include the following:-
 - 6.1 documents recording booking data and pre-pregnancy records where appropriate;
 - 6.2 documentation recording subsequent antenatal visits and examinations;
 - 6.3 antenatal in-patient records;

- 6.4 clinical test results including ultrasonic scans, alpha-feto protein and chorionic villus sampling;
- 6.5 blood test reports;
- 6.6 all intrapartum records to include, initial assessment, partograph and associated records including cardiotocographs;
- 6.7 drug prescription and administration records;
- 6.8 post-natal records including documents relating to the care of mother and baby, in both hospital and community settings.

B3 - List of approved places of deposit for public records

PUBLIC RECORD OFFICE: LIST OF APPROVED PLACES OF DEPOSIT

Addenbrooke's Hospital Archives Office

c/o Administration, Board Room Suite, Addenbrooke's Hospital, Hills Road, Cambridge, England, CB2 2QQ

Head of Repository: P RUNDLE, Honorary Archivist
Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01223 245 151 Ext **GRO-C**

Fax No:

Anglesey County Record Office

Shirehall, Llangefni, Ynys Mon, Wales, LL77 7TW

Head of Repository: Anne VENABLES, Archivist
Phone No: 01248 752 563

Fax No:

General enquiries: Phone No: 01248 752 080

Fax No:

Barnet Archives

Hendon Catholic Social Centre, Chapel Walk, Egerton Gardens, London, England, NW4 4BE

Head of Repository: J CORDEN, Archivist
Phone No: 0181 202 5625 Ext **GRO-C**

Fax No: As Archive

General enquiries: Phone No: 0181 359 2876

Fax No: 0181 359 2885

Barnsley Archive Service

Central Library, Shambles Street, Barnsley, South Yorkshire, England, S70 2JF

Head of Repository: L WHITWORTH-COX, Archives and Local Studies Officer
Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01226 773950773 938
E-mail address: Archives@barnsley.ac.uk89

Fax No: 01226 773955

Bath City Record Office

Guildhall, Bath, Avon, England, BA1 5AW

Head of Repository: C JOHNSTON, City Archivist
Phone No: 01225 477 000 Ext **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01225 477421

Fax No:

Bedfordshire Record Office

County Hall, Bedford, Bedfordshire, England, MK42 9AP

Head of Repository: Chris PICKFORD, County Archivist
Phone No: 01234 228 833 Ext **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01234 228833/363222

Fax No: 01234 228 854

Berkshire Record Office

Shire Hall, Shinfield Park, Reading, Berkshire, England, RG2 9XD

Head of Repository: Peter DURRANT, County Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 0118 923 3182

Fax No: 0118 923 3181

E-mail address: Record.Office@berkshire.gov.uk2

Berwick upon Tweed Record Office

Council Offices, Wallace Green, Berwick upon Tweed, England, TD15 1ED

Head of Repository: LA BANKIER, Borough Archivist

Phone No: 01289 330 044 Ext **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01289 330 044 Ext 275

Fax No: 01289 330 540

E-mail address: Archives@berwickc.demon.co.uk83

Bethlem Royal Hospital Archives & Museum Service

The Bethlem Royal Hospital, Monks Orchard Road, Beckenham, Kent, England, BR3 3BX

Head of Repository: Patricia ALLDERIDGE, Archivist & Curator

Phone No: **GRO-C**

Fax No: As Archive

General enquiries: Phone No: 0181 776 4307

Fax No: 0181 777 1668

Bexley Libraries and Museums Department

Hall Place, Bourne Road, Bexley, England, DA5 1PQ

Head of Repository: Stuart BLIGH, Local Studies Manager

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01322 526 574 Ext 217/8

Fax No: 01322 522 921

E-mail address: Bexlibs@dial.pipex.com208

Birmingham Central Library

Archives division, Chamberlain Square, Birmingham, West Midlands, England, B3 3HQ

Head of Repository: NW KINGSLEY, Head of Local Studies & History

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 0121 303 4217

Fax No: 0121 212 9397

Bolton Archive & Local Studies Service

Central Library, Civic Centre, Le Mans Crescent, Bolton, England, BL1 1SE

Head of Repository: T CAMPBELL, Archivist

Phone No: 01204 22311 Ext **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01204 22311 Ext 2179

Fax No: 01204 363 224

Borthwick Institute of Historical Research

St Anthony's Hall, Peasholme Green, York, North Yorkshire, England, YO1 2PW

Head of Repository: D SMITH, Director

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01904 642 315

Fax No: 01904 633284

Boston Municipal Buildings

West Street, Boston, Lincolnshire, England, PE21 8QR

Head of Repository: Director of Administration & Legal Services

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01205 357 400

Fax No: 01205 364 604

Brent Archives

Cricklewood Library, 152 Olive Road, London, England, NW2 6UY

Head of Repository: Finbarr WHOOLEY, Library Manager

Phone No:

Fax No: **GRO-C**

General enquiries: Phone No: 0181 937 3540

Fax No: 0181 450 5211

Bristol City Record Office

B Bond Warehouse, Smeaton Road, Bristol, England, BS1 6XN

Head of Repository: John WILLIAMS, City Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 0117 922 5692

Fax No: 0117 922 4236

Bromley Archives Section

Central Library, High Street Bromley, London, England, BR1 1EX

Head of Repository: Elizabeth SILVERTHORNE, Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

E-mail:

General enquiries: Phone No: 0181 460 9955 Ext 261/2

Fax No: 0181 313 0475

E-mail address: Bromley.Cen.Lib@cityscape.co.uk

Buckinghamshire Record Office

County Offices, Aylesbury, Buckinghamshire, England, HP20 1UA

Head of Repository: Roger BETTERIDGE, County Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01296 382 587

Fax No: 01296 382 405

Burton Library

Riverside, High Street, Burton on Trent, Staffordshire, England, DE14 1AH

Head of Repository: Martin SANDERS, Archivist in Charge

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01283 239556

Fax No: 01283 239571

Bury Archive Service

1st Floor, Derby Hall Annex, Edwin Street, Bury, England, BL9 0AS

Head of Repository: Kevin MULLEY, Archivist

Phone No: **GRO-C**

Fax No:

General enquiries: Phone No: 0161 797 6697

Fax No: 0161 253 5915

E-mail address: information@bury.gov.uk

Caernarfon Record Office

Gwynedd Council Offices, Shirehall, Caernarfon, Gwynedd, Wales, LL55 1SH

Head of Repository: Ann RHYDDERCH, Principal Archivist & Heritage Officer

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01286 679 095

Fax No: 01286 679 637

E-mail address: AnnRhyerch@GRO-C

Cambridgeshire Record Office

Grammar School Walk, Huntingdon, Cambridgeshire, England, PE18 6LF

Head of Repository: Alan AKEROYD, Senior Archivist

Phone No: **GRO-C**

Fax No: 01480 459 563

General enquiries: Phone No: 01480 425 842

Fax No: 01480 459 563

E-mail address: county.records.hunts@camcnty.g54

Cambridgeshire Record Office

Shire Hall, Castle Hill, Cambridge, Cambridgeshire, England, CB3 0AP

Head of Repository: Elizabeth STAZICKER, County Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01223 717 281

Fax No: 01223 717 201

E-mail address: county.records.Cambridge@camcn53

Camden Local Studies and Archives Centre

Holborn Library, 32 - 38 Theobalds Road, London, England, WC1X 8PA

Head of Repository: RG KNIGHT, Local Studies Manager

Phone No: **GRO-C**

Fax No: As Archive

General enquiries: Phone No: 0171 413 6342

Fax No: 0171 413 6284

Carmarthenshire Archive Service

County Hall, Carmarthen, Wales, SA31 1JP

Head of Repository: John DAVIES, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01267 224 184

Fax No: 01267 230 848

Centre for Kentish Studies

County Hall, Maidstone, Kent, England, ME14 1XQ

Head of Repository: Patricia ROWSBY, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01622 694 363

Fax No: 01622 694 379

Ceredigion Archives

County Offices, Marine Terrace, Aberystwyth, Cardiganshire, Wales, SY23 2DE

Head of Repository: Helen PALMER, Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01970 633 697/8

Fax No:

Cheshire Record Office

Duke Street, Chester, Cheshire, England, CH1 1RL

Head of Repository: J PEPLER, Principal Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01244 602 574

Fax No: 01244 603 812

E-mail address: recordoffice@cheshire.cc.btx4055

Chester City Record Office

Town Hall, Chester, England, CH1 2HJ

Head of Repository: Jacqui HALEWOOD, Public Services Co-ordinator

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01244 402110

Fax No: 01244 312243

E-mail address: j.gregson@

Colchester and North East Essex Branch

Stanwell House, Stanwell Street, Colchester, Essex, England, CO2 7DL

Head of Repository: P COVERLEY, Branch Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01206 572099

Fax No: 01206 574541

Cornwall Record Office

County Hall, Truro, Cornwall, England, TR1 3AY

Head of Repository: Christine NORTH, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01872 73698/323127

Fax No: 01872 270340

Corporation of London Records Office

PO Box 270, Guildhall, London, England, EC2P 2EJ

Head of Repository: James SEWELL, City Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0171 332 1862/3

Fax No: 0171 600 3384

E-mail address: Manuscripts.Guildhall@ms.corpo94

Coventry City Record Office

Mandela House, Bayley Lane, Coventry, West Midlands, England, CV1 5RG

Head of Repository: Roger VAUGHAN, City Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01203 832 418

Fax No: 01203832421

Croydon Archives Service

Central Library, Katharine Street, Croydon, Surrey, England, CR9 1ET

Head of Repository: Oliver HARRIS, Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0181 760 5400 Ext 1112

Fax No: 0181 253 1012

E-mail address: dparr@

Cumbria Record Office

140 Duke Street, Barrow-in-Furness, Cumbria, England, LA14 1XW

Head of Repository: A JONES, Area Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01229 831 269

Fax No: 01229 870 234

Cumbria Record Office

County Offices, Kendal, Cumbria, England, LA9 4RQ

Head of Repository: Anne ROWE, Assistant County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01539 773 540

Fax No: 01539 773 439

Cumbria Record Office

Scotch Street, Whitehaven, England, CA28 7BJ

Head of Repository: Jim GRISENTHWAITE, County Archivist

Phone No:

Fax No:

E-mail:

General enquiries: Phone No: 01946 852 920

Fax No: 01946 852 919

E-mail address: whrec@

Cumbria Record Office

The Castle, Carlisle, Cumbria, England, CA3 8UR

Head of Repository: Jim GRISENTHWAITE, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01228 607 285

Fax No: 01228 607 299

Denbighshire Record Office

Clwyd Street, Ruthin, Denbighshire, Wales, LL15 1HP

Head of Repository: Kevin MATTHIAS, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01824 703 077

Fax No: 01824 705 180

Derbyshire Record Office (Derby)

County Council, 29 St Mary's Gate, Derby, Derbyshire, England, DE1 2NP

Head of Repository: Margaret O'SULLIVAN, County and Diocesan Archivist

Phone No: 01629 580 000 Ext

Fax No:

General enquiries: Phone No:

Fax No:

Derbyshire Record Office (LSL)

Education Department, County Hall, Matlock, Derbyshire, England, DE4 3AG

Head of Repository: L OWEN, Local Studies Librarian

Phone No:

Fax No:

General enquiries: Phone No: 01629 580 000 Ext 35201

Fax No: 01629 585347

Derbyshire Record Office (Matlock)

Education Department, County Hall, Matlock, Derbyshire, England, DE4 3AG

Head of Repository: Margaret O'SULLIVAN, County and Diocesan Archivist

Phone No: 01629 580 000 Ext

Fax No:

E-mail: **GRO-C**

General enquiries: Phone No: 01629 35207

Fax No: 01629 580 350

Devon Record Office

County Offices, Castle Street, Exeter, Devon, England, EX4 3PQ

Head of Repository: John DRAISEY, County Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01392 384 253

Fax No: 01392 384 256

Doncaster Archives

King Edward Road, Balby, Doncaster, South Yorkshire, England, DN4 0NA

Head of Repository: B BARBER, Principal Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01302 859 811

Fax No:

Dorset Record Office

Bridport Road, Dorchester, Dorset, England, DT1 1RP

Head of Repository: H JAKES, County Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01305 250 550

Fax No: 01305 257184

E-mail address: archives@dorset-cc.gov.uk

Dudley Archives & Local History Service

Mount Pleasant Street, Coseley, Dudley, West Midlands, England, WV14 9JR

Head of Repository: K ATKINS, Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01384 812770

Fax No: 01384 812770

E-mail address: archives@vin1.dudley.gov.uk

Durham Record Office

County Hall, Durham, England, DH1 5UL

Head of Repository: Jennifer GILL, County Archivist

Phone No: **GRO-C**

Fax No:

General enquiries: Phone No: 0191 383 3253/3474

Fax No: 0191 383 4500

East Riding Record Office

County Hall, Beverley, Humberside, England, HU17 9BA

Head of Repository: K HOLT, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01482 885 007

Fax No: 01482 885 463

East Sussex Record Office

The Maltings, Castle Precincts, Lewes, East Sussex, England, BN7 1YT

Head of Repository: C DAVEY, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01273482349

Fax No: 01273 482 341

Essex Record Office

County Hall, Chelmsford, Essex, England, CM1 1LX

Head of Repository: Ken HALL, County & Hon. Diocesan Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01245 430 067

Fax No: 01245 430085

E-mail address: ero.enquiry@essexcc.gov.uk68

Essex Record Office

Southend Branch, Central Library, Victoria Avenue, Southend-on-Sea, England, SS2 6EX

Head of Repository: Jennifer BUTLER, Branch Archivist

Phone No: 01702 612 621 Ext

Fax No: As Archive

General enquiries: Phone No: 01702464278

Fax No: 01702 464253

Flintshire Record Office

The Old Rectory, Hawarden, Flintshire, Wales, CH5 3NR

Head of Repository: Rowland WILLIAMS, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01244 532 364

Fax No: 01244 538 344

Gateshead Libraries & Arts Service

Central Library, Prince Consort Road, Gateshead, Tyne & Wear, England, NE8 4LN

Head of Repository: E CARNAFFIN, Local Studies Librarian

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0191 477 3478

Fax No: 0191 477 7454

E-mail address: local@gateslib.demon.co.uk111

Glamorgan Record Office

County Hall, Cathays Park, Cardiff, Wales, CF1 3NE

Head of Repository: Susan EDWARDS, Acting Glamorgan Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 029 20 780 282

Fax No: 029 20 780 284

Gloucestershire Record Office

Clarence Row, Alvin Street, Gloucester, Gloucestershire, England, GL1 3DW

Head of Repository: D SMITH, County & Diocesan Archivist

Phone No: **GRO-C**

Fax No: 01452 521 468

General enquiries: Phone No: 01452 425 295

Fax No: 01452 426 378

E-mail address: records@gloscc.gov.uk70

Greater Manchester County Record Office

56 Marshall Street, New Cross, Manchester, England, M4 5FU

Head of Repository: Maureen PATCH, County Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 0161 832 5284

Fax No: 0161 839 3808

E-mail address: archives@gmcro.u-net.com48

Greenwich Local History & Archives Library

'Woodlands', 90 Mycenae Road, Blackheath, London, England, SE3 7SE

Head of Repository: Julian WATSON, Local Studies Librarian

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0181 858 4631

Fax No: 0181 293 4721

Guildford Muniment Room

Castle Arch, Guildford, Surrey, England, GU1 3SX

Head of Repository: M MACKEY, Archivist-in-Charge

Phone No: **GRO-C**

Fax No:

General enquiries: Phone No: 01483 573 942

Fax No:

Guildhall Library

Aldermanbury, London, England, EC2P 2EJ

Head of Repository: Stephen FREETH, Keeper of Manuscripts

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0171 332 1862/3

Fax No: 0171 600 3384

E-mail address: Manuscripts.Guildhall@ms.corpo95

Gwent Record Office

County Hall, Cwmbran, Gwent, Wales, NP4 2XH

Head of Repository: David RIMMER, County Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01633 644 886

Fax No: 01633 648 382

E-mail address: 113057.2173@compuserve.com10

Hackney Archives Department

Rose Lipman Library, De Beauvoir Road, London, England, N1 5SQ

Head of Repository: David MANDER, Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0171 241 2886

Fax No: 0171 241 6688

E-mail address: archives@hackney.gov.uk96

Hammersmith and Fulham Archives

The Lilla Huset, 191 Talgarth Road, London, England, W6 8BJ

Head of Repository: Jane KIMBER, Borough Archivist

Phone No: 0181 748 3020 x**GRO-C**

Fax No: As Archive

General enquiries: Phone No: 0181 741 5159

Fax No: 0181 741 4882

Hampshire Record Office

Sussex Street, Winchester, England, SO23 8TH

Head of Repository: Rosemary DUNHILL, County Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01962 846 154

Fax No: 01962 878 681

E-mail address: sadeax@**GRO-C**

Hereford Record Office

The Old Barracks, Harold Street, Hereford, England, HR1 2QX

Head of Repository: D HUBBARD, Assistant County Archivist

Phone No: **GRO-C**

Fax No:

General enquiries: Phone No: 01432 265 441

Fax No: 01432370248

Hertfordshire Central Library

St Albans, Hertfordshire, England,

Head of Repository: John COX, Honorary Archivist

Phone No: **GRO-C**

Fax No:

General enquiries: Phone No:

Fax No:

Hertfordshire Record Office

County Hall, Hertford, Hertfordshire, England, SG13 8DE

Head of Repository: Kate THOMPSON, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01992 555 105

Fax No: 01992 555113

E-mail address: iris.white@

Hull City Record Office

79 Lowgate, Kingston upon Hull, Humberside, England, HU1 1HN

Head of Repository: Geoffrey OXLEY, Archivist

Phone No:

Fax No: As Archive

General enquiries: Phone No: 01482 595 102/615110

Fax No: 01482 613091

Hythe Town Archives

Town Council Offices, Stade Street, Hythe, Kent, England, CT21 6BG

Head of Repository: M SHAW, Hythe Town Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01303 266 152

Fax No:

Isle of Wight County Record Office

26 Hillside, Newport, Isle of Wight, England, PO30 2EB

Head of Repository: Richard SMOUT, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01983 823 820/1

Fax No: 01983 823820

King's Lynn Borough Archives

The Old Gaol House, Saturday Market Place, King's Lynn, Norfolk, England, PE30 5DQ

Head of Repository: Susan MADDOCK, Senior Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01553 763 044

Fax No: 01553 777 281

Kingston Museum & Heritage Service

North Kingston Centre, Richmond Road, Kingston upon Thames, Surrey, England, KT2 5PE

Head of Repository: Jill LAMB, Assistant Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0181 547 6753

Fax No: 0181 547 6747

Knowsley Archives

Knowsley Central Library, Derby Road, Huyton, Merseyside, England, L36 9UJ

Head of Repository: Eileen HUME, Archivist
Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0151 443 3740

Fax No: 0151 489 9405

Lambeth Archives Department

Minet Library, 52 Knatchbull Road, London, England, SE5 9QY

Head of Repository: Jon NEWMAN, Archivist
Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0171 926 6076

Fax No: 0171 926 6080

Lancashire Record Office

Bow Lane, Preston, England, PR1 2RE

Head of Repository: Bruce JACKSON, County Archivist
Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01772 263 039/254 868
E-mail address: lancsrecords@treas.lancscc.gov78

Fax No: 01772 263 050

Leicestershire Record Office

Long Street, Wigston Magna, Leicester, England, LE18 2AH

Head of Repository: Carl HARRISON, County Archivist
Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 0116 257 1080

Fax No: 0116 257 1120

Lewisham Local Studies Centre

Lewisham Library, 199-201 Lewisham High Street, London, England, SE13 6LG

Head of Repository: Jean WAIT, Archivist
Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0181 297 0682
E-mail address: local.studies@lewisham.gov.uk122

Fax No: 0181 297 1169

Lichfield Joint Record Office

Lichfield Library, The Friary, Lichfield, Staffordshire, England, WS13 6QG

Head of Repository: Martin SANDERS, Archivist in Charge
Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01543 510 720

Fax No: 01543 411 138

Lincolnshire Archives

St Rumbold Street, Lincoln, England, LN2 5AB

Head of Repository: Gershom KNIGHT, County Archivist
Phone No: **GRO-C**

Fax No: 01522 530 047

General enquiries: Phone No: 01522 526 204
E-mail address: archives@lincsdoc.demon.co.uk80

Fax No: 01522 530 047

Liverpool City Record Office

William Brown Street, Liverpool, England, L3 8EW

Head of Repository: David STOKER, Principal Archives Officer

Phone No:

Fax No: As Archive

E-mail: central@lvpublib.demon.

General enquiries: Phone No: 0151 225 5417
E-mail address: RO@lvupublib.demon.co.uk99

Fax No:

London Metropolitan Archives

40 Northampton Road, London, England, EC1R 0HB

Head of Repository: Deborah JENKINS, Head Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0171 332 3820
E-mail address: LMA@ms.corpoflondon.gov.uk196

Fax No: 0171 833 9136

Manchester City Archives Department

Local Studies Unit, Central Library, St Peter's Square, Manchester, England, M2 5PD

Head of Repository: Ann HEATH, Principal Archivist

Phone No:

Fax No:

General enquiries: Phone No: 0161 234 1980/1979
E-mail address: archives@mcrl.poptel.org.uk41

Fax No: 0161 234 1927

Merioneth Archives

Cae Penarlag, Dolgellau, Gwynedd, Wales, LL40 2YB

Head of Repository: Einion Wyn, THOMAS, Area Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01341 422 341 Ext 4442/4444

Fax No: 01341 423 984

Merseyside Record Office

4th Floor, Cunard Buildings, Pier Head, Liverpool, England, L3 1EG

Head of Repository: David STOKER, Archivist-in-charge

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0151 236 8038

Fax No: 0151 236 5827

National Library of Wales

Department of Manuscripts & Records, Aberystwyth, Dyfed, Wales, SY23 3BU

Head of Repository: Gwyn JENKINS, Keeper of Manuscripts & Records

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01970 623 816
E-mail address: ymh.lc@llgc.org.uk133

Fax No: 01970 625 713

National Museums & Galleries on Merseyside

c/o Maritime Archives & Library, Merseyside Maritime Museum, Albert Dock, Liverpool, England,
L3 4AA

Head of Repository: J GORDON READ, Curator of Archives

Phone No:

Fax No:

General enquiries: Phone No: 0151 478 4418

Fax No: 0151 478 4590

Newham Local Studies Library

Stratford Library, Water Lane, London, England, E15 4NJ

Head of Repository: Christopher WOODLEY, Local Studies Librarian

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0181 557 8856

Fax No: 0181 503 1525

Norfolk Record Office

Gildengate House, Anglia Square, Upper Green Lane, Norwich, England, NR3 1AX

Head of Repository: John ALBAN, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01603 761 349

Fax No: 01603 761 885

E-mail address: norfrec.nro@norfolk.gov.uk81

North Devon Record Office

Library and Record Office, Tuly Street, Barnstaple, Devon, England, EX32 7EJ

Head of Repository: T WORMLEIGHTON, Senior Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01271 388 608

Fax No: 01271 388 608

North Yorkshire County Record Office

Malpas Road, Northallerton, North Yorkshire, England, DL7 8TB

Head of Repository: Michael ASHCROFT, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01609 777 585

Fax No: 01609 777 078

Northamptonshire County Record Office

Wootton Hall Park, Northampton, England, NN4 9BQ

Head of Repository: Rachel WATSON, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01604 762 129
E-mail address: archivist@nro.nothamptonshire.16

Fax No: **GRO-C**

North-East Lincolnshire Archives

Town Hall Square, Grimsby, Humberside, England, DN31 1HX

Head of Repository: J WILSON, Area Archivist

Phone No: **GRO-C**

Fax No:

General enquiries: Phone No: 01472 353 481

Fax No:

Northumberland Record Office

Melton Park, North Gosforth, Newcastle upon Tyne, England, NE3 5QX

Head of Repository: Sue WOOD, Heritage Centre Officer

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 0191 236 2680

Fax No: 0191 217 0905

Nottinghamshire Archives

County House, Castle Meadow Road, Nottingham, England, NG2 1AG

Head of Repository: Adrian HENSTOCK, County Archivist

Phone No: **GRO-C**

Fax No:

General enquiries: Phone No: 0115 958 1634/950 4524

Fax No: 0115 941 3997

Oldham Archives Service

Local Studies Library, 84 Union Street, Oldham, England, OL1 1DN

Head of Repository: Paul SILLITOE, Archives Officer

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 0161 911 4654

Fax No: 0161 911 4669

E-mail address: archives@oldham.gov.uk

Oxfordshire Archives

County Hall, New Road, Oxford, Oxfordshire, England, OX1 1ND

Head of Repository: Carl BOARDMAN, County Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01865 810 203

Fax No: 01865 810 187

Oxfordshire Health Archives

Warneford Hospital, Warneford Lane, Oxford, England, OX3 7JX

Head of Repository: Elizabeth BOARDMAN, Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01865 226 308

Fax No: 01865 226 507

Pembrokeshire Record Office

The Castle, Haverfordwest, Pembrokeshire, Wales, SA61 2EF

Head of Repository: John OWEN, County Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01437 763 707

Fax No:

Portsmouth City Records Office

Museum Road, Portsmouth, Hampshire, England, PO1 2LJ

Head of Repository: SE QUAIL, Museums and Records Officer

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01705 827 261

Fax No:

E-mail address: portmus@compuserve.com141

Powys County Archives Office

County Offices, Llandrindod Wells, Powys, Wales, LD1 5LG

Head of Repository: Gordon REID, County Archivist

Phone No:

Fax No:

E-mail address: gordon@

General enquiries: Phone No: 01597 826 088

Fax No: 01597 826 872

E-mail address: archives@powys.gov.uk14

Rochdale Library Service

Central Library, The Esplanade, Rochdale, England, OL16 1AQ

Head of Repository: Pamela GODMAN, Local Studies Officer

Phone No:

Fax No:

General enquiries: Phone No: 01706 47474 Ext 4915

Fax No:

Rochester upon Medway City Archives

Civic Centre, Strood, Rochester, Kent, England, ME2 4AW

Head of Repository: Simon DIXON, City Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01634 732 714

Fax No: 01634 297 060

E-mail address: archives@gateway.rochester.gov77

Rotherham Archives & Local Studies Section

The Brian O'Malley Central Library, Rotherham, South Yorkshire, England, S65 1JH

Head of Repository: A MUNFORD, Archivist

Phone No: 01709 382 121 x[GRO-C]

Fax No: As Archive

General enquiries: Phone No: 01709 382 616/382 121

Fax No: 01709 823 650

E-mail address: archives@rotherham.gov.uk143

Royal College of Physicians of London

11 St Andrews Place, Regent's Park, London, England, NW1 4LE

Head of Repository: Geoffrey YEO, Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0171 935 1174

Fax No: 0171 487 5218

Royal College of Surgeons of England

35-43 Lincoln's Inn Fields, London, England, WC2A 3PN

Head of Repository: CM CRAIG, Acting Librarian

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0171 405 3474

Fax No: 0171 405 4438

E-mail address: library@rcseng.ac.uk147

Royal Free Hospital Archives Centre

The Hool, 7 Lyndhurst Gardens, Hampstead, London, England, NW3

Head of Repository: Lynne AMIDON, Archivist

Phone No: [GRO-C]

Fax No:

General enquiries: Phone No: 0171 794 0692

Fax No:

Royal London Hospital Archives

Archives and Museum, Royal London Hospital, Whitechapel, London, England, E1 1BB

Head of Repository: R EVANS, Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0171 377 7000 Ext 3364

Fax No: 0171 377 7677

Salford City Archives Service

658/662 Liverpool Road, Irlam, Manchester, England, M44 5AD

Head of Repository: Anthony CROSS, Archivist

Phone No: [GRO-C]

Fax No:

General enquiries: Phone No: 0161 775 5643

Fax No:

Sandwell Community History & Archives Service

Smethwick Community Library, High Street, Smethwick, Warley, England, B66 1AB

Head of Repository: C. HARRINGTON, Archivist
Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0121 558 2561

Fax No: 0121 555 6064

Shakespeare Birthplace Trust Records Office

Henley Street, Stratford-upon-Avon, Warwickshire, England, CV37 6QW

Head of Repository: R BEARMAN, Senior Archivist
Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01789 204 016
E-mail address: records@shakespeare.org.uk166

Fax No: 01789 414773

Sheffield Archives

52 Shoreham Street, Sheffield, South Yorkshire, England, S1 4SP

Head of Repository: Margaret TURNER, Principal Archivist
Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0114 273 4756

Fax No: 0114 273 5009

Shropshire Records and Research Centre

Castle Gates, Shrewsbury, England, SY1 2AQ

Head of Repository: Mary MCKENZIE, Head of Records and Research
Phone No:

Fax No:

General enquiries: Phone No: 01743 255 350

Fax No: 01743 255 355

E-mail address: mmckenzie@

Somerset Archive and Record Service

Obridge Road, Taunton, Somerset, England, TA2 7PU

Head of Repository: Adam GREEN, County Archivist
Phone No:

Fax No:

General enquiries: Phone No: 01823 337 600

Fax No: 01823 325 402

E-mail address: Somerset_Archives@compuserve.c84

Southampton City Record Office

Civic Centre, Southampton, Hampshire, England, SO14 7LY

Head of Repository: S WOOLGAR, Archives Services Manager
Phone No: 01703 223 855

Fax No:

General enquiries: Phone No: 01703 832 251/223855

Fax No: 01703 336305

E-mail address: e.whale@

St Bartholomew's Hospital

West Smithfield, London, England, EC1A 7BE

Head of Repository: Marianne HILL, Archivist

Phone No:

Fax No:

General enquiries: Phone No: 0171 601 8152

Fax No: 0171 601 7899

Staffordshire Record Office

County Buildings, Eastgate Street, Stafford, Staffordshire, England, ST16 2LZ

Head of Repository: DMA RANDALL, Head of Archive Services

Phone No:

Fax No:

General enquiries: Phone No: 01785 278 380

Fax No: 01785 278 384

Stockport Archive Service

Central Library, Wellington Road South, Stockport, England, SK1 3RS

Head of Repository: M MYERSCOUGH, Archivist

Phone No:

Fax No:

General enquiries: Phone No: 0161 474 4530

Fax No: 0161 474 7750

E-mail address: stockport.cenlibrary@dial.pipe45

Suffolk Record Office, Bury St Edmunds Branch

77 Raingate Street, Bury St Edmunds, Suffolk, England, IP33 2AR

Head of Repository: Gwyn THOMAS, Senior Area Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01284 352 350

Fax No: 01284 352 355

E-mail address: gwyn.thomas@

Suffolk Record Office, Ipswich Branch

Gatacre Road, Ipswich, Suffolk, England, IP1 2LQ

Head of Repository: David JONES, Area Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01473 584 541

Fax No: 01473 584 533

E-mail address: gwyn.thomas@

Suffolk Record Office, Lowestoft Branch

Central Library, Clapham Road, Lowestoft, Suffolk, England, NR32 1DR

Head of Repository: Kate CHANTRY, Area Archivist

Phone No:

Fax No:

General enquiries: Phone No: 01502 405 357

Fax No: **GRO-C**

E-mail address: gwyn.thomas@**GRO-C**

Surrey Record Office

County Hall, Penrhyn Road, Kingston upon Thames, Surrey, England, KT1 2DN

Head of Repository: David ROBINSON, County Archivist

Phone No: **GRO-C**

Fax No:

General enquiries: Phone No: 0181 541 9065

Fax No: 0181 541 9606

E-mail address: shs@dial.pipex.com27

Sutton Heritage Service Archives Section

Central Library, St Nicholas Way, Sutton, Surrey, England, SM1 1EA

Head of Repository: Kathleen SHAWCROSS, Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0181 770 4745

Fax No: 0181 770 4777

E-mail address: sutton.heritage@dial.pipex.com154

Tameside Archive Service

Tameside Local Studies Library, Stalybridge Library, Trinity Street, Stalybridge, England, SK15 2BN

Head of Repository: Helen MACKIE, Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 0161 338 2708/3831

Fax No: 0161 303 8289

E-mail address: tamelocal@dial.pipex.com46

Teeside Archives

Exchange House, 6 Marton Road, Middlesbrough, Cleveland, England, TS1 1DB

Head of Repository: D TYRELL, County Archivist

Phone No: **GRO-C**

Fax No:

General enquiries: Phone No: 01642 248 321

Fax No:

University of Birmingham Library

Edgbaston, Birmingham, England, B15 2TT

Head of Repository: Christine PENNEY, University Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0121 414 5838

Fax No: 0121 471 4691

University of Durham Library

Archives & Special Collections, 5 The College, Durham, England, DH1 3EQ

Head of Repository: Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 0191 374 3610

Fax No: 0191 374 7481

Walsall Local History Centre

Essex Street, Walsall, West Midlands, England, WS2 7AS

Head of Repository: C LATIMER, Archivist

Phone No: As Archive

Fax No:

General enquiries: Phone No: 01922 721 305

Fax No: 01922634954

E-mail address: chrislatimer@GRO-C

Warwickshire County Record Office

Priory Park, Cape Road, Warwick, Warwickshire, England, CV34 4JS

Head of Repository: Christopher JEENS, County Archivist

Phone No: [GRO-C](tel:01926412735)

Fax No: [GRO-C](tel:01926412509)

General enquiries: Phone No: 01926 412 735

Fax No: 01926 412 509

E-mail address: warwickshire.archives@dial.pip88

West Devon Record Office

Unit 3, Clare Place, Coxside, Plymouth, Devon, England, PL4 0JW

Head of Repository: Paul BROUGH, Senior Assistant Archivist

Phone No: [GRO-C](tel:01752305940)

Fax No:

General enquiries: Phone No: 01752 305 940

Fax No: 01752 223 939

E-mail address: PBrough@GRO-C

West Glamorgan Archive Service

County Hall, Oystermouth Road, Swansea, Wales, SA1 3SN

Head of Repository: Susan BECKLEY, County Archivist

Phone No: [GRO-C](tel:01792636589)

Fax No: [GRO-C](tel:01792636340)

General enquiries: Phone No: 01792 636 589

Fax No: 01792 636 340

West Sussex Record Office

County Hall, Chichester, West Sussex, England, PO19 1RN

Head of Repository: Richard CHILDS, County & Diocesan Archivist

Phone No: [GRO-C](tel:01243533911)

Fax No: [GRO-C](tel:01243533959)

General enquiries: Phone No: 01243 533 911

Fax No: 01243 533 959

E-mail address: recordsoffice@westsussex.gov.uk

West Yorkshire Archive Service, Bradford

15 Canal Road, Bradford, West Yorkshire, England, BD1 4AT

Head of Repository: D JAMES, District Archivist

Phone No: [GRO-C](tel:01274734013)

Fax No: 01274 734 013

General enquiries: Phone No: 01274 731 931
E-mail address: archives@wyasbrad.demon.co.uk37

Fax No: 01274 734 013

West Yorkshire Archive Service, Calderdale

Calderdale Central Library, Northgate House, Northgate, Halifax, England, HX1 1UN

Head of Repository: District Archivist
Phone No: 01422 357 257 Ext 2636

Fax No: 01422 349 458

General enquiries: Phone No: 01422 392 636
E-mail address: calderdale@wyashq.demon.co.uk50

Fax No: 01422 341 083

West Yorkshire Archive Service, Kirklees

Central Library, Princess Alexandra Walk, Huddersfield, West Yorkshire, England, HD1 2SU

Head of Repository: J BURHOUSE, District Archivist
Phone No: 01484 513 808 Ext GRO-C

Fax No:

General enquiries: Phone No: 01484 221 966
E-mail address: enq@wyashq.demon.co.uk51

Fax No: 01484 518361

West Yorkshire Archive Service, Leeds

Chapeltown Road, Sheepsca, Leeds, West Yorkshire, England, LS7 3AP

Head of Repository: William CONNOR, District Archivist
Phone No: GRO-C

Fax No: GRO-C

General enquiries: Phone No: 0113 262 8339
E-mail address: enq@wyashq.demon.co.uk52

Fax No: 0113 262 4707

West Yorkshire Archive Service, Wakefield

Registry of Deeds, Newstead Road, Wakefield, West Yorkshire, England, WF1 2DE

Head of Repository: Ruth HARRIS, Principal District Archivist
Phone No: GRO-C

Fax No: GRO-C

General enquiries: Phone No: 01924 305 980
E-mail address: hq@wyashq.demon.co.uk49

Fax No: 01924 305 983

Wirral Archives

Information Services, Birkenhead Central Library, Borough Road, Birkenhead, England, L41 2XB

Head of Repository: D THOMPSON, Archivist
Phone No: GRO-C

Fax No: As Archive

General enquiries: Phone No: 0151 652 6106/7/8

Fax No: 0151 653 7320

Wigan Record Office

Town Hall, Leigh, Wigan, England, WN7 2DY

Head of Repository: Tom THACKRAY, Archivist

Phone No: 01942 672 421 Ext **GRO-C**

Fax No:

General enquiries: Phone No: 01942 404 430

Fax No: 01942 404 505

Wiltshire Record Office

County Hall, Trowbridge, Wiltshire, England, BA14 8JG

Head of Repository: JN D'ARCY, Principal Archivist

Phone No: **GRO-C**

Fax No:

General enquiries: Phone No: 01225 713 136

Fax No: 01225 713715

Wolverhampton Borough Archives

Central Library, Snow Hill, Wolverhampton, West Midlands, England, WV1 3AX

Head of Repository: Caroline SAMPSON, Borough Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 01902552480

Fax No: 01902 552 481

Worcester Record Office

Spetchley Road, Worcester, England, WR5 2NP

Head of Repository: A WHERRY, County Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01905 763 763 Ext 6350

Fax No: 01905 763 000

Tyne and Wear Archives Service

Blandford House, Blandford Square, Newcastle-upon-Tyne, England, NE1 4JA

Head of Repository: Elizabeth REES, Chief Archivist

Phone No: As Archive

Fax No: As Archive

General enquiries: Phone No: 0191 232 6789

Fax No: 0191 230 2614

York City Archives

Art Gallery Building, Exhibition Square, York, North Yorkshire, England, YO1 2EW

Head of Repository: Rita FREEDMAN, City Archivist

Phone No: **GRO-C**

Fax No: **GRO-C**

General enquiries: Phone No: 01904 551 878/9

Fax No: 01904 551 877

Appendix C to Health Service Circular WHC (00) 71
(For The Record: Managing records in NHS Trusts & Health Authorities)

Appendix C : List of useful contacts

The Departmental Record Office - concerning issues covered in this guidance, or wider records management issues and electronic administrative records - Department of Health, Departmental Record Office, Premier Buildings, Brunswick Street, Nelson, Lancs, BB9 OHU Tel: 0113 254 5000 Fax: 0113 254 7332

The Public Record Office - concerning long-term archiving of selected material; and liaison with local/County Council Archivists - Dr David Leitch, Head of Archival Inspection Services, Public Record Office, Kew, Richmond, Surrey, TW9 4DU Tel: **GRO-C** Fax: **GRO-C** Internet Website: www.pro.gov.uk

The Institute of Health Record Information & Management (IHRIM) - professional association for all NHS Medical Records Managers, Clinical Coding Managers, and NHS Archivists - for practical advice and contacts. IHRIM Secretary, 115 Willoughby Road, Boston, Lincs, PE21 9HR. Tel and Fax: 01205-368870 (office hours only).

The Health Archives Group (HAG) - professional association for all NHS Archivists. Contact Jonathan Evans (Chair), Archivist, Royal London Hospital, Whitechapel, London E1 1BB Tel: **GRO-C** Fax: **GRO-C** or via PRO (Phillip Clayton-Gore).

Standing Conference On National & University Libraries (SCONUL) - for information, practical advice, and contacts concerning the use of NHS records for research purposes. Contact via PRO (Dr David Leitch)

Other Department of Health & NHS Executive contacts

HP4B - policy on confidentiality and data protection issues. Louis Rieunier/Pat Nicholls, Room 425 Wellington House, 133-155 Waterloo Road, London SE1 8UG Tel: **GRO-C**

NUR - concerning compilation and maintenance of nursing records. Simon Old, Room.4W51, Quarry House, Quarry Hill, Leeds, LS2 7UE Tel: **GRO-C**

PC-GMS2 - concerning general practitioner (GP) records. Steve Rowlands, Room.7E01, Quarry House, Quarry Hill, Leeds, LS2 7UE Tel: **GRO-C**

CA-QC(CI) - concerning day-to-day confidentiality issues within the NHS. Phil Walker, Room 3E44, Quarry house, Quarry Hill, Leeds, LS2 7UE Tel: **GRO-C** Fax: **GRO-C**

For information about the NHS IM&T Strategy and other electronic records issues:-

NHS Executive Information Management Group (IMG)

for general information concerning electronic records / NHS IM&T Strategy:

IMG-A3, Dr Peter Drury, Room 1N08 Quarry House, Quarry Hill, Leeds, LS2 7UE, Tel: **GRO-**
GRO-C

for information concerning the Electronic Patient Record (EPR) project:

IMG-A3, Sean Brennan, Dr Bill Dodd, Room 1N35C Quarry House, Quarry Hill, Leeds, LS2 7UE, Tel: **GRO-C**

for guidance concerning legal admissibility, and security:

IMG-E, Alastair Donaldson, IMC, 15 Frederick Road, Birmingham B15 1JD, Tel: **GRO-C**
GRO- Ext **GRO-C** Fax: **GRO-C**

Additional useful contacts

Data Protection Registrar, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF
Tel: 01625 545700

General Medical Council, 178 Great Portland Street, London, W1N 6JE Tel: 0171 580 7642 Fax: 0171 915 3641

United Kingdom Central Council for Nursing, Midwifery and Health Visiting, 23 Portland Place, London, W1N 3AF Tel: 0171 637 7181 Fax: 0171 436 2924

Medical Defence Union Ltd.,

London Office: 3 Devonshire Place, London, W1N 2EA Tel: 0171 486 6181 Fax: 0171 935 5503
Manchester Office: 192 Altrincham Road, Manchester, M22 4RZ Tel: 0161 428 1234 Fax: 0161 491 3301

Historical Manuscripts Commission(HMC), Quality House, Quality Court, Chancery Lane, London WC2A 1HP Tel: 0171 242 1198 Fax: 0171 831 3550

Keeper of Documentary Films, National Film and Television Archive, British Film Institute Collections Department, 21 Stephen Street, London W1P 2LN Tel: 0171 255 1444 Fax: 0171 580 7503

Customs and Excise, NHS Admin Team, Dorset House, Stamford Street, London, SE1 9PY Tel: 0171 202 4008 Fax: 0171 202 4505

Publications

Circulars

Copies of Department of Health/NHS circulars may be obtained from:

Department of Health
PO Box 410
Wetherby
LS23 7LN

Fax 0990 210 266

More recent circulars are also available on the Department of Health website at
<http://www.doh.gov.uk/coinh.htm>

Other Publications

"Beyond the PRO: Public Records in Places of Deposit" - copies can be obtained from:-

Public Record Office
Archive Inspection Services
Kew
Richmond
Surrey TW9 4DU

Tel: 0181 392 5262

Fax: 0181 392 5284

"Hospital Patient Case Records - A Guide to Their Retention and Disposal" - copies of this Health Archives Group booklet can be obtained from:-

Jonathan Evans Health Archives Group c/o Royal London Hospital Whitechapel London E1 1BB Tel: GRO-C Fax:	Julia Sheppard Contemporary Medical Archives Centre Wellcome Institute for the History of Medicine 183 Euston Road London NW1 2BE Tel: GRO-C Fax:	Marion Rea St Bartholomew's Hospital Archives and Museum Bart's Hospital West Smithfield London EC1A 7BE Tel: GRO-C No fax available
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Other useful information

The Hospital Records Database - a computerised database of information about hospital records which have been transferred to local authority or other record offices, or which are administered by health authority archivists. This is a joint project of the Wellcome Institute for the History of Medicine and the Public Record Office. For further information please contact Julia Sheppard at the Wellcome Institute (see above for contact details) or Reader and Information Services at the PRO, Tel: **GRO-C**