Witness Name: Caroline Leonard Statement No.: WITN3449007 Exhibits: WITN3449008 -WITN3449021 Dated:

Exhibit WITN3449019

(12) GRO-C



IRELAND HOSPITALS AUTHORITY

Telephone No.: BELFAST 27871/6. Telegrophic Address "NIHOSP" BELFAST.

Circular H.K.C. 75/62

27. ADELAIDE STREET.

BELFAST. 2.

Reference No. 1668/51

28th Soplember, 1962.

Dear Sir/Madan,

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Preservation and Dostruction of Hospital Scrvice Records

The Authority have considered the arrangements to be made for the preservation of hospital service records and for the destruction of documents which need not be permanently retained.

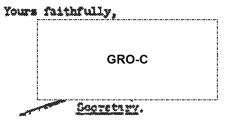
The attached memorandum sets out the principles approved by the Authority, after consultation with the Ministry of Health and Local Government and the Public Record Office of Northern Ircland.

The Authority will be pleased to give advice on any questions arising from the principles set out in the memorandum.

It is advised that the Management Committee should enter in a simple register each decision to destroy records falling within the categories set out in Appendix 3, and add a certificate that destruction has taken place. It may be found convenient to fix, say, two or thise dates in each your on which a review will be made of records falling due for destriction.

The Authority recommend that the principles set out in the Memorandum should be adopted by Management Committees in dealing with corresponding records relating to Endowments and other Free Funds. Such records are in the control of the Management Committee and are not the property of the Authority.

The Authority wish to be informed of the initial action taken on this Circular and the attached Monorandum. I am to ask that an appropriate statement will be sent to the Authority not later than 25th February, 1963. In particular, the Authority will be glad to be informed as to the Records it is proposed to offer for deposit in the Public Record Office of Northern Ircland.



To: The Sucratary of cach Mospital Management Committee (with a copy for each hospital).

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MOSTREW DELAND POSTIALS ATTICENTY

PRESERVATION AND PASTRUCTICE OF ROSPINAL DERVICE RECORDS

Summary - This memorandum cets out arrangements for the preservation and disposal of hospital service records, including records which were vosted in the Authority at 1st April, 1948, 5th July, 1948 or 1st April, 1959.

Selection and Dirnozal of Records

1. The lists contained in Appendices A and B shall be observed as the guide for selection and disposal of hostital service records. Appendix A lists classes which shall not be destroyed at all. Appendix B lists there which may be destroyed. In any case where a hospital wishes to destroy documents but there is doubt whether Appendix B gives authority for this to be done, the Authority should be consulted before any action is taken. The decision to destroy chould also be subject to the special reservations set out in paragraphs 4 to 7 below.

2. No documents should be destroyed which are or might be relevant to legal proceedings which have becaus or to a pending claum or other matter which could result in legal proceedings.

3. It is important to segregate and take proper care of documents which ought to be permanently preserved. Documents rejected as not required for permanent preservation should be destroyed as soon after the expiry of the specified retention periods as they case to have usefulness for the purposes of the hospital service. Disposal of rejected documents in a cary other than by destruction (e.g. by presentation) tall be subject to the approval of the Authority.

4. The actual period of retention of medical records (i.e. part IV in Appendix \bar{e}) should be determined by medical considerations with particular reference to clinical and rescarch requirements. A joint committee of the Royal College of Physicians and the Royal College of Surgeons considered the question of what proportion of these records it would be desirable to preserve permanently for research purposes and made recommendations, of which account has been taken in compiling the list of classes in Appendix A. Special arrangements may be made by the Authority with particular hospitals for the preservation of a suitable sample of selected classes of certain records.

5. Hospitals which for special reasons consider it desirable and practicable not to destroy any or certain of their clinical records should advise the authority as to the records they suggest should be designated for permanent preservation. There approval to the suggestions is given, paragraphs 9 to 14 below will be applicable to 'the related records.

6. If any former Emergency Hospital Service (1939 - 45) medical records are found to be still in the possession of a hospital, the Authority should be informed.

7. One of the main objects of the arrangements is to ensure the preservation of any documents which are, or may in future become, of historical interest. Hospital should consider very carefully before disposing of documents of any great age, even though they may fall under the head of one of the classes in Appendix B. Any records created before 1900 should be salected for preservation. Similarly amore recent document in such a class should be preserved if there is reason for Eupposing that it may be of historical interest.

8. The finding of a Committee in England on Departmental Records (Ond. 9163) (after careful investigation of the use of microphotography for archival purposes) was that the high overall cost of reproduction of records on microfilm would be much more than the cost of providing storage accommodation for the original documents. In view of this conclusion, and of other disadvantages mentioned in the Committee's report, microfilming is not now recommended as a method of reducing the talk of documents held. If documents have been selected for permanent preservation, the original documents must be preserved;

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Transfor of Records

9. Where records are selucted for permanent procervation the question will arise whether they should be effered to the Public Record Office of Northern Ireland. The Authority should be consulted in this matter.

10. Management Committees having records thirty yours and more old intended for permanent preservation which they consider should be retained in their own keeping are asked to inform the Authority. It is a generally accepted principle that records should become available for public inspection when they are fifty years old, unless there is good reason for access being withheld or made subject to special conditions and restrictions. Committees are asked to give careful consideration to the need for the retention of old records for administrative purposes beyond thirty years, bearing in mind that if such records are deposited at the Public Record Office they can always be usen there and information obtained to most a special need. Korcover, the Fublic Record Office, will arrange for deposited records to be returned to a hospital if this is found to be necessary in connexion with some current business.

11. If Management Committees wish for a special reason to retain records which are to be permenently preserved and have ceased to be of administrative value at the hospital they should consult the Authority.

Place of Deposit.

12. The Public Record Office is the normal place of deposit for records which are to be permanently preserved. The Authority will be glad to approach the Deputy Keeper of the Records when there is a question of offering records for deposit in the Public Office.

Access to Records

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13. In view of the confidential character of medical records and other records containing information about individual patients, the Authority have arranged with the Public Record Office of Northern Ireland that such records will not be available for public inspection in the place of deposit until they are <u>a hundred years old</u>. Other types of hospital records would become available for public inspection when fifty years old, unless in a particular case a longer period is arranged. In all cases where a record covers a number of years the period, whatever its length, would be reckoned from the date of the last paper or entry.

14. Documents closed to the public in general any nevertheless be made available to the holder of special permission to see them obtained from the Authority. The greatest discretion necessarily would be exercised in granting such permission in the case of medical records and other documents containing information about patients The Authority will require from persons seeking such permission full information as to the purpose of the examination of the records and a signed undertaking not to identify any individual patient's case by nume in any research work or other work resulting from such examination.

15. In all matters of doubt as to the application of the foregoing principles to particular cases or treatment of documents or groups of documents where thy question of proper disposal is in doubt, the Authority should be consulted.

(Mess E.M.C. 75/60)

Classes of Documents which are Not to be Destroyed

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1. Minute books, including minute books of governing bodies (and their subcommittees). Minute books of Hospital Committees and sub-committees are included in this category and gust not be destroyed.

2. Deeds and correspondence relating to the transfer of hospital property to the Hospitals Authority; to the apportionment and vesting in the Authority of interests in premises used partly for hospital and partly for other purposes; to the purchase, disposal and leasing of property; to the grant of leases, easements, licences and other rights over property by or to the Authority; and to the transfer and discharge of mortgages.

3. Correspondence and other documents relating to town and country planning matters and having a permanent value.

4. Annual accounts and annual statements prepared in pursuance of the Health Services Act (Northern Ireland), 1948, (as amended) or the Mental Health Acts.

5. One set of annual reports of each hospital body, including annual reports of former governing bodies.

- 6. Documents relating to building and engineering works:-
 - (i) Contract documents, drawings, bills of quantities and other documents of permanent value (i.e. excluding those covered by Item 15 of Appendix B).
 - (ii) Site plans, surveys, record drawings, etc., having a permanent value.
 - (iii) Record documents relating to rajor projects which have been abandoned or deforred.
- 7. Central inventories of:-
 - (i) Plant and permanent or fixed equipment.
 - (ii) Furniture and medical and surgical equipment, not held on store obarge, having a minimum life of five years.

 Documents of permanent value relating to benefaction, special donations and bemoriels of any sort covered by the Health Services Acts, including all trusts created after 4th July, 1948.

- 9. Post-mortem books.
- 10. Summaries of clinical notes taken (Front Sheats, Registrars' books, etc.)
- 11. Discharge Books containing corrected diagnoses.

12. In psychiatric hospitals, the following documents (most of which were prescribed under earlier mental health legislation):

Visitors' Books General Registers Post-mortem Records Medical Records or patients' records (including cards for General Register Office and nursing record (non-statutory)) Hospital Cards (non-statutory). Patients' Books Alphabetical Register Registor of mechanical restraint and seclusion and any similar document relating to psychiatric patients which is used at 00 just December, 1961, in psychiatric or other hospitals, for similar purposes.

13. All documents of earlier date than 1900.

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14. The following superannuation records: All duplicate forms S.D.55A, B, C, and D and their successors for subsequent septennia.

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(Memo N.U.C.75/62)

CLASSES OF LOCUMENTS WHICH MAY PE DESTROYED

	Number and Class of Documents	Feriod after skich Documents cay te destroyed
	Part 1 - Financial	
4.	Estimates: including supporting calculations and statistics.	Three years after the end of the financial year to which they relate.
2.	Audit reports	Six years after the end of the financial year to which they relato.
3.	Principal Ledger Records: including such documents as cash book, ledgers, income and expenditure journals, etc.	Ten years after the end of the last financial year to which they relate.
4.	Kinor Accounting Records:	
	(a) Pass-books, bank statements of accounts, paying-in slips, cheque counterfoils and cancelled and discharged cheques; accounts of patty cash expenditure; Travelling and subsistence accounts; minor vouchers, including duplicate receipt books; income records; forms used in connection with the supply of surgical appliances, etc.	Six years after the end of the financial year to which they relate.
	(b) Debtors' records ••• •••	Six years after the end of the financial year in which the accounts are paid or are write off.
5.	Cost accounts	Three years after the end of the financial year to which they relats.
6.,	Bills and receipts	Six years after the end of the financial year to which they relate.
7.	Documents, other than those referred to in Item 8 of Appendix A, relating to (a) benefactions, special donations and memorials of any sort covered by the Health Services Act and (b) to trusts created after 4th July, 1948	Six years after the end of t financial year in which the trust moneys became finally spent, or the gift in kind w accepted.
, ð,	Salaries and mages Records (i.e., employees' personal pay records)	Eleven years after the end of the financial year to which they relate.
9.	Pay Sheets and Records of unpaid salaries and Wages.	Six years after the end of t financial year to which they relate.

		Number and Class of Documents	Coriod after shick . Documents may be destroyed
		Part II - Stores, Souigrant and Quildings	
	10.	Sajor Stores Records: stores ledgers and equivalents.	Six years after the end of the financial year to which they rolate.
		Minor Stores Records: requisitions, isques notes, transfer vouchers, goods received books, etc.	Two yours after the end of the financial year to which they relate.
	12,	Agreements and simple contracts (and documents subsidiary to these) which are only of temporary or minor importance, i.e., short-tern agreements and minor contracts; papers preliminary or subsidiary to contracts; documents relating to contracts for the supply of goods.	Six years after the end of the financial year in which the agreement or contract expires.
	13.	Engineers' inspection reports on boilers, lifts, sto.	When the plant to which they relate goes finally out of use
•	14.	Minor Supplies Records: including invitations to tender and unaccepted tenders, routine papers relating to catering and demands for furniture, equipment, stationery and other supplies.	Two years after the end of the financial year to which they relate.
	15.	Records (other than those referred to in Item 6 of Appendix A) relating to capital and other building works or improvements: including plans and specifications prepared for temporary purposes and papers relating to them.	Two years after they have ceased to be effective.
2000 C	16,	Inventories not in current use of utensils, instruments, bedding, etc., not held on store charge, having a life of less than five years.	Two years after the end of the financial year in which the inventories wore in use.
		Part III - Establishment and Stationics	
nyaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa	17.	Major Establishment Records: including personal files, letters of appointment, contracts, references and related correspondence and records of sick leave.	Six years after the officer leaves the service of the Authority or on the dats on which the officer would reach the age of 70, whichever is the later.
Ŷ	18.	Minor Establishment Records: including attendance books, annual leave records, time sheets, duty rosters, clock cards and other documents of sphemeral importance.	Two years after the end of the year to which they relate.
	19.	Documents relating to unsuccessful applications for posts.	One year after the vacancy was filled.
۵	20.	Superannuation Records: Original fores S.D.56	Two years after the end of t financial year in which the officer left the service of omploying authority.

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	<u>Part III - Establishient and Statistics</u> (continued)	
2 4 s	Statistical and other returns which were required for sphenural purposes only and have censed to be effective.	One year after the end of the period to which they relate.
22.	Annual statistical returns required by the Authority or the Ministry of Mealth and Local Government.	Six years after the end of the period to which they relate.
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	<u>Part IV - Kelical</u>	
2).	Mass Ministure radiography records, including microfilus.	Five years after the date on which the file was taken.
24,	Blood Transfusion Service: laboratory records relating to donors.	One year after the resignation or death of the domor.
25.	Medical records and allied documents in } hospitals (see footnote):	
* *	 (a) ³⁴Medical records including: Olinical notes (which includes reports from pathological, '') radialogical and other special departments, X-ray files, electrocardicgraphic and electrometro-encephelographic records). 	Six years after conclusion of treatment; there the patient dies in hospital three years after death.
	(b) Blood Transfusion Records	
	(c) Consent forms of all types	ст
26.	(d) Four hourly temperature charts) Records of all types of special departments (including almoners' records).	Six years from date of last entry.
27.	Operation books	The same.
28,	Cosualty notes	The suce.
29.	Day and night nursing report books	Six years from date of last entry.
30.	Ancillary records, including prescriptions, department registers, appointments sheats, attendance registers, etc.	The same.
31.	Appliance Order Forus	The sacs.

Ø	Number and Class of Documents	Period after which Doculonts way be destroyed
	<u>Part IV - Pedical</u> (continued)	
32. [.]	Records rolating to dangerous drugs and poisons:	
	(a) Registers, record books, prescriptions and other documents kept, issued or made under the Dangerous Drugs Regulations:	* * *
	(i) Registers, books or records	Two years from date of last entry.
	(ii) Other documents	Two years from date on which issued or made.
	(b) Non-statutory records relating to Angerous drugs.	Two years from date on which issued or mide.
	(c) Records of medicines included in the First Schedule to the Poisons Riles, and supplied to out-patients.	Two years from date of the last entry relating to the supply of such a cedicine.
<u>y</u> .	Documents prescribed in the legislation and former legislation relating to mental treatment:	*
	(a) Dispensary book or medicine card or short	Two years after the last entry
	(b) Register of dysentery and diarrhoea	Ino years after the last entry
	(c) Caution cards	Two years after patient's discharge, renoval or death.
	(d) List of patients in wards	One year after the last entry
١	(e) Diary for Visiting Medical Officers	Two years after the last entr
34.	Undertakings signed by patients admitted to beds designated under the provisions of Section $29(2)(f)$, $29(2)(g)$ or $29(2)(h)$ of the Health Services Act, (Northern Ireland), 1948.	Six years.
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	Number and Class of Documents	Perioi after which Documents may be destroyed
	Part V - Miscollandous	
35.	any documents relating to legal actions or to ca.plaints, including accident record sheets.	Six years after the end of the financial year in which the incident occurred; or more an action has been conteness, when legally advised that it is safe to destroy the documents:
36.	Documents relating to contractual arrangements with hespitals, sto., outside the Health Service:	
	(a) Documents relating to the contractual arrangements.	Six years from the termination of the arrangement.
	(b) Documents relating to periodical financial settlements and under the contract.	Six years after the end of th financial year to which they relate.
37.	Records of patients' property handed in for safe custody.	Six years after the end of th financial year in which the property was disposed of.
38,	Correspondence and other papers of minor or ephemeral importance, not covered by the foregoing classes: including - advertising matter; covering letters; reminders and letters making appointments; anonymous or unintelligible letters; drafts; duplicates of documents known to be preserved elsewhere (unless they have important minutos on them); indexes and registers compiled for temporary purposes; routine reports; punched cards; and other documents which have caused to be of value on settlement of the matter involved	
39. ,	Documents relating to the detention of an individual centally disordored patient required under the Kental Health act (Northern Ireland), 1961, documents described in or required by carlier, superseded, legislation and documents relating to detention which are not statutorily prescrib- or required:	****
	(a) Fatients who have been finally discharged from hospital care (including out-patient care), whether the care was compulsory or had become informal by the date of discharge.	Seven years from the date of discharge or from reaching the age of 21, whichever is the later.
	(b) Patients who have died	Three yearsfree the date of death.

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