

Records Disposal Policy



Title:

Records Disposal Policy

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Version Control

Date	Author	Version	Reason for change
Nov 2024	Lothian Health Services Archive Manager	v0.1	New policy under development
Feb 2025	Lothian Health Services Archive Manager	v0.2	Minor corrections and alignment with other related policies
Feb 2025	Lothian Health Services Archive Manager	v0.3	Minor amendments
May 2025	Lothian Health Services Archive Manager	v0.4	Submitted to Information Governance Working Group for review. No further comments or changes.
June 2025	Lothian Health Services Archive Manager	v0.5	Formatting changes/version control correction (Policy Hub)
July 2025	Lothian Health Services Archive Manager	v1.0	Approved by the Policy Approval Group

Executive Summary

The aim of the Records Disposal Policy is to outline NHS Lothian's approach to managing the retention and secure disposal of its information in line with its business requirements and legal obligations.

A general overview of the records lifecycle and the Board's approach to records management is outlined in the Records Management Policy.

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1.0 Purpose

NHS Lothian's records are essential in providing evidence of its actions and decisions and represent a vital asset to support daily functions and operations. Records support policy formation, managerial decision making, protect the interests of the Board and the rights of patients, staff and members of the public. They support consistency, continuity, efficiency and productivity, helping to deliver services in a consistent manner. Appropriate record keeping also supports organisational resilience by providing accurate access and retention of records.

The Public Records (Scotland) Act, 2011 (PRSA) requires all public authorities in Scotland, including NHS Boards, to have a Records Management Policy, a Business Classification Scheme and Records Disposal Policy.

The Scottish Government Records Management Code of Practice for Health and Social Care 2024 (hereafter Code of Practice) was published as a guide to the required standards of practice in the management of records for those who work within or under contract to NHS organisations in Scotland. The NHS Lothian Retention Schedules (currently under development) reflect the requirements of the Code of Practice.¹

This policy covers both paper and digital records.

2.0 Policy statement

NHS Lothian will take all reasonable measures to comply with its legal responsibilities under all relevant legislation and with Scottish Government and NHS Scotland requirements and specifications, in relation to the management and disposal of its records and information.

The objectives of this Records Disposal Policy are to:

- ensure that the Board complies with its statutory obligations under the Public Records (Scotland) Act 2011, Freedom of Information (Scotland) Act 2002 (FOISA), specifically section 61, and UK Data Protection legislation.
- ensure records management good practice in relation to the retention and disposal of NHS Lothian records, adhering to appropriate Information Governance policies and Information Security standards.
- support the Board in demonstrating public accountability through the proper retention of records and by demonstrating that disposal decisions are taken with proper authority and in accordance with due process and in line with retention schedules.
- ensure that staff are appropriately trained and understand their own and the Board's responsibilities for the retention and disposal of records.
- avoid unnecessary retention or over-retention of information to help reduce the administrative burden and costs associated with the physical storage of paper and digital records

¹ *Records Management Code of Practice for Health and Social Care*, 2024. Available from <https://www.digihealthcare.scot/app/uploads/2024/08/RM-CoP-for-HSC-2024-v04.0-MASTER-2024-08-09.pdf>

- support the reduction of the Board’s carbon footprint and environmental impacts

The provisions of the UK Data Protection Act 2018 and FOISA 2002 must be observed when considering whether to destroy records.

Destruction or transfer to archive decisions should also be considered in the light of the need to preserve records that may be in the public interest (e.g. Scottish Child Abuse Inquiry) or for research purposes or historic interest. [Refer to the Appraisal and Transfer to Archive Policy](#).

3.0 Scope

This policy applies to:

- all employees
- volunteers
- contractors supplying services or carrying out work on behalf of NHS Lothian
- all NHS Lothian sites and locations, and when accessing NHS Lothian systems, information and records remotely regardless of the access method or equipment used
- all corporate and administrative records held in any format by NHS Lothian
- health and clinical records

4.0 Definitions

4.1 Appraisal

Reviewing records, also known as appraisal, refers to the process of determining whether records require to be retained beyond their designated retention date, destroyed as they have reached the end of their retention period, or are worthy of archival preservation. This process will also include a review of the sensitivity of records and determine the mode of disposal. Appraisal decisions are informed by a number of factors including the historical, legal, operational and financial value of the records.

4.2 Destruction

This is the process of permanently and irreversibly destroying records, either by secure shredding of paper records or permanent deletion.² Records should be destroyed appropriately, paying particular attention to any information that has been given a specific security classification, protective marking or handling instructions. Records should always be disposed of with the same level of security that was applied during their lifetime.

² It is important that when a record is destroyed, it cannot easily be recovered. The United Nations Archives and Records Management Section advises as follows:

Destruction of records should be irreversible. This means that there is no reasonable risk of the information being recovered again. Failure to ensure the complete destruction of records may lead to the unauthorised release of sensitive information. <https://archives.un.org/>

The destruction of records containing personal identifiable data or business sensitive information must be undertaken in a secure and confidential manner to ensure that there are safeguards against accidental loss or disclosure. For digital records, the medium on which they are stored should be securely erased or physically destroyed in accordance with the [NHSL Digital IT Security Policy](#) and the [Secure Storage, Disposal and Destruction of Equipment policy](#).

4.3 Disposal

This is the process of implementing records destruction or transfer to archives decisions. The term disposal refers to the permanent removal of records from current usage by destruction or transfer to permanent archival storage (at LHSA).

4.4 Retention

This is the continued storage and maintenance of records for as long as they are required by NHS Lothian until their ultimate disposal. It may be necessary to retain records beyond their retention period for legislative, regulatory or accountability purposes.

Records may need to be kept longer, and *must not be destroyed*, if they:

- are subject to a request under FOISA
- are subject to a Subject Access Request under Data Protection legislation
- are part of a litigation case
- are part of an investigation or public inquiry
- have ongoing business use/value

NHS Lothian must ensure that mechanisms are in place to identify and dispose of records containing person identifiable data once the minimum retention period has expired in line with the 5th principle of the Data Protection Act.³

4.5 Retention periods

The Code of Practice lays out specific guidance for the minimum retention periods of NHS Lothian's records and must be followed. If there is no appropriate retention period listed or if there is no legally defined retention period for the records it is the responsibility of the relevant IAO(s) to determine an appropriate retention period, in consultation with the Corporate Records Manager or Head of Health Records. NHS Lothian Retention Schedules are currently being developed.

4.6 Transfer to archival storage

Once records have no further business use, nor ongoing administrative value they may still be of long-term historical, corporate memory or research value.

³ The fifth data protection principle concerns the requirement that personal data be kept for no longer than is necessary); (2) Appropriate time limits must be established for the periodic review of the need for the continued storage of personal data for any of the purposes for which it is collected.

The selection of records for permanent archival preservation is partly informed by precedent and partly by the context of the records. Please refer to the [Appraisal and Transfer to Archive Policy](#) for more information. NHS Lothian's designated place of deposit for archival material is the Lothian Health Services Archive at the University of Edinburgh (LHSA).

4.7 Destruction and Transfer Register

Implementing and maintaining an effective records management system depends on knowledge of what records are held, where they are stored, and who manages them. It is good practice to retain a record of all records that have been either destroyed or transferred to archive (for NHS Lothian this will be the Lothian Health Services Archive (LHSA) based at the University of Edinburgh) or to an external storage provider e.g. Iron Mountain or Oasis. If records are transferred to an external storage provider, it is essential that they remain subject to regular review so that nothing is retained for longer than required.

It is recommended that each Manager and Information Asset Owner maintains a register to record the destruction or transfer to LHSA of NHS Lothian records once they reach the end of their business use (lifecycle) and are no longer required. [A template register is available from the NHS Lothian staff intranet.](#)

This register will allow staff to respond with confidence to Information Requests (under FOISA or Data Protection legislation) that the records have been properly destroyed or deleted or have been transferred to the custody of LHSA and when this took place.

Once NHS Lothian has fully adopted M365, most retention and disposal actions should be recorded by the system automatically.

5.0 Implementation roles and responsibilities

5.1 Chief Executive

The Chief Executive has overall responsibility for records management within NHS Lothian, ensuring compliance with all relevant legislation and Scottish Government and NHS Scotland standards.

5.2 Senior Information Risk Owner (SIRO)

The Senior Information Risk Owner has responsibility for the management and mitigation of risks associated with NHS Lothian's information and records management processes.

5.3 Information Asset Owners (IAO)

All NHS Lothian information assets held manually or digitally are the responsibility of the appropriate IAOs, who must ensure that they understand what information is held, and for what purpose; that information risk assessments are carried out; appropriate security measures (both digital and physical) are in place; who has access to the information and

why, and that the information is appropriately archived or destroyed in line with this Policy. IAOs with responsibility for patient-related records, in conjunction with the Head of Health Records, will decide on the disposal and destruction of health records in line with the Code of Practice.

5.4 Caldicott Guardian

The Caldicott Guardian is responsible for ensuring that NHS Lothian satisfies the highest practical standards for handling (including disposal of) patient information in compliance with the Caldicott Principles.

5.5 Head of Health Records

The Head of Health Records is responsible for the overall development and maintenance of health records management practices throughout NHS Lothian in order to support the efficient, safe, appropriate and timely retention, retrieval and disposal of patient information.

5.6 Corporate Records Manager and Head of Health Records

The implementation of, and compliance with, this Policy is the responsibility of the Corporate Records Manager and Head of Health Records, who will act as the records management leads and will provide guidance on the management of records, ensuring that relevant legislation and guidance are incorporated into Board practices.

5.7 NHS Lothian Information Governance Working Group

The NHS Lothian Information Governance Working Group makes decisions on policy matters and includes representation from clinical and non-clinical staff. Input from NHS Lothian professionals is a key element of NHS Lothian records management.

5.8 Line Managers

Managers at all levels are responsible for ensuring that the staff for which they are responsible are aware of, understand and adhere to this policy. They must ensure their teams undertake all appropriate training and are aware of their responsibilities and the most effective way of ensuring adequate records management and control.

5.9 Staff

All staff, whether permanent, temporary or contracted, and contractors must comply with the requirements of their contract in relation to records management and, where applicable, adhere to this policy and the related documents and procedures which can be found on the NHS Lothian Intranet.

6.0 Associated materials

In conjunction with the Public Records (Scotland) Act 2011 and Data Protection and Freedom of Information legislation, NHS Lothian will apply the Records Management Best Practice Principles outlined in the Scottish Government Records Management Code of Practice for Health and Social Care (August 2024). It will also follow the principles of Caldicott, IT Security, Information Sharing, and Confidentiality, as defined in the Board's supporting policies, procedures, guidelines and protocols to meet required records management standards. Relevant Board policies, procedures guidelines and protocols are represented via (some links require access to staff intranet site):

[Appraisal and Transfer to Archive Policy](#), approved by the Policy Approval Group, July 2025

[Access to Applications and Network Policy](#), approved by the Policy Approval Group (available on the NHS Lothian intranet)

[CCTV Policy](#), approved by the Policy Approval Group, March 2025

[Confidentiality Policy](#)

[Data Protection Policy](#), approved by the Policy Approval Group

[RHCYP and DCN Internet Access and Loan Devices Policy](#), approved by the Policy Approval Group

[Subject Access Policy](#), approved by the Policy Approval Group

[Data Access for Research Policy and Guidance](#), approved by the Policy Approval Group (available on the NHS Lothian intranet)

[Data Access Policy](#), approved by the Policy Approval Group (available on the NHS Lothian intranet)

[Digital IT Security Policy](#), approved by the Policy Approval Group (available on the NHS Lothian intranet)

[Information Risk Management Policy](#), approved by the Policy Approval Group (available on the NHS Lothian intranet)

[Information Security Management System Policy](#), approved by the Policy Approval Group (available on the NHS Lothian intranet)

[Records Management Policy](#), approved by the Policy Approval Group, July 2025

[Warning and Alerts Policy](#), approved by the Policy Approval Group (available on the NHS Lothian intranet)

[Human Resources Policies](#) (including [Guidance on the Maintenance of Personal Files](#)) (available on the NHS Lothian intranet)

7.0 Evidence base

- [Public Records \(Scotland\) Act 2011](#)
- [Scottish Government Records Management Code of Practice for Health and Social Care 2024](#)

- [Freedom of Information \(Scotland\) Act 2002](#)
- [Environmental Information \(Scotland\) Regulations 2004](#)
- [UK Data Protection Act 2018](#)
- [The Inquiries Act 2005](#) and [The Inquiries \(Scotland\) Rules 2007](#)
- [Network and Information System Regulations 2018/Scottish Public Sector Cyber Resilience Framework](#).

8.0 Stakeholder consultation

NHS Lothian consultation groups for this policy have been the Information Governance Working Group (IGWG) and the Digital Portfolio Group (DPG).

A draft version of this policy was placed on the NHS Lothian Consultation Zone for a period of 4 weeks to give all NHS Lothian staff the opportunity to provide comment/feedback.

9.0 Monitoring and review

The Executive Director of Public Health and Health Policy is the nominated Senior Information Risk Owner (SIRO) and the named senior manager with corporate responsibility for records management, as such, they are responsible for the management of NHS Lothian's public records and have executive ownership of this Policy. They also have overall responsibility for the NHS Lothian Records Management Plan.

Operational responsibility for the implementation of the Records Management Plan is held jointly, between the Corporate Records Manager (for corporate records) and the Health of Health Records (for health records). As such, they share operational ownership of this Policy.

Progress in delivery against the Records Management Plan will be reviewed on an ongoing basis. Outputs from this regular progress review will inform the Progress Update Reviews (PURs) which will be prepared and submitted to the Keeper of the National Records of Scotland, from time to time.

Responsibility for reviewing and updating the Records Disposal Policy sits jointly with the Corporate Records Manager and the Head of Health Records.

This policy, and its associated materials, will be reviewed every three years, as a minimum, or as a result of any changes in legislation, guidance, as the result of inspection or audit, or any other factors which may render the policy in need of earlier review.