

Selection criteria:

a. Records relating to the origins and history of NHS Lothian

- ALL administrative or health records prior to 1948
- records of precursor organisations
 - o records relating to many of NHS Lothian's constituent hospital sites and former hospital buildings are already housed at LHASA at the University of Edinburgh
- organisational structure of NHS Lothian, including restructuring or dissolution of departments
- closure, decommissioning or relocation of buildings or services

b. The principal policies and actions of NHS Lothian Board, its committees and sub-committees:

- minutes and papers of the Board and its constituent committees
 - o management boards and other project or working groups, especially where there is likely to be public interest because of the costs involved, risks taken, or impact created
 - o annual reports and major NHS Lothian reports, principal policy documents, including any relating to preparation of legislation and submissions NHS Scotland or Scottish Government and other bodies
- policy, strategic plans and correspondence relating to major policy decisions
- records which illustrate changes of direction or policy or provide clarity on the main strategic functions and obligations of the Board
- records of commissions, tribunals and inquiries investigating decision-making processes or audits
- project files (over £250,000)
- area health plans
- Health and Social Care Partnership records

c. The interaction between NHS Lothian, its stakeholders, patients and the wider public:

- case files, datasets and other records which contain extensive information about the health and lives of the population of the Lothians and which contribute substantially to our knowledge and understanding of the health care needs of the people
- records relating to the political, social, economic, and cultural life of NHS Lothian
 - including records relating to NHS Lothian’s wider contributions to the health and wellbeing of its community – health promotion, public health, meeting the different needs of the population and reducing health inequalities, fundraising, community nursing, as well as the higher-level economic benefits that the Board brings to the area in terms of jobs, training etc.
- records relating to prominent individuals [in relation to the context of their work for NHS Lothian] or events of significant contemporary interest or controversy
 - e.g., records documenting the COVID-19 pandemic
- endowments, legacies, and gift records
- the websites NHS Lothian and its key partners (Health and Social Care Partnerships)

d. NHS Lothian and its staff

- staff newsletters
- photographs or moving images; relevant staff correspondence; long service records
- relevant diaries
- staff research and development findings
- industrial relations (major files only)
- actions to address under-representation of specific groups in employment activities

e. NHS Lothian’s interaction with the physical environment:

- records illustrative of the rights and duties of the Board as a property owner or tenant
- maps and architectural plans
- records demonstrating environmental or sustainability considerations
- impact of major climate or natural disaster

f. Records relating to important aspects of scientific, technological, or medical research and development
<ul style="list-style-type: none"> – particularly where these had a wider application and affected the political, cultural, social, economic or other aspects of the local community in the Lothians – or where they contain unpublished statistical or financial data covering a long period of time or a wide area – statistical and quantitative research either sponsored by NHS Lothian or in conjunction with external researchers or undertaken by outside bodies, where its findings affect the Board’s decision-making, and the research reflects on demographic, medical, social, cultural and economic history or historical geography
g. Some types of health records that have reached the end of their retention periods, but which might be identified as having archival value (paper or electronic)
<ul style="list-style-type: none"> – Registers – admissions, deaths, mortuary, births – Chaplaincy records – Counselling records – Forensic medicine records – Adverse or significant incident reports (major or wide-reaching)
h. Sampling of specific case records within series identified as having significant historical importance, research benefit or reflect important historical trends
<ul style="list-style-type: none"> – Here we might include sampling of patient records – it could be argued that in the future, case notes would demonstrate the work of the Board in greater detail than in more formally recorded minutes etc. Within the limitations imposed by Data Protection legislation, there is provision to retain personal data for research or historical purposes. Such case notes would be closed for many years before access would be permitted (75 years after death for adults and 100 years after death for children). – A similar argument could be made for the permanent preservation of a sample of staff records, clinical and administrative.
i. Records which must be permanently preserved by statute; these are indicated in the Records Management Code of Practice for Health and Social Care, 2024