

# **NSS Document Storage, Retention and Disposal Policy**

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# DOCUMENT CONTROL SHEET

## Key Information:

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<b>Approver:</b>	NSS Partnership Forum
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## Revision History

<b>Version:</b>	<b>Date:</b>	<b>Summary of Changes:</b>	<b>Name:</b>	<b>Changes Marked:</b>
V1.0	2003-01-27	Initial Release	JF/TR	
V2.0	2005-06-15	HPS	SH	
V3.0	2006-05-16	HDL(2006)28	SH/TG	
V3.1	2006-08-01	Divisional Changes	TG	
V3.2	2006-08-11	Changes to text	KK/SH/ TG	
V3.3	2007-06-16	HFS scheduled added Update CLO and NSD schedules	TG	
V3.4	2007-07-27	Amendments to ISD Schedule	TG/PM/ JC	
V3.5	2007-09-26	Amendments to HR Schedule	CH/TG	
V3.6	2007-10-03	Amendments to SNBTS Schedule to reflect European Directive 2005/61/EC	SH/TG	
V3.7	2007-10-19	Amendments to HR Schedule to reflect Equal Pay	CH/TG	
V4.0	2007-11-07	Final		
V4.1	2008-01-15	Amendments to layout to include authorised to dispose column. Amendments to SHSC schedule. Text Corrections	MW/TG  FF	Y  Y
V4.2	2008-02-12	Amendments to ISD Schedule	PM/TG	Y
V4.3	2008-07-14	Update and review inline with release of Records Management: NHS Code of Practice (Scotland)	TG	Y
V4.4	2008-10-08	Amendments following Divisional Consultation before submission to NSS Policy Review Group	TG	Y
V5.0	2008-10-16	Final	TG	
V5.1	2010-05-10	Amendments to Human Resources	SA	Y

		Schedules		
V5.2	2010-07-30 – 2011-01-14	Divisional amendments following BCS Senior Leads comments before undertaking data cleansing across NSS. Amendments to Schedules 1, 9, 12, 15, 16, 18, 19 & 20		
V5.3	2011-01-20	Endorsement by NSS Information Management Group	TG	
V5.4	2013-03-01	Inclusion of retention periods for CCTV images and ICO check list – Schedule 3: Property, Environment and Health & Safety Records	TG	Y
V5.5	2013-06-17	Bi-annual Review – Retention schedules have been reformatted to align with the NSS BCS	TG	
V5.6	2013-07-10	SBU amendments following IMG & RM Leads comments	TG	Y
V5.7	2013-08-30	Amend Public Health & Information to Public Health & Intelligence	TG	Y
V6.0	2013-09-17	Final – Endorsed at Partnership Forum		
V6.1	2013-10-03	Inclusion of retention period for ePrior records	TG	N
V6.2	2015-03-05	Amendment to Schedule 10 – Practitioner & Counter Fraud Services – Professional & Administration Services	TG	N
V6.3	2015-06-24	Bi-annual Review – change to format. Amendment to PHI Schedule 9 – to include reference to Social Care Data under Databases – demographic and epidemiological – inclusion of Directorates	TG	Y
V6.4	2015-08-28	Consolidation of SBU amendments following bi-annual review	TG	Y
V6.5	2015-10-29	Inclusion of comments from IGG and Strategy & Governance Directorate	TG	Y
V7.0	2015-11-11	Final – Approved by Corporate Policy Group. Partnership Forum – December 2015.	TG	N
V7.1	2016-05-06	Amendment to Section 10: Payments And Registration Services, Dental and Ophthalmic	TG	N
V7.2	2016-11-15	Amendment to Abortion Notifications retention period and addition of Abortion database	TG	N
V7.3	2016-02-10	Amendment to Data Intelligence – SPIRE – retention period added	TG	N

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## 1. SUMMARY

“Records management is the systematic control of an organisation’s records, throughout their life cycle, in order to meet operational business needs, statutory and fiscal requirements and community expectations. It is essential that information is captured, managed and preserved in an organised system that maintains its integrity and authenticity. Records management facilitates control over the volume of records produced through the use of disposal schedules, which detail the time period for which different types of records should be retained by an organisation”<sup>1</sup>

In the context of this Policy, a document is a record that contains information (in any media) that has been created or gathered as a result of any aspect of the work of NHS employees. Electronic records form a major part of NSS information holdings.

This Policy document is structured to reflect both the corporate and common types of records that will be held in all parts of NSS and those specific to the workings of the Directorates’ and Support/Strategic Business Units (SBUs).

This Policy is integral to achieving good records management in NSS, and it is vital to compliance with our statutory obligations under the [Public Records \(Scotland\) Act 2011](#), [Freedom of Information \(Scotland\) Act 2002](#), and the [Data Protection Act 1998](#). The Policy is closely aligned to the [NSS Data Protection Policy](#) and NSS policies and arrangements for the security of data held on computer and related media.

This policy applies to all NSS staff and those working on behalf of NSS at any location.

Should members of staff have any difficulties with understanding any aspect of this policy, or require further information in respect of accessibility, interpretation or application of the policy, they should contact HR, their Line Manager or Staff side Representative.

## 2. USEFUL INFORMATION

Other policies/guidance that you may find useful include: -

- [NSS Information Governance Policy](#)
- [NSS Data Protection Policy](#)

The following websites may also be of interest: -

- Scottish Government – Records Management: NHS Code of Practice - <http://www.gov.scot/Publications/2008/07/01082955/0>
- National Records Scotland – Record Keeping - <http://www.nrscotland.gov.uk/record-keeping>

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<sup>1</sup> The National Archives of Scotland (June 2013)

<http://www.nas.gov.uk/recordKeeping/recordsManagement.asp>

- Scottish Information Commissioner - <http://www.itspublicknowledge.info/home/ScottishInformationCommissioner.aspx>

### 3. GENERAL INFORMATION

The retention periods given are only “minimum recommendations” and discretion should be applied before any documentation is disposed. However, decisions to keep records beyond the stated periods must be justified and where this involves personal or patient information, full cognisance must be taken of the Data Protection Act 1998.

Documents of historical importance must not be disposed and should be annotated clearly to that effect. Such documents will relate to events of major importance.

Documents not included in the attached Schedules (Appendix A) of the Policy are those of minor or ephemeral importance e.g. advertising or correspondence. Drafts, duplicates of documents known to have been preserved elsewhere unless they have important minutes/annotations on them, indices/registers compiled for temporary purposes, routine reports and other documents which have ceased to be of value on the matter involved are also not included. Such records may be destroyed forthwith taking due cognisance to the process outline above and local operational requirements. Where copies of a document are routinely kept in more than one part of the organisation (records of SBU Quarterly Performance Reviews, or documents that are uploaded to an internal or external web for an example) then the author will normally retain the prime record, and unless agreed otherwise, all other copies can be destroyed. If copies are retained then these should be destroyed once the stipulated retention period has come to an end.

The Schedules (Appendix A) will be updated by agreement with the Information Governance Group as required, for example where there are legislative changes to the retention of specific records or updated guidance is received from the Scottish Government.

[Section 61 of the Freedom of Information \(Scotland\) Act 2002](#) and the [Records Management: NHS Code of Practice \(Scotland\)](#) requires NSS to log the destruction of its records. A record of the destruction of records listed within this policy, showing their reference, description, reason for destruction, and date of destruction, should be maintained and preserved by the records manager.<sup>2</sup> To meet this requirement NSS has implemented a Document Disposal Register (Appendix B), which will be completed on a divisional basis, and collected annually by Corporate Records Management.

The Schedules contained within this policy are based on the following:

- [The NHS Scotland Records Management: Code of Practice](#)<sup>3</sup>, which set out recommended minimum periods for retention of administrative and personal health records;
- The Blood Safety and Quality Regulations (Statutory Instrument 2005 no: 50) and subsequent amending legislation requires retention periods for full traceability from donor to patient should at the minimum be 30 years or permanently retained;

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<sup>2</sup> Freedom of Information (Scotland) Act 2002 – Code of Practice on Records Management

<sup>3</sup> Scottish Government Records Management: NHS Code of Practice (Scotland) Version 2.1 January 2012

- The Human Tissue (Scotland) Act 2006, where specific records are kept for a minimum of 30 years after expiry of donation. This is further developed by the Human Tissue Authority who provides specific advice in HTA Direction document 002/007.

Where paper records are retained, they should be boxed and clearly labelled showing the type of material stored, the date of storage and the review/destruction date, where appropriate. The use of approved off-site storage facilities is acceptable. The storage arrangements should allow for the timeous retrieval of records and information. The storage conditions should take account of the nature of the media, the retention period and importance of the records to the organisation.

#### **4. STORAGE OF RECORDS**

##### **Corporate Portal:**

The NSS corporate portal is a gateway providing information to all staff, for example NSS policies, procedures, guidelines and newsletters.

There must be a single definitive version of every document made available on the portal, and where required automated documents links will be used to cross-refer to the document from other portal sites and documents. This will ensure that a single version of the document exists.

##### **Offsite Document Storage:**

NSS has arrangements in place for the appropriate and secure storage of documents offsite within a national framework contract. Before any documents are sent to offsite a review/destruction date must be identified.

##### **Permanent Preservation of Records:**

There is a Memorandum of Understanding between the Keeper of the Records of Scotland and NSS setting out the process of depositing, storing and accessing NSS records which are considered worthy of permanent preservation as determined by the Keeper. The records can be in any format, including paper and electronic.<sup>4</sup>

#### **5. RESPONSIBILITIES**

##### **Staff:**

All Staff are responsible for ensuring that records are retained for the periods set out in the schedule and for reporting any failures to line management and, where necessary, to the Corporate Records Manager.

##### **Monitoring and Reporting:**

The Corporate Records Management annual review programme will undertake a review of business unit's compliance with this policy, ensuring that NSS routinely

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<sup>4</sup> Memorandum of Understanding between THE KEEPER OF THE RECORDS OF SCOTLAND and NHS NATIONAL SERVICES SCOTLAND - 2012

disposes of business information that requires to be retained for operational or legislative purposes. Subsequent review reports will be submitted to the Information Governance Group and to the Keeper of National Records Scotland under the Public Records (Scotland) Act 2011, as evidence of NSS compliance with the requirements of the Act.

**Training:**

All Staff will receive training on records management at their initial induction.

Staff will receive further training appropriate to their roles and as determined by their Directorate or Support/Strategic Business Unit Manager. Update sessions will be offered as appropriate to the requirements of their role, taking cognisance of any new legislation.

**6. POLICY REVIEW**

This policy will be reviewed two years from its effective date to ensure that arrangements put in place are appropriate to the operating requirements of National Services Scotland.

**Date policy is effective:**

**Reviewed by:**

Agreed by:

Date:

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**Chair, Information Governance Committee**

## Appendix A: NSS Document Retention Schedules

<b>1 Communications</b>			
<b>BCS Reference – Level 2</b>	<b>Record Type</b>	<b>Retention Period</b>	<b>Authorised to Dispose</b>
<b>Conferences</b>	Lectures given by staff at other conferences	Permanent	
	Organised by NSS – conference proceedings	Permanent	
	Organised by NSS – routine paperwork	Destroy after conference	
	Other conferences attended by staff		
<b>Publications</b>	Annual Report	Permanent	
<b>Media</b>	Press releases	7 years	
	Press cuttings	1 year	
	Press conference reports	3 years	
	Correspondence with branches of the media	7 years	
<b>Image Library</b>	Photographs	Consider for permanent preservation (Corporate and publicity photographs, those not used for patient care purposes)	

## 2 Corporate Governance

<b>BCS Reference – Level 2</b>	<b>Record Type</b>	<b>Retention Period</b>	<b>Authorised to Dispose</b>
<b>Information Governance – Records Management</b>	Databases – records handling system	Permanent (Retain to demonstrate implementation of established practice and provide audit trail, see also Indexes)	
	Indexes – file and document lists marked for permanent preservation	Permanent	
	Indexes – file and document lists not marked for permanent preservation		
<b>Information Governance – Data Protection</b>	Policy Records: <ul style="list-style-type: none"> <li>Procedures for handling subject access requests and other documents regarding practical implementation</li> <li>Documents on the organisation’s Data Protection Policy</li> </ul>	Retain for 5 years after the procedures have been superseded as they may have archival or reference value. Consider for permanent preservation.	NSS Privacy Advisor
	Individual Data Protection subject access requests <ul style="list-style-type: none"> <li>Proof of identity documentation</li> </ul>	6 months after date request completed	SBU Data Protection Lead/SBU Director
	Individual Data Protection subject access requests <ul style="list-style-type: none"> <li>The request, results of searches made, copy of information provided, the consideration of possible exemptions</li> </ul>	6 years after date request completed	SBU Data Protection Lead/SBU Director
<b>Information Governance – Freedom of Information</b>	Policy Records: <ul style="list-style-type: none"> <li>Procedures for handling FOI requests and other documents regarding practical implementation</li> <li>NSS Document Storage, Retention and Disposal Policy</li> <li>Documents on the organisations FOI policy</li> <li>Case Records which lead to the development of precedents and best practice</li> </ul>	Retain for 5 years after the procedures have been superseded as they may have archival or reference value. Consider for permanent preservation.	Associate Director of Corporate Affairs & Compliance
	Individual Transaction Records <ul style="list-style-type: none"> <li>Case file records detailing FOI request, the</li> </ul>	3 years after date of creation	

	consideration of possible exemptions and subsequent appeals		
	Access Status Records <ul style="list-style-type: none"> <li>▪ Statistical data regarding the number of requests answered and their outcomes</li> <li>▪ Details of access decisions taken about records especially any redacted versions of documents released.</li> </ul>	Keep as required for reporting requirements. Suggested retention length is 10 years	
	Information subject to a FOI request but scheduled for destruction	6 months from the date of the last correspondence on the matter	
	Records on any financial transactions	See 'Finance'	
<b>Corporate/Senior Management</b>	Diaries – office	1 year after completion	Corporate Affairs & Compliance Manager
	Receipts for registered and recorded delivery mail	2 years	
<b>Audit</b>	Quality Assurance – Internal Audit Reports	3 years	
	Audit Records – original documents	3 years after formal clearance by statutory auditor	
	Audit Reports – (including Management letters, VFM reports and system/final accounts memorandum)	3 years after formal clearance by statutory auditor	
	Inquires involving fraud / other irregularities	10 years	
	Internal Audit Reports	5 years after the financial year to which they relate	
<b>Feedback</b>	Quality Assurance – Complaints	5 years	
	Quality Assurance – Customer Satisfaction Results	3 years	
<b>Feedback – Complaints</b>	Complaints Register	10 years	Associate Director of Corporate Affairs & Compliance
	Case Records – correspondence / complaints forms	10 years	
	Minutes of Complaints Committees / Independent Review Panels	10 years	
	Complaints: Statistical reports / trend surveys	5 years	
	Non-NSS Complaints	1 year (but destroyed on a rolling quarterly basis)	

<b>Feedback – Complaints (Clinical)</b>	Patient complaints without litigation – adults	7 years	SBU Directors
	Patient complaints without litigation – children and young adults	Until child is 16 or 7 years, whichever is later	SBU Directors
<b>Quality &amp; Performance</b>	Quality Assurance – Management Review minutes	3 years	
	Quality Assurance – corrective action / preventive action	3 years	
	Quality Assurance – Continual Improvement	2 years after completion of project	
	Corporate Policies / SG Circulars	6 years after end of agreement / project to which they refer	
	SNBTS Quality Assurance Records	30 years	
	Performance Assessment Framework Reports	Permanent	
	Minutes of Performance Accountability Reviews with Scottish Executive	Permanent	
	Minutes of Performance Reviews NSS HQ / SBUs	6 years after the end of the period to which they refer	
<b>Research Governance</b>	Research and development (scientific, technological and medical)	Consider for permanent preservation	
<b>Board &amp; Formal Decision Making</b>	Board/Sub-committees Minutes and Reports – master set	Permanent (Main committees and sub-committees of NHS Boards and special Health Boards and other meetings of significance for legal, administrative or historical reasons)	
	Meeting papers – master set	Permanent (Main committees and sub-committees of NHS Boards and special Health Boards and other meetings of significance for legal, administrative or historical reasons)	
	Board members’ declaration of interests	5 years after member ceases to be a member of a public body	
<b>Strategic Planning</b>	Corporate and Divisional Business Plans	Permanent	
	Service Level Agreements	6 years after end of agreement	Head of Relevant Service

	<ul style="list-style-type: none"> <li>▪</li> </ul>		
	Strategic Plans	Permanent	Head of Relevant Service
<b>Legal Support</b>	<ul style="list-style-type: none"> <li>▪ Legal actions (adult)</li> </ul>	7 years after case settled or dropped	Chief Executive
	Legal actions (child)	Until child is 18 or 7 years after case settled or dropped, whichever is later	Chief Executive
	Litigation dossiers – complaints including accident reports	10 years (Where a legal action has commenced see Legal Actions)	Chief Executive
<b>Programme, Project and Portfolio Management</b>	Programme Management Documentation – (£250,000 and over), including abandoned or deferred programmes	Permanent	
	Programme Management Documentation – (under £250,000), including abandoned or deferred programmes	6 years after completion / abandonment of programme	
	<p>Project files (£250,000 and over)</p> <p>Examples include (but not exhaustive):</p> <ul style="list-style-type: none"> <li>▪ Project Mandate</li> <li>▪ Project Brief and Scoping Documentation</li> <li>▪ Project Initiation Document (PID)</li> <li>▪ Business Case</li> <li>▪ Risk and Issue Logs</li> <li>▪ Project Plans</li> <li>▪ Project Communication Strategies and communication materials</li> <li>▪ Project Reports – End Reports, Lessons Learned, Progress Reports, BAU Handover Documents</li> <li>▪ Project Steering Board Documentation</li> <li>▪ Project Team Documentation</li> <li>▪ Privacy Impact Assessments (PIAs)</li> </ul>	Permanent (Including abandoned or deferred projects)	
	Project files (under £250,000)	6 years after completion /	

	<p>Examples include (but not exhaustive):</p> <ul style="list-style-type: none"> <li>▪ Project Mandate</li> <li>▪ Project Brief and Scoping Documentation</li> <li>▪ Project Initiation Document (PID)</li> <li>▪ Business Case</li> <li>▪ Risk and Issue Logs</li> <li>▪ Project Plans</li> <li>▪ Project Communication Strategies and communication materials</li> <li>▪ Project Reports – End Reports, Lessons Learned, Progress Reports, BAU Handover Documents</li> <li>▪ Project Steering Board Documentation</li> <li>▪ Project Team Documentation</li> <li>▪ Privacy Impact Assessments</li> </ul>	abandonment of project	
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### 3 Estates and Facilities

BCS Reference – Level 2	Record Type	Retention Period	Authorised to Dispose
<b>Property Development</b>	Agreements with consultants and contractors	6 years after they cease to be effective	Associate Director of Facilities Management
	Property Strategy	Permanent	
<b>Accommodation Services</b>	Receipts for registered and recorded delivery mail	2 years	
	Laundry Lists	See ' <i>Accounts – minor</i> ' under ' <i>Financial Records</i> ' below	Associate Director of Facilities Management
	Visitors Books	3 years (unless considered to be of historical interest)	
<b>Health and Safety</b>	Asbestos Inspections	Permanent	
	Safety Action Bulletins	Permanent	
<b>Property &amp; Land Management</b>	Asset Register (including small equipment)	6 years after end of period to which it refers	Associate Director of Facilities Management
	Buildings and Engineering Records	2 years after they cease to be effective	Associate Director of Facilities Management
	Buildings – papers relating to occupation	Permanent or until property demolished or disposed. (Does not include Health and Safety information)	Associate Director of Facilities Management
	Capital charges data	3 years after completion of previous 5 year valuation term	Associate Director of Facilities Management
	Carbon Reduction Commitment (CRC) Report	6 years	Director of Strategy & Governance
	CCTV Images	Not to be kept longer than 21 days. On occasion, you may need to retain images for a longer period, where a law enforcement	Associate Director of Facilities Management

		body is investigating a crime, to give them opportunity to view the images as part of an ongoing investigation.	
	ICO Check Lists for CCTV	3 years from review date	Associate Director of Facilities Management
	Engineer's report on boilers, lifts etc	2 years after plant is decommissioned	Associate Director of Facilities Management
	Environmental Information	Permanent	
	Contaminated Land	Permanent	
	Conversion records for historic buildings	25 years after issue	Associate Director of Facilities Management
	Estimates: including supporting calculations and statistics	3 years	Associate Director of Facilities Management
	Drawings	2 years after they cease to be effective	Associate Director of Facilities Management
	Greencode	Permanent	
	Indemnity Forms	Permanent	
	Inspection Report	2 years after plant is decommissioned	Associate Director of Facilities Management
	Inventories (non-current) of items having an operational lifetime of less than 5 years	2 years	Associate Director of Facilities Management
	Maps	Consider for permanent preservation	Associate Director of Facilities Management
	Property – cleaning and maintenance (contracts less than £100,000)	6 years	Associate Director of Facilities Management
	Property Management System	Permanent	
	Property performance	Permanent	
	Property/Estates – Land, Building and Engineering Construction Procurement: Key records including <ul style="list-style-type: none"> <li>▪ Final Accounts</li> <li>▪ Surveys</li> </ul>	Permanent (Inclusive of major projects abandoned or deferred)	

	<ul style="list-style-type: none"> <li>▪ Site plans</li> <li>▪ Bills of quantities, PFI/PPP records</li> </ul> <p>Town and country planning matters and all formal contract documents, including</p> <ul style="list-style-type: none"> <li>▪ Executed agreements</li> <li>▪ Conditions of contract</li> <li>▪ Specifications</li> <li>▪ "as built" record drawings and documents on the appointment and conditions of engagement of private buildings and engineering consultants</li> </ul>		
	Property – Terriers (NHS Premises Site Information)	Permanent	
	SEPA Registrations, Licenses and Consents	Permanent	
	Security Occurrence Books		
	Site Plans	Permanent	
	Specifications for work tendered	6 years	Associate Director of Facilities Management
	Surveys (including Land)	2 years after they cease to be effective	Associate Director of Facilities Management
	Waste Consignment Notes – Controlled wastes such as clinical/healthcare and household/domestic	2 years	Associate Director of Facilities Management
	Waste Consignment Notes – Special/Hazardous/Radioactive Wastes	3 years	Associate Director of Facilities Management
	Waste – Duty of Care Inspection Reports	Permanent, or for life of external contract	
<b>Property Transactions</b>	Land purchase and sale – deeds, leases, maps, surveys, registers etc	Permanent	
	Land purchase and sale – negotiations not completed	6 years	Associate Director of Facilities Management
	Property – acquisitions dossiers	Permanent	
	Property – disposal dossiers	Permanent	
	Property – purchases	Permanent	
	Property Valuations	6 years after property disposed of	Associate Director of

			Facilities Management
	Property – Leases	Permanent	
	Title Deeds/Leases/Property Acquisition/Disposal Dossiers	Permanent	
	Property – minor contracts	6 years	Associate Director of Facilities Management
	Tenders (successful)	See contracts above	Associate Director of Facilities Management
	Tenders (unsuccessful)	6 years	Associate Director of Facilities Management
<b>Maintenance of Property</b>	Maintenance contracts	See ' <i>Property – Cleaning and Maintenance</i> '	Associate Director of Facilities Management
	Maintenance manuals	Destroy when plan no longer in use	Associate Director of Facilities Management
	Maintenance request book	2 years after financial year referred to	Associate Director of Facilities Management

## 4 Financial Management

BCS Reference – Level 2	Record Type	Retention Period	Authorised to Dispose
<b>Accounts and Reporting</b>	<b>Corporate Planning/Management Accounts</b>		Head of Corporate Planning & Reporting
	Budget Monitoring Statements	5 years after the financial year to which they relate	
	Budgets	2 years after completion of audit	
	Finance Board Papers	2 years after completion of audit	
	Expenditure Statements	6 years after the financial year to which they relate	
	Expenditure Statements – ad hoc	1 year after the financial year to which they relate	
	Financial Plans	6 years after the financial year to which they relate	
	Funding Data	6 years after the financial year to which they relate	
	Scottish Executive Returns	6 years after the financial year to which they relate	
	<b>Group Accounting</b>		Financial Accountant
	Fixed Asset Reports	6 years after the financial year to which they relate	
	Property Valuations	Permanent	
	Capital Charges Data	6 years after the financial year to which they relate	
	SFR Returns	6 years after the financial year to which they relate	
	Statutory Accounts	Do not destroy signed accounts	
	VAT Returns	6 years after the financial year to	

		which they relate	
	Annual Accounts – working papers	6 years after the financial year to which they relate	
	Balance Sheet Reconciliations – Fixed Assets	6 years after the financial year to which they relate	
	Balance Sheet Reconciliations – Debtors Creditors Stock	6 years after the financial year to which they relate	
	Fixed Asset Forms (Additions, Disposals & Transfers)	6 years after the financial year to which they relate	
	Construction Industry Scheme Records	6 years after the financial year to which they relate	
	Premature Retirement SPPA Letters and Calculations	Permanent	
<b>Financial Transactions Management</b>	<b>Treasury</b>		Principal Finance Manager
	Accounts – minor records – including: <ul style="list-style-type: none"> <li>▪ Paying-in slips</li> <li>▪ Cheque counterfoils, cancelled/discharged cheques</li> <li>▪ Petty cash, expenditure</li> <li>▪ Duplicated receipt books</li> </ul>	3 years after completion of audit	
	Bank Reconciliations	6 years after the financial year to which they relate	
	Bank Statements	6 years after the financial year to which they relate	
	Non Standard Payment Requests	6 years after the financial year to which they relate	
	Income Collection Sheets	6 years after the financial year to which they relate	
	Remittance Advice	6 years after the financial year to which they relate	
	Instructions to Banks	6 years after the financial year to which they relate	

	Government Purchasing Card Records	6 years after the financial year to which they relate	
	<b>Accounts Payable</b>		Principal Finance Manager
	Creditor Payment Runs	3 years after the financial year to which they relate	
	Indemnity Forms	6 years after the financial year to which they relate	
	Bank trace file / legal correspondence	6 years after the financial year to which they relate	
	Supplier Invoice / Credit Notes (including Capital)	6 years after the financial year to which they relate	
	Supplier Statements	Most recent statement	
	Correspondence / cheques for Oxygen Concentrator Patients	3 years after the financial year to which they relate	
	SFR 30 Agreements	6 years after the financial year to which they relate	
	<b>Accounts Receivable</b>		Principal Finance Manager
	Customer Account Details	Permanent	
	Sales Ledger Reports		
	- Aged Debt	3 years after the financial year to which they relate	
	- Audit Trail	3 years after the financial year to which they relate	
	- Balances Due	3 years after the financial year to which they relate	
	Bad Debt Files	6 years after the financial year to which they relate	
	Sales Invoices & Credit Note Requests	6 years after the financial year to which they relate	
	SFR 30 Agreements	6 years after the financial year to which they relate	

	Debit and Credit Adjustments	3 years after the financial year to which they relate	
<b>Payroll and Pensions</b>	<b>Payroll</b>		Payroll Manager
	<b>Pay Records</b>		
	Personal Files	Payroll records from the 1 <sup>st</sup> January 2000 should be kept indefinitely – Equal Pay Recommendations	
	Duty / Timesheets	2 years after the financial year to which they relate	
	Source Documents for Overtime, On Call, Emergency Duty, Lecture Fees, Domiciliary Visits, Bonus, ADHs	2 years after the financial year to which they relate	
	Weekly Sickness for Monthly Paid Staff	1 year on a rolling basis	
	Payroll Expense Claims	6 financial years	
	<b>Travel and Subsistence Claims</b>	3 years after completion of Audit	
	<b>Computer Output</b>		
	Calculate / N.I. Aggregation Report QPA 005	1 year on a rolling basis	
	Banking Output – BACS List QPA 008	1 year on a rolling basis	
	Payroll Fiche QPA 009	Permanent	
	Advance Warnings / Calculate Messages / Other Payments QPA 009	1 year on a rolling basis	
	Cash List (Acquittance) QPA 009	2 years on a rolling basis	
	Allowance Deduction Code Analysis QPA 013	1 year on a rolling basis	
	Zero Net Pays QPA 014	1 year on a rolling basis	
	Protection Report QPA 016	1 year on a rolling basis	
	Residency Return QPA 017	1 year on a rolling basis	
	Non-Duty Sheet Indicator QPA 034	1 year on a rolling basis	
	Superannuation Link QPA 034	1 year on a rolling basis	
	Sickness Absence Report QPA 400	1 year on a rolling basis	
	Temporary Variation Details QPA 702	1 year on a rolling basis	

	Control Totals QPA 770	Retained by Payroll Manager with Tax, National Insurance and Superannuation Reconciliation	
	Daily Log QPA Logprint	1 year on a rolling basis	
	Sickness Absence Log QPA Sickprint	1 year on a rolling basis	
	<b>Crown Cars</b>		Leased Cars Manager or Payroll Manager
	Authorised Cars User Forms	6 years after the financial year to which they relate	
	Driving Licences	6 years after the financial year to which they relate	
	Salary Deduction Sheet	6 years after the financial year to which they relate	
	Lease Car Register	3 year on a rolling basis	
	Successful Tenders	6 years after the financial year to which they relate or contract expires	
	All documentation relating to tender exercises	6 years after the financial year to which they relate or contract expires	
	Quotations	3 years after the financial year to which they relate or contract expires	
<b>Financial Systems</b>	<b>Consortium Project Team</b>		FMIS and Consortium Project Manager
	Cedar e-financials data including sales invoices, purchase orders and goods receipts and returned notes held within the General Ledger / Sales Ledger / Purchase Ledger / Cash Management / Purchase Ordering / Stores / Fixed Assets modules	10 years after the financial year to which they relate	
	Assyst helpdesk records	2 years	

	Systems access request forms	For life of Cedar e-financials	
	Project Plans and Documentation	3 years after the financial year to which they relate	
	Technical Specifications and Proposals	3 years after the financial year to which they relate	
<b>Procurement</b>			Procurement Manager
	Supplier Account Records	Permanent	
	Manual Requisitions	2 years after the financial year to which they relate	
	Requisition Planned Report REQ_R08	1 month on a rolling basis	
<b>Financial Systems Customer Care</b>	<b>Customer Relations</b>		Customer Relations and Performance Improvement Manager
	Service Level Agreements	6 years after the financial year to which they relate	

## 5 Human Resources

BCS Reference – Level 2	Record Type	Retention Period	Authorised to Dispose
<b>Staff Governance – Occupational Health and Safety</b>	Accident Forms	10 years minimum	Head of Service
	Reporting Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) including accident registers and reports	10 years minimum	Head of Service
	Audit Inspection Records	10 years minimum	Head of Service
	Health and Safety Committee Proceedings	10 years minimum	Head of Service
	Staff Occupational Health Records	10 years after leaving service	Head of Service
	Occupational Health SLA's and Procedures	6 years after award	Head of Service
	Mandatory Occupational and Health Safety Training Records	10 years after leaving service	Head of Service
	Asbestos Register	40 years	Head of Service
	All COSHH Documentation <ul style="list-style-type: none"> <li>▪ Safety Data Sheets</li> <li>▪ Risk Assessments</li> <li>▪ Risk Control Measures</li> <li>▪ Health Surveillance</li> </ul>	10 years minimum 10 years minimum 10 years minimum 40 years	Head of Service
	Ionising Radiation Regulations 1995 <ul style="list-style-type: none"> <li>▪ Health Records</li> <li>▪ Examination of respiratory equipment</li> <li>▪ Radiation passbooks</li> </ul>	50 years from date of last entry or age 75, whichever is longer 2 years 5 years after end of use	
Occupational Health Reports	6 years after leaving service	Director of Human Resources & Workforce Development	

	Health promotion – core papers and visual materials relating to major initiatives	Consider for permanent preservation	Head of Healthy Working Lives
<b>Administering Employees</b>	Disciplinary: First written warning	6 Months	Director of Human Resources & Workforce Development
	Disciplinary: Final written warning	12 months	
	Disciplinary: First and final written warning	12 months	
	Disciplinary: Letter of Dismissal	10 years	
	Disciplinary: Records of action taken, including <ul style="list-style-type: none"> <li>▪ Details of rules breached</li> <li>▪ Employee's defence or mitigation</li> <li>▪ Action taken and reasons for it</li> <li>▪ Details of appeal and any subsequent developments</li> </ul>	6 years after leaving service	
	Establishment records – major including: <ul style="list-style-type: none"> <li>▪ Personnel files</li> <li>▪ Application forms, Letters of application and appointment</li> <li>▪ Contracts of Employment</li> <li>▪ Joining forms</li> <li>▪ Relevant pre and post-employment checks, for example, identity, eligibility to work in the UK, relevant qualifications, professional registration, references</li> <li>▪ Disclosure Scotland checks where applicable – only retain record of level of check, certificate number and outcome. Disclosure certificate must not be retained and must be destroyed in accordance with Disclosure Scotland Code of Practice (i.e. within 90 days)</li> <li>▪ Change forms</li> <li>▪ Job Descriptions</li> <li>▪ Job History</li> <li>▪ Sickness e.g. medical certificates</li> <li>▪ Summary of record of service (including name,</li> </ul>	Records for current staff, and for all leavers from 1 <sup>st</sup> January 2000, should be kept indefinitely – Equal Pay Recommendations	

	<ul style="list-style-type: none"> <li>position held, dates, etc)</li> <li>▪ Termination forms and correspondence</li> </ul>		
	Establishment record – minor including: <ul style="list-style-type: none"> <li>▪ Attendance books</li> <li>▪ Annual leave records</li> <li>▪ Duty rosters</li> <li>▪ Clock cards</li> <li>▪ Timesheets</li> </ul>	Records of current staff, and for all leavers from 1 <sup>st</sup> January 2000, should be kept indefinitely – Equal Pay Recommendations	
	All other HR records relating to pay, grade and employment history	Records of current staff, and for all leavers from 1 <sup>st</sup> January 2000, should be kept indefinitely – Equal Pay Recommendations	
<b>Employee Engagement</b>	Industrial relations (not routine)	Permanent	
<b>Training and Development</b>	Personal Development: Appraisals / KSF Development Reviews	Records of current staff, and for all leavers from 1 <sup>st</sup> January 2000, should be kept indefinitely – Equal Pay Recommendations	
	Personal Development: Nurses – training records	Minimum of 40 years after completion of training	Nurse Director
	Personal Development: Study leave applications	2 years	Director of Human Resource and Workforce Development
	Personal Development: Training Records	Records of current staff, and for all leavers from 1 <sup>st</sup> January 2000, should be kept indefinitely – Equal Pay Recommendations	
<b>Recruitment</b>	Applications for employment – unsuccessful applicants	12 months after completion of recruitment procedure	Director of Human Resource and Workforce Development
	Job Advertisements	12 months after completion of recruitment procedure	Director of Human Resource and Workforce Development

## 6 Information Technology

<b>BCS Reference – Level 2</b>	<b>Record Type</b>	<b>Retention Period</b>	<b>Authorised to Dispose</b>
<b>Internal IM&amp;T</b>	Software licenses	Operational lifetime of product	BSS Manager

## 7 Scottish National Blood Transfusion Service

The guidance below is based on that published within:

- British Committee for Standards in Haematology guidelines 2012,
- Eudraxex (Orange Guide) Volume 4 – Chapter 4: Documentation
- Eudraxex (Orange Guide) Volume 4 – Annex 19: Reference & Retention Samples
- European Directive 2002/98/EC – Setting Standards of Quality & Safety for the Collection, Testing, Processing, Storage & Distribution of Human Blood & Blood Components
- European Directive 2003/63/EC – Amending Directive 2001/83/EC of the European Parliament and the Council of the Community Code Relating to Medicinal Products for Human Use
- European Tissue Directive 2004/23/EC Tissue Safety and Quality Regulations
- Guidelines for the Blood Transfusion Services in the UK (Red Book)
- Human Tissue (Scotland) Act 2006
- OECD Series on Principles of Good Laboratory Practice & Compliance Monitoring (No.15 – ENV/JM/MONO(2007)10)
- Scottish Government Records Management: NHS Code of Practice (Scotland) Version 2.1 – January 2012
- Statutory Instruments 1999 No. 3106 – The Good Laboratory Practice Regulations 1999
- Statutory Instruments 2004 No. 994 – The Good Laboratory Practice (Codification Amendments Etc.) Regulations 2004
- Statutory Instruments 2005 No. 50 – The Blood Safety and Quality Regulations 2005
- The Medicines Act 2003 – The Medicines for Human Use Regulations 2005
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- The Retention & Storage of Pathological Records & Specimens (5<sup>th</sup> Edition, April 2015) – Guidance from the Royal College of Pathologists and the Institute of Biomedical Science

BCS Reference – Level 2	Record Type	Retention Period	Authorised to Dispose
<b>Blood Information Services</b>	Microfiched Reports	Permanent	
	SACTTI Working Group (vCJD)	Permanent	
<b>Clinical Services</b>	Accreditation documents and records of inspections	Minimum of 8 years, or at least 2 inspection cycles (anticipating a 4 yearly cycle for accreditation against ISO 15189), whichever is longer	
	Annual reports (where required by the BSQR)	15 years	
	Batch records	At least 8 years	
	Blocks for electron microscopy	Keep for at least 30 years	
	Blood Bank Register, blood component audit trail and fates: <ul style="list-style-type: none"> <li>▪ Blood component supplier identification</li> <li>▪ Issued blood component identification</li> <li>▪ Transfused recipient identification</li> </ul>	At least 30 years to allow full traceability of donor and recipient	

	<ul style="list-style-type: none"> <li>▪ Blood units not transfused; confirmation of subsequent disposition (discard/other use)</li> <li>▪ Lot number(s) or derived component(s) if relevant</li> <li>▪ Date of transfusion or disposition (day, month and year)</li> </ul>		
	Blood for grouping, antibody screening and saving and/or cross-matching	<p>a) Keep for a minimum of 7 days from group and screen, stored at +4°C.</p> <p>Samples must be available for a minimum of 3 days post-transfusion for investigation of acute transfusion reactions</p>	
	Body fluids, aspirates and swabs	48 hours after final report. For deteriorated body fluids, aspirates and swabs discarded immediately after analysis.	
	Bound copies of reports/records, if made	30 years	
	Clinical Trials	For at least 15 years after completion or discontinuation of trial or for at least two years after the granting of the last marketing authorisation in the European Community or for at least 2 years after formal discontinuation of clinical development of the investigational period.	
	Correspondence on patients	This should be lodged in patient's record. Otherwise, keep for at least 30 years.	
	Daily work logs (day books and electronic equivalents) and other records of specimens received by a laboratory	8 Years from specimen receipt to ensure availability for review through at least 2 full cycles of laboratory accreditation.	

	Electrophoretic strips and immunofixation plates	Keep for 5 years, unless digital images are taken. If digital images of adequate quality for diagnosis are taken, then the original preparations may be discarded after 2 years. The images should be stored as discussed under "Photographic Records", bearing in mind the need to maintain the ability to read archived digital images when equipment is updated.	
	Equipment maintenance logs	Instrument lifetime plus 1 full accreditation cycle (4 years).	
	External Quality Assurance (EQA) records	<ul style="list-style-type: none"> <li>▪ Most external quality assessment (EQA)/proficiency testing providers maintain the capacity to regenerate reports of participant's performance rather than the individual records themselves. This capacity should be maintained for at least 5 years to allow retrospective review in the event of an official enquiry into performance and as a back up for retrieval of data needed by participants' for their next cycle of UKAS accreditation. This should apply equally to laboratory technical EQA schemes and schemes addressing clinical competence.</li> </ul> <p>Participants' returns (electronic or hard copy) received for data</p>	

		<p>entry. These should be kept for at least 3 months (or one month after the report has been sent to the participant, if longer), as working documents, to facilitate identification, checking and correction of discrepancies.</p> <p>Performance surveillance records including communications with and complaints from' Participants:</p> <ul style="list-style-type: none"> <li>• Ethical approval and consent records for donated material,</li> <li>• Quality assurance and safety documentation relating to circulated materials, including virus testing, where relevant, and homogeneity results from third-party suppliers,</li> <li>• Records of contractual agreements with commercial and NHS suppliers.</li> </ul> <p>Storage of such records is recommended for at least 5 years.</p>	
	Foetal Serum	Because of its rarity and value for future research, wherever possible foetal serum should be kept for at least 30 years	

	Forensic material – criminal cases	In cases where criminal proceedings can be anticipated, all recordings made at the autopsy, be they handwritten notes (by everyone i.e. pathologist, technician, trainee, etc), tape recordings, drawings or photographs, are all documentary records and as such their existence must be declared (disclosed) and they must be kept permanently. They must be available to all involved throughout the lifetime of the case, including appeals and other reinvestigations. They are not normally entered in the patient record.	
	Forensic Material – Autopsy Records, specimens, archived material and other, where the deceased has been the subject of a Coroner’s autopsy.	<p>a) HM Coroners or Procurators Fiscal have absolute dominion over autopsy reports. They are confidential to them and may not be released without their consent to any third party. It is good practice to lodge copies of autopsy reports in the deceased’s notes but the consent of the Coroner or Procurator Fiscal should be obtained.</p> <p>b) Independent pathology practitioners undertaking post-mortem examinations on behalf of Coroners or Procurators Fiscal must ensure that they use facilities to store record and specimens that have governance arrangements</p>	

		equal to those pertaining to NHS and academic institutions used for these purposes. Indeed all practices regarding retention and disposal of post-mortem records and specimens by such practitioners in the UK must be directly comparable to those applicable to practitioners directly employed by HTS-license NHS or academic institutions.	
	Permanently preserved cultures	Permanently retained.	
	Frozen dried or other permanently preserved cultures	These should be retained permanently where archived in collections accessible for reference and research, such as those nationally or locally recognised	
	Frozen tissue for immediate histological assessment (frozen section)	Stained microscope slide should be kept for a minimum of 10 years	
	Frozen tissue or cells for histochemical or molecular genetic analysis	Keep for at least 10 years and preferably longer if storage facilities permit. This advice includes EBV-transformed and fibroblast cell lines. Retention for at least 3 months (longer if space permits) is recommend for cytogenetic cell suspensions in fixative	
	Grids for electron microscopy	Requirements in different specialities differ: a) Grids prepared for human tissue diagnosis (e.g. renal, muscle, nerve or tumour) should be kept for 10 years; preferably longer b) Grids prepared for virus identification may be discarded 48	

		hours after the final report has been issued, provided that all derived images are retained and remain accessible for at least 30 years	
	Human DNA and RNA	<ul style="list-style-type: none"> <li>a) Keep for a minimum of 8 weeks after final report for diagnostic specimens</li> <li>b) At least 30 years if needed for family studies in those with genetic disorders or if stored as donor/recipient material in the context of cell or tissue transplantation</li> </ul>	
	Internal quality control records	8 years	
	Laboratory file cards or other working records of test results for named patients	<p>30 years</p> <p>One year from specimen receipt if all results transcribed into a separately issued and stored formal report. The diversity of these types of working records is very wide; within individual specialities and departments, consideration should be given to the potential audit or medicolegal value of storing such working records for 30 years, as for other primary records.</p> <p>It is recommended by the Royal College of Pathologists that results of tests undertaken by external laboratories, where records are held by those laboratories and the results are transcribed locally into a cross-</p>	

		referenced report, are regarded as such working documents.	
	Mislabelled sample request forms	8 years, or at least 2 inspection cycles	
	Mislabelled samples log	8 years, or at least 2 inspection cycles	
	Museum specimens, where these are generally accessible for undergraduate or postgraduate study (teaching collections)	These may be retained permanently (provided there is no deterioration, or until replaced by a better specimen)	
	Newborn blood spot screening cards	A minimum of five years' storage is mandated as part of quality management, with long term storage recommended in accordance with the Public Health England NHS Newboard Blood Spot Screening Programme's <i>Code of Practice for the Retention &amp; Storage of residual Spots (2005)</i>	
	Paraffin wax or resin embedded blocks for histology	Storage for at least 30 years is recommended, if facilities permit. If not, review the need for archiving at 10 years and select representative blocks, showing relevant pathology, for permanent retention	
	Pathological archive or museum catalogues	For as long as the specimens are held or until the catalogue is updated, subject to consent where required (with maintained and accessible documentation of consent)	
	Photographic records	Where images represent a primary source of information for the diagnostic process, whether conventional photographs (+/- negatives; e.g. for	

		electron microscopy) or digital images, they should be kept for at least 30 years. In practice, most such circumstances are rare; they may include, for example, some macroscopic specimen records and images from post-mortem examinations	
	Plasma and Serum	<p>Keep for 48 hours after final report has been issued by the laboratory.</p> <p>In transplant centres, serum samples obtained from recipient(s) for the purpose of matching in cell/tissue transplantation, and their accompanying records, must be kept for the lifetime of the recipient.</p> <p>For transplant-related virology/microbiology samples, a minimum of 10 years for donor material, and 30 years for recipient material is recommended, which is consistent with SaBTO guidance on the microbiological safety of human organs, tissue and cells used in transplantation; the associated virology/microbiology records should be stored retrievably for 30 years.</p> <p>Serum from the first pregnancy booking visit should be kept for two years by microbiology/virology and other relevant laboratories to provide a baseline for further serological or other test for infections or other disease during pregnancy and the first 12</p>	

		<p>months after delivery.</p> <p>Sera for virological assessment of individuals dialysed overseas should be retained for one year.</p> <p>Wherever possible fetal serum (from cordocentesis) should be kept for 30 years.</p> <p>Serum taken after needlestick injury or other hazardous exposure should be kept for a minimum of 2 years. Other left-over sera or plasma should be stored for as long as practicable, to provide an array of material for future research and disease surveillance purposes. While long term storage may be impractical in many settings, virology centres and laboratories involved routinely in public health activities should retain sera for a minimum of one year to facilitate 'look-back' exercises, identification of emerging infections and vaccine programming monitoring.</p>	
	Point-of-care test data	Results should be entered into the patient's record; the log of specimens analysed should be retained for at least the lifetime of instrument	
	Protocols of Standard Operating Procedures	Both current and outdated protocols should be dated and kept in a catalogued, accessible format for at least 30 years	
	Records of service inspections and instrument	Lifetime of instrument; plus a minimum	

	maintenance	of four years.	
	Records of telephoned or faxed reports	<p>Note of the fact and date/time that a telephoned or faxed report has been issued should be added to the laboratory electronic record of the relevant report, or to hard copies, and kept for minimum of five years. Where management advice is discussed in telephone calls, a summarised transcript should be retained long term, as for retention of other correspondence.</p> <p>Clinical information or management advice provided by fax, in addition to pure transmission of a report, should also be kept as correspondence filed in the patient's notes and/or stored with a laboratory copy of the specimen request/report for 30 years.</p>	
	Records relating to cell/tissue transplantation	Records not otherwise kept or issued to patient records that relate to investigations or storage of specimens relevant to cell/tissue transplantation, including donated organs from deceased individuals, should be kept for at least 30 years or the lifetime of the recipient, whichever is longer	
	Records relating to retention of semen, spermatozoa, oocytes and tissues for fertility assessment and use of assisted reproduction	Records not otherwise retained or issued to patients record that related to investigation or storage of specimens of semen, spermatozoa, testicular tissue,	

		oocytes, ovarian tissue, embryos created by IVF/ICSI, biopsied polar bodies, blastomeres and trophoctoderma should be kept for 30 years.	
	Records relevant to production of diagnostic products or equipment	Comprehensive records relevant to procurement, use, modification and supply: at least 8 years	
	Refridgerator and freezer charts	These should be kept for 15 years	
	Reports and copies (physical or electronic)	6 months or as needed for operational purposes	
	Request forms	<p>It is prudent to keep request forms until the authorised report, or reports on investigations arising from it. As this period of time may vary with local circumstances, with no recommended minimum retention time, but ordinarily request forms need not be kept for longer than one month after the final report has been dispatched. For many uncomplicated requests, retention for one week should suffice.</p> <p>Where paper directly duplicates an electronic request (e.g. many order comms systems), there is no absolute requirement to retain the paper copy.</p> <p>Where the request form contains clinical information not readily accessible in the patient's notes in the interpretation of test data (as in</p>	

		<p>screening for alpha fetoprotein, cytogenetic and molecular genetics testing), the request should be kept for at least 30 years.</p> <p>Similarly, where the request form is used to record working notes or as a worksheet, it should be retained as part of the laboratory record unless the information is transcribed to another source (such as a computer record).</p>	
	Request forms for grouping, antibody screening and cross-matching	Retain for 1 month	
	Results of grouping, antibody screening and other blood transfusion-related tests	Retain for 30 years, in compliance with the Blood Safety and Quality Regulations	
	Separated serum, or plasma, stored for transfusion purposes	<p>a) Recipient plasma/serum samples should be stored for up to 14 days post-transfusion for investigation of a delayed transfusion reaction.</p> <p>b) Storage of donated serum/plasma should optimally be stored at -30°C or colder. These materials may be stored for up to 6 months</p> <p>c) Archived blood donor samples should be stored by blood services for at least 3 years, and preferably longer if it is practicable, in order to facilitate 'look-back' exercises</p>	
	Stained slides	a) Microbiological (e.g. cerebrospinal fluid preparations, malarial blood films, blood culture films, acid-fast bacilli cultures): 7 days after final report. Standard Gram-stained	

		<p>preparations from culture plates may be discarded immediately after use</p> <p>b) Blood films, routine: 7 days after final report</p> <p>c) Cytogenetic preparations: 2 years after final report, if photographic or digitised record kept; 5 years otherwise. If photographed or digitised, the image should be stored with maintained accessibility for 30 years if feasible.</p> <p>d) Molecular genetic and molecular cytogenetic preparations (e.g. microarray slides, fluorescence <i>in-situ</i> hybridisation [FISH] slides): A representative photographed or digitised image should be captured for all patients and stored with maintained accessibility for 30 years. Long-term storage of fluorescently stained slides is problematic but these should be retained at least until the final written report has been authorised and issued</p> <p>e) Bone marrow films: Stained films used for diagnosis, 30 years minimum Cytology, including population screening: 10 years minimum, and longer if possible for audit purposes.</p> <p>f) Histology: at least 10 years, and longer if practicable</p> <p>g) Semi-permanent preparations such as direct immunofluorescence slides, used in variety of pathology</p>	
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		disciplines, should be kept at least until the final specimen report has been issued.	
	Storage of material following analyses of nucleic acids	Developing technologies means that there is ever-increasing variety of hard copy and/or electronic outputs associated with the analysis and interpretation of diagnostic tests using nucleic acids. It is recommended that such outputs should be stored for at least 30 years unless the technical details and interpretation are transcribed into a permanently accessible report formats authorised by senior clinical laboratory staff or pathologists. The latter reports should then be kept for at least 30 years, as for other pathology reports, and the machine outputs may be regarded as working documents. For such working documents, storage for at least 5 years is recommended.	
	Surgical (histological) reports	30 years	
	Whole blood samples, for full blood count	Retain specimens for 24 hours	
	Worksheets	At least 30 years to allow full traceability	
<b>Quality &amp; Regulatory</b>	Audit (Internal, external, supplier, vendor, etc)	30 Years	
	Batch Issue History Sheets	Permanent	
	Batch Records (Externally Manufactured Product)	5 years	
	Batch Records (Finished Product)	Permanent	
	Batch Records (Intermediates)	Permanent	
	Batch Records (Raw Materials)	5 years	

	Change control	30 years	
	Commissioning Documents	Permanent	
	Defect Reports	Permanent	
	Donor Guidelines (Master Copy)	Permanent	
	Electronic Records held on: <ul style="list-style-type: none"> <li>▪ eProgesa</li> <li>▪ Traceline</li> <li>▪ Tissue Trace</li> <li>▪ Proteus</li> </ul>	Minimum of 30 years Minimum of 30 years Minimum of 30 years 5 years	
	Environmental Monitoring Printouts and Records	30 years	
	Epidemiology Data	Permanent	
	Equipment Logbooks	30 years	
	External Inspection Reports (e.g. MHRA, HTA, CPA and Follow Up)	Permanent	
	GxP Risk Assessments	30 years	
	Haemovigilance records (SABRE/SHOT/HTA reports)	15 years	
	In-House Audits	30 years	
	Incident Reports	30 years	
	Legionella Water Check Records	5 years	
	Microbiological cultures	Most positive cultures, including viral cultures, can be discarded within 24-48 hours of issuing final authorised report. Specified cultures of clinical importance (e.g. blood culture isolates, cerebrospinal fluid isolates, enteric pathogens, multiple resistant or methicillin resistant <i>Staph. aureus</i> , 'outbreak' strains, <i>M. tuberculosis</i> , Group A streptococci, and unusual pathogens of clinical significance)	

		should be retained for at least 7 days. Where isolates have been referred to Reference Laboratories, they should be retained until receipt of the reference laboratory's final report.	
	Offsite Data Storage Records (StoreText, Iron Mountain, Advantage, RSS & Wincanton), e.g. Allocated Box Numbers, Reconciliation and Tracking Spreadsheets, Box Contents Lists	Permanent	
	Permit to Work books	10 years	
	PFC Aseptic Dispensing Records	5 years	
	PFC Autoclave Run Sheets	5 years	
	PFC Broth Fill Records	Permanent	
	PFC Crystalloid Product	Expiry + 1 year	
	PFC Good Laboratory Practice (GLP) Audit 1998 - 2005	Permanent	
	PFC Good Laboratory Practice (GLP) Study Records	Permanent	
	PFC Intermediate RFII Powders	Permanent	
	PFC Library Samples (4mM Sodium Chloride)	Permanent (Minimum no. of samples to be retained = 2)	
	PFC Library Samples (Albumin – all types)	Permanent (Minimum no. of samples to be retained = 2)	
	PFC Library Samples (Bottles)	Expiry + 5 years (Minimum no. of samples to be retained = 10)	
	PFC Library Samples (Calcium Chloride)	Permanent (Minimum no. of samples to be retained = 2)	
	PFC Library Samples (Chemicals)	Expiry + 1 year	
	PFC Library Samples (Closures)	Expiry + 5 years (Minimum no. of samples to be retained = 20)	
	PFC Library Samples (Coagulation Factors (e.g.	Permanent (Minimum no. of samples to	

	FXIII, FIX))	retained = 3)	
	PFC Library Samples (Crystalloids)	Expiry + 1 year (Minimum no. of samples to be retained = 1)	
	PFC Library Samples (Fibrin Sealant Kit)	Permanent (Minimum no. of samples to be retained = 2)	
	PFC Library Samples (Fibrinogen)	Permanent (Minimum no. of samples to be retained = 2)	
	PFC Library Samples (Intramuscular Gammaglobulin (IMG) all types)	Permanent (Minimum no. of samples to be retained = 4)	
	PFC Library Samples (Intravenous Gammaglobulin (IVG))	<p>Permanent (Minimum no. of samples to be retained = 2 including WFI with batch).</p> <p>All Freeze-dried Intravenous Gammaglobulin (IVG) library samples should be stored in a cold room (+2°C to +8°C) up until the batch expiry date. After the expiry date it may be transferred to warehouse storage at room temperature if space in cold storage is limited.</p> <p>When this transfer takes place, it is acceptable to remove the Water for Injection (WFI) from the sample and to retain the 2 IVG samples in one box. This is done to relieve storage space. It does not affect the recovery of WFI library samples because these are already stored as separate units in the WFI library. This is covered by modification Proposal 01-026.</p>	
	PFC Library Samples (Liquid Intravenous Gammaglobulin (LIG))	Permanent (Minimum no. of samples to be retained = 2)	

	PFC Library Samples (Needles)	Expiry + 5 years (Minimum no. of samples to be retained = 10)	
	PFC Library Samples (Packaging – All types)	Permanent (Minimum no. of samples to be retained = 5) When storage capacity at PFC is exceeded, dry packaging (e.g. boxes, labels and leaflets) will be sent to a secure external store for archiving.	
	PFC Library Samples (Polysorbate 80 Diluent)	Permanent (Minimum no. of samples to be retained = 2)	
	PFC Library Samples (Syringes)	Expiry + 5 years (Minimum no. of samples to be retained = 5)	
	PFC Library Samples (Thrombin)	Permanent (Minimum no. of samples to be retained = 2)	
	PFC Library Samples (TRIS)	Permanent (Minimum no. of samples to be retained = 2)	
	PFC Library Samples (Water for Injection)	Expiry + 1 year (Minimum no. of samples to be retained = 2)	
	PFC NEQAS	Permanent	
	PFC NIBSC Records	Retain correspondence and information permanently, otherwise discard	
	PFC Reagents / Buffers / LISS	5 years from expiry, or 10 years if no expiry	
	PFC Self Inspections / In-House Audits	30 years	
	PFC Signature List	Permanent (unless finance then 3 years after last audit)	
	PFC Plasma Pools – Normal and Specific	Permanent	
	PFC Plasma Records / Transport / Plasma Recalls	Permanent	
	PFC Process Modifications	30 years	
	PFC Viral Kill Records	Permanent	
	PFC Water Dossier	Permanent	

	Product Licences	Permanent	
	Purchasing Specification	5 years	
	Pharmacovigilance Records	Permanent	
	Product Licences	Permanent	
	Product Recalls	Permanent	
	Quality Control Assay Results and Raw Data	30 years	
	Quality Questionnaires	30 years	
	Records of serious events	Records of any serious events which may affect the quality or safety of blood or blood components must be retained for at least 15 years.	
	Refrigeration and freezer charts	15 years	
	Registry	Permanent: Corporate and health records will not normally be retained for longer than the specified retention period. However a selection of records of long-term legal, administrative, epidemiological and/or historical value should be identified for permanent preservation. Such records should be transferred to an archive, either the organisation's own NHS archive or a local authority or university archive with which the organisation has an existing relationship. Section 33 of the Data Protection Act (1998) permits personal data identified as being of historical or statistical research value to be kept indefinitely as archives	
	Regulatory Affairs Records	Permanent	
	Stability Study Records / Results / Raw Data	Permanent	

	Standard Operating Procedures (SOPs): Master copies of current, superseded, outdated and withdrawn SOPs	Kept in a catalogued and accessible format for at least 30 years	
	Supplier data (documentation and general correspondence)	5 years	
	Supplier Validation Guidelines	5 years	
	Technical Agreement for Service Providers	5 years	
	Technical Reports	5 years	
	Test Kit Files	Permanent (move to SNBTS Registry)	
	Third Party Supplier Agreements	30 Years	
	Traceability records (blood and tissues)	30 years	
	Validations / Revalidations (PFC)	5 years	
	Validations / Revalidations (National)	30 years	
<b>Research &amp; Development</b>	Confidential named patient data (documentation) collected in the course of investigation and held separately from patient's records	Should be destroyed or anonymise 6 months after the research has been completed, the data have been analysed and final publication of findings has been made. If further recourse to identifiable information is anticipated, it should be kept for as long as such a need may exist, if it is permissible under the Data Protection Act (1998); advice should be sought	
	Working records and other research data	Should be retained for at least 10 years to rebut allegations of scientific fraud but, wherever possible, these records should not include patient-identifiable data unless consent for such retention has been obtained. Records and clinical trial data on medicines must be kept for at least 15 years. The provisions of the Data	

		Protection Act (1998) must be observed for these as for other pathological records.	
<b>Supply Chain</b>	Donor Records – Master (Blood)	30 years	
	Donor Session Records and Session Reconciliation Paperwork	30 years	
	Donor Testing Records	30 years	
	Processing Batch Manufacturing Records (Miscellaneous documentation including: reconciliation, processing steps, cold chain, issues, transport)	Permanent	
	Records relating to donor or recipient sera	Serum samples obtained from recipient(s) for the purposes of matching in cell/tissue transplantation, and their accompanying records, must be kept for the lifetime of the recipient	
<b>Tissue Services</b>	Bacteriology results / positive culture records	Minimum of 30 years	
	Batch despatch form	1 year	
	Batch Record – Bone Donor	Minimum of 30 years after final fate of product	
	Batch Records – Islet Donor	Minimum of 30 years after final fate of product	
	Batch Record – Stem Cell Donor	Minimum of 30 years after final fate of product	
	Batch Record – Tissue Donor	Minimum of 30 years after final fate of product	
	Bone kit issue sheet	Retain until reconciliation of bone kits complete	
	Bone kit preparation form / record	Minimum of 30 years	
	Discard / Incineration Information / Clinical waste autoclave form	Minimum of 30 years	

	Cleaning Record - Equipment	3 year	
	Cleaning Record – Facility	Minimum of 30 years	
	Environmental monitoring results	Minimum of 30 years	
	Equipment Logbooks	Lifetime of equipment plus 4 years	
	GP Letter	Minimum of 30 years	
	Graft recipient form	Minimum of 30 years	
	Haematology Films (Stem Cell Patients)	Minimum of 30 years from final fate of product	
	Hospital issues and return form	Keep until issues and returns fully reconciled	
	Issue sheet produced by TT (Tissue Trace)	Keep until issues and returns fully reconciled	
	Kit ID Label	Minimum of 30 years	
	Logger record form	Minimum of 30 years	
	Manual stock check record	3 year	
	Notification of RP (Repeat Reactive) results	Minimum of 30 years	
	NSS transport request form	Keep until request has been reconciled	
	Release of reagents and consumables for use	Minimum of 30 years	
	Equipment sterilisation records	Minimum of 30 years	
	Temperature monitoring logs (fridge / freezer)	Minimum of 30 years	
	TREND Snapshot Report	3 years	
	Tissue product request form	Keep until request has been reconciled	
	Transport form	Minimum of 30 years	

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## 8 Legal Services

<b>BCS Reference – Level 2</b>	<b>Record Type</b>	<b>Retention Period</b>	<b>Authorised to Dispose</b>
<b>Litigation</b>	Litigation Files	10 years after closure of file	Legal Adviser
<b>Employment</b>	Employment Files	10 years after closure of file	Legal Adviser
<b>Contracts</b>	Contract Files	6 years after expiry of the contract or 10 years after closure of file whichever is the latest	Legal Adviser
<b>Property</b>	Property files	10 years after closure of file	Legal Adviser
<b>General Queries / Advice</b>	Gen Files	5 years	Legal Adviser
<b>Debt Recovery</b>	Debt Recovery Files	5 years after closure of file	Legal Adviser
<b>Legal Library</b>	<b>Library Files</b>		
	Licenses agreement with Publishers	Permanent	
	Circulars	Permanent	

## 9 Public Health and Intelligence Services

BCS Reference – Level 2	Record Type	Retention Period	Authorised to Dispose
<b>National and Specialist Intelligence Services</b>	<b>Service Planning</b>		Director Public Health and Information Services
	Activity monitoring reports	6 years after end of agreement	
	Admission, transfer and treatment of patients – policy files	Permanent	
	Databases – demographic and epidemiological based on data supplier (including Social Care data) by NHS National Services Scotland, Information Services	(In accordance with general policies of NHS National Services Scotland, Information Services, and any specific terms and conditions imposed by them in relation to particular data sets)	If change or disposal required – Director Public Health and Information Services
	Databases – demographic and epidemiological based on survey data	(May be retained indefinitely if data quality and potential for future re-use justifies cost of migration / regeneration to new formats and platforms)	If disposal required – Director Public Health and Information Services
	Patient activity data	3 years	Director Public Health and Information Services
	Summary bed statistics	Permanent	
	Waiting list monitoring reports	6 years	Head of Programme
	Winter business plans	6 years	Director Public Health and Information Services
<b>National and Specialist Intelligence Services - Epidemiology and Statistics</b>	<b>Cancer Information</b>		
	Case Report forms for clinical trials	As per trail protocol, but normally 15 years after close of trial	Chief Investigator / Head of Programme
	Quality of Life Questionnaires for patients on clinical trails	As per trail protocol, but normally 15 years after close of trial	Chief Investigator / Head of Programme
	Trial Master File Documents	As per trial protocol, but normally	Chief Investigator / Head of

		15 years after close of trial	Programme
	Audit Reports and Regulatory Inspection Documents	As per Trail Master File Document, normally 15 years after close of trail	Chief Investigator / Head of Programme
	Staff Training Records	5 years	Head of Group
	SMR6 paper records	3 months – Note: currently kept for 12 months in view of system (SOCRATES) IT issues	Director of Cancer Registration
	Audit Reports		
	Pathology, Oncology, Radiotherapy Prospective Audit source data on disk	Stored electronically	Director of Cancer Registration
	Dental Hospitals, Private Hospitals, Haematology and other paper cancer source records	3 months after processing	Director of Cancer Registration
	Genetic ad-hoc consent forms	3 years	Director of Cancer Registration
	Cancer Genetics Families paper records	Stored electronically	Director of Cancer Registration
	GRO Scotland files on CD	1 year	Director of Cancer Registration
	NHSCR reports	3 months after processing	Head of Group
	SORAG	5 years after end of project	
	Cancer Statistics ad-hocs	At least 5 years	Head of Programme
	Cancer Statistics – Disks containing confidential and non-confidential data relating to ad-hoc files	1 year	Head of Programme
	Confidentiality forms for the release of data	Permanent (scan and keep)	
	<b>Drugs Misuse</b>		
	SMR 24 Forms	2 years	Project Manager
	SMR 25 Forms	2 years	Project Manager
<b>National and Specialist Intelligence Services – Data Intelligence</b>	<b>Data Monitoring</b>		

	SMR Databases	Covered by corporate guidelines	Head of Group
	CEO Quarterly Performance Reports – SMR	2 years	Head of Group
	SE Quarterly Performance Reports – SMR	2 years	Head of Group
	<b>Reference Information Team</b>		
	Reference file (loc-a, cons-a) etc	3 years	
	DLG minutes / agenda	Permanent	
	QDV's	Permanent	
	Change control requests	Permanent	
	<b>Data Quality Assurance Team</b>		
	Project data files – electronic anonymised	Permanent	
	Project data files – electronic confidential	30 years	Head of Group
	Project data files – disk copies of hospital data	6 months after end of project	Head of Group
	Project reports – hospital level – anonymised	Permanent	
	Project reports – Scotland level – anonymised	Permanent	
	Project working papers	6 months after end of project	Head of Group
	Information requests – raw data	1 year	Head of Group
	Information requests – copy of dataset, programmes, etc – anonymised	30 years	Head of Group
	Information requests – final report / analyses – anonymised	30 years	Head of Group
	<b>Analyst Team</b>		
	Raw data	1 year	Head of Group
	Final dataset, programmes and communication	5 years	Head of Group
	Final reports	10 years	Head of Group
	<b>Shrugs / Scrugs</b>		
	Annual National Reports	Permanent	
	Client Reports	Permanent – Removed and Backed up after three years	
	Original Data Files	Permanent – Removed and Backed up after three years	
	Paper copies of data	Destroyed after one year	Head of Group

	Ad-hoc Analysis	Permanent	
	<b>NCDDP</b>		
	Risk and Issue Logs	Permanent	
	Working Group Documentation	Permanent	
	Progress Reports	Permanent	
	Project Plans	Permanent	
	Management Minutes and Agenda	Permanent	
	Programme Board Minutes and Agenda	Permanent	
	<b>Waiting Times Team</b>		
	Project documentation for New Ways, A&E, OPWL, NWTD, Patient Journey, Condition Specific, Dental Information, Diagnostics, Nurse & AHP, Procedure Recording, eSMR Waiting, Programme Board minutes	Permanent	
	Waiting Times policy, guidance, correspondence, reference and conference presentation documents	Permanent	
	Waiting Times Information Request responses	Permanent	
	Waiting Times contacts database	3 years – continually updated	Head of Programme
	<b>PTI</b>		
	Databases: PTI, QA, Finance	Permanent	
	Practice specific files	Permanent	
	Minutes of meetings	Permanent	
	PTI development	Permanent	
	Publications	Permanent	
	Correspondence – General	Permanent	
	<b>Scottish Birth Record</b>		
	Scottish birth records	Permanent	
	<b>CHI</b>		
	Monthly CHI downloads	Permanent	
	<b>Health Economics</b>		

	Email messages (electronic)	1 year	Head of Group
	Minutes of meetings (electronic + paper)	5 years	Head of Group
	Reports from projects (electronic + paper)	10 years	Head of Group
	Research papers (paper)	Varied depending on duration of study	Head of Group
	Questionnaires for studies (paper)	Duration of study + 2 years (for audit purposes)	Head of Group
	Data collected for studies (paper)	5 years	Head of Group
	<b>NSS Privacy Advisory Committee</b>		
	PAC Applications and Associated Papers (internal / external correspondence)	15 years	Head of Group
	PAC Index Book	Permanent	
	PAC Meeting Papers	Permanent	
	<b>SPIRE</b>	Defined in each SPIRE data extract request	Associate Director
<b>National and Specialist Intelligence Services – Healthcare Information</b>	Circulars in Workforce	Permanent	
	Reference files in Workforce	5 years	Head of Group
	Pay scale prints	3 years	Assistant Head of Group
	Census correspondence – ERBOD, NAMS, MEDMAN All now electronic	3 years	Assistant Head of Group
	Other correspondence: SNIP, NBS...	3 years	Assistant Head of Group
	Clinical Nurse Survey	3 years	Assistant Head of Group
	Parliamentary Questions and ad-hoc queries – electronic in Workforce	3 years	Head of Group
	Census files – electronic	Permanent	
	Disks and microfiches in Workforce	Permanent	
	Anthroplasty reports	5 years (now all on web)	Assistant Head of Group
	Clinical Governance Trust reports	5 years	Head of Group
	SFR returns / costs books	Permanent	

	SBID returns	5 years	Assistant Head of Group
	ISD (D) 5 GUM returns	2 years	Assistant Head of Group
	Abortion notifications	6 years	Head of Group
	Abortion Database	Permanent	Head of Group
	Record linkage ad-hocs	5 years after the project ends	Assistant Head of Group
	Record linkage – disks containing confidential and non-confidential material relating to ad-hoc files	1 year after the project ends	Assistant Head of Group
	A&E Waiting Times Survey	5 years	Head of Waiting Times Programme
	Fireworks Injuries Survey	3 years	Assistant Head of Group
	Notifiable disease reports	Permanent	
	NHS Complaints returns	Permanent	
	Ad-hoc files	5 years	Assistant Head of Group
	<b>Dental</b>		
	General Dental Service's data (electronic)	Permanent	
	General Dental Service's Annual Reports	Permanent	
	Community Dental Service's data (SMR13) (electronic)	Permanent	
	New Return: Community Dental Service's data (ISD[S]37) (electronic)	Permanent	
	<b>General Practice</b>		
	GP PRINCIPALS ▪ Electronic ▪ Paper	Permanent	
	GP NON-PRINCIPALS ▪ Electronic ▪ Paper	Permanent	
	COMM. NURSING SERVICES ▪ Electronic ▪ Paper	Permanent	
	CHIROPODY SERVICES ▪ Electronic	Permanent	

	<ul style="list-style-type: none"> <li>▪ Paper</li> </ul>		
	SPEECH THERAPY SERVICES <ul style="list-style-type: none"> <li>▪ Electronic</li> <li>▪ Paper</li> </ul>	Permanent	
	<b>Pharmacy</b>		
	Databases:		
	1% sample covering Scottish Prescribing Information 1980-1990	Permanent	
	Total Scottish GP Prescribing 1991	Permanent	
	Total Scottish Health Board Prescribing	Permanent	
	Monthly data – detailed level, individual prescriber, chemists, drugs etc from 1993	Permanent	
	Monthly contractor payment data from 1992	Permanent	
	Paper:		
	GP budget reports – monthly from 1992	Permanent	
	Summaries of chemists payments from 1992	Permanent	
	Contractor Payment Schedules from 1995	Permanent	
	<b>Child Health</b>		
	Databases:		
	Pre-school – Children born from 1987	Permanent	
	School – Children born from 1980	Permanent	
	Immunisation – Children born from 1987	Permanent	
	Special Needs – Data from 1994 but holds some data on children born since 1975	Download of national system taken 4 times a year. Do not destroy	
	Cerebral Palsy – Children born between 1982 and 1998	Electronically held as SPSS file on ISD server. Discussion underway, regarding destroying paperwork and anonymising electronic file as soon as the child reaches 16. As present do not destroy	At present – not applicable

	<b>Evaluated Drug Information System (Evadis)</b>		
	Database:		
	Evadis from late 1970's	Permanent	
	Paper:		
	Evadis – supporting documentation	5 years. Manufacturers Price Lists retained for 12-19 months	eVADIS Team Manager
	Evadis – Manufacturers Price list	2 years	eVADIS Team Manager
	<b>Pharmacy Discount Surveys</b>		
	Database:		
	Pharmacy Discount Survey 1999 and 2000	Permanent	
	Paper:		
	Pharmacy Discount Survey 1999 and 2000 Pharmacy Discount Survey 2007 currently underway	All paperwork for surveys retained. Invoices and purchase statements collected as part of the survey are destroyed within a year of completion due to their commercial sensitivity	Assistant Head of Group
	<b>Ophthalmics</b>		
	Database:		
	OPTIX new 20021	Permanent	
	Paper:		
	Aggregate return by health board / PCT	Permanent	
	<b>ISD Business Areas</b>		
	PQ's (Parliamentary Questions) 10 years	10 years	Executive Co-ordinator
	Minutes	Permanent	
	Letters	5 years	Executive Co-ordinator
	Memos	5 years	Executive Co-ordinator
	Reports	5 years	Executive Co-ordinator
	Presentations	On going	Executive Co-ordinator
	ISD Authorised Car User Schedule	3 years	Executive Co-ordinator
	ISD New Car User Forms – CMV2	3 years	Executive Co-ordinator

	ISD Amendment Car User Forms – CMV3	3 years	Executive Co-ordinator
	ISD Conference Schedule – Core Budget	6 years after the financial year to which they relate	Executive Co-ordinator
	Purchase Order Requisitions	6 years after the financial year to which they relate	Executive Co-ordinator
	KPI's (Key Performance Indicators)		Executive Co-ordinator
	ISD Strategic Performance Review	6 years after the end of the period to which they refer	Director
	<b>ISD Customer Relations Group</b>		
	Information Requests – electronic	5 years	Head of CRG
	SPN Releases	7 years	Head of CRG
	Media Monitoring Alerts	Permanent	
	Library	As per Library holding rules	Library Manager
<b>Health Management Library</b>	Copyright Declarations	7 years	Library Services Manager
	Books and Reports	The Health Management Library has a national remit for healthcare management in Scotland and, therefore, has a responsibility to retain uniquely Scottish material and titles of historical value on the subject of healthcare management, which are unlikely to be held elsewhere	Library Services Manager
	Journals	Due to space constrictions, very few journals from earlier than 1980 are held. Exceptions are the Health Service Journal and Health Bulletin which are retained for their historical value	
<b>Protection from Infectious and Environmental Hazards</b>	<b>HPS Common Systems (Paper)</b>		

	HPS Weekly Returns from Laboratories	Retain previous calendar year (Jan – Dec)	Clinical Director
	Paper Data Forms Used for Data Entry into Permanent On-going Operations Databases of Historical Importance	<p>Destroyed 1 year after complete current data year.</p> <p>Exceptions:</p> <ul style="list-style-type: none"> <li>▪ AIDS registration forms are anonymised after data entry and are held permanently</li> <li>▪ HIV Death Registration Forms are held permanently</li> <li>▪ ENSURE questionnaires and consent forms are destroyed after 10 years</li> <li>▪ Travel Diploma records are only kept for current student year of study</li> <li>▪ ESMI surveillance forms to be destroyed after 5 years</li> <li>▪ Legionella surveillance forms to be destroyed after 6 years</li> <li>▪ Pandemic influenza – laboratory positive cases and contacts reported to HPS during the containment phase to be destroyed after 5 years</li> <li>▪ Pandemic influenza – laboratory positive hospitalised cases reported to HPS during the containment and treatment phases to be destroyed after 5 years</li> <li>▪ IGAS surveillance forms to be destroyed after 5 years</li> <li>▪ SARI cases – laboratory confirmed influenza cases in ITI or deaths to be destroyed</li> </ul>	Head of Group

		after 5 years	
	Paper Data Forms Used for Data Entry into Fixed Term Research and Project Databases	Cohort studies – retain for as long as required to follow up participants, destroy 1 year after last point of contact with participants. Other – destroy 1 year after data has been entered and validated. Exception: Clinical trails of children retain for 25 years	Head of Group
	<b>HPS Common Systems (Electronic)</b>		
	HPS Enquiry Log (This includes paper records from before system implementation and current database records)	6 years	Associate Director Health Protection Services / Clinical Director
	Electronic Communication of Surveillance in Scotland (ECOSS)	All data that is specified in the ECOSS Handbooks for pathogens of public health importance is to be held permanently in the ECOSS database. Other pathogen data not specified in the ECOSS Handbooks are not significant and can be deleted after 6 months	
	Electronic Data Records Used for Data Entry	Destroyed 1 year after data entry and/or validation: Exceptions: Electronic data files used for transfer of HIV positive reports, HIV attendance data and HIV follow-up are delete immediately after entry.	Head of Group

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	Permanent On-going Operations Databases of Historical Importance	Permanent Exception: Travel Diploma retain for 10 years	
	Fixed Term Research and Project Databases	Retain for 2 years for quality control purposes following research or project end date. If archiving is not required destroy after the above retention period. If archiving is required, archive for 5 years (if there is a clinical reason to archive longer approval should be sought from the HPS Clinical Governance Committee)  Identifiers should be removed if archiving (if there is a clinical reason they remain approval should be sought from the HPS Clinical Governance Committee)	Associate Director Health Protection Services / Clinical Director
	<b>HPS General</b>		
	Minutes and papers from corporate meetings i.e. SMT	Permanent	
	Minutes and papers from steering group meetings involving stakeholders e.g. CPHM, RLWG, HPN etc	Permanent	
	Minutes and papers from internal groups e.g. Operational Management Meeting, Group and Team Meetings etc	5 years	Associate Director Health Protection Services / or delegated senior manager
	Records of Incidents and Outbreaks	Permanent	
	Reports and Publications issued by HPS	Permanent	
	Guidance	Permanent	

	Comments by HPS on consultation documents	6 years	Associate Director Health Protection Services / Clinical Director
	Strategic response plans e.g. Health Boards TB response plans, pandemic plans	Permanent	
	SLAs, Change Control Notes, MOUs, Research Agreement, and other agreements, contracts, and supporting correspondence and papers	6 years after end of agreement	Associate Director Health Protection Services
	For Programme / Project Documentation – see 2 Corporate Governance: Programme, Project and Portfolio Management		Associate Director Health Protection Services

## 10 Practitioner and Counter Fraud Services

BCS Reference – Level 2	Record Type	Retention Period	Authorised to Dispose
<b>Professional and Administration Services – National Committee Services</b>	<b>Central Disciplinary Unit</b>		
	Case Files	Sent to the Health Board after case closed	Transferred to Health Board, Manager National Committee Services/Secretary SACDA
	Receipts and copies of claim forms in support of expenses claims	2 years after the financial year to which they relate	Manager National Committees Services/Secretary SACDA
	Minutes of meetings with Health Board discipline leads	5 years	Manager National Committees Services/Secretary SACDA
	CDU SLA's	6 years after the end of the agreement	Manager National Committees Services/Secretary SACDA
	Honorary Health Board Contracts	Do not destroy	
	<b>National Appeal Panel for entry to Pharmaceutical Lists</b>		
	Case Files	1 years from date of Appeal Hearing	Manager National Committee Services / Secretary SACDA
	Panel Decisions and Hearing Records	Permanent	
	Panel Members receipts and copies of claim forms in support of expenses claims	2 years after the financial year to which they relate	
	Media Correspondence	7 years	
	Copies of Chairpersons' expenses and receipts sent	1 year	

	to the Scottish Government for payment		
	<b>Agency Grievance and Appeals Procedures</b>		
	Case Files	1 year after employee has left the Agency except where a claim is taken to Employment Tribunal, in which case 1 year after the final decision	Manager National Committee Services / Secretary SACDA
	<b>Scottish Advisory Committee on Distinction Awards</b>		
	Since 2009 all CVs, citations for awards and reviews have been submitted electronically and saved electronically in SACDA Online system. The CVs are "living documents" which are updated each time the consultant applies for an award or is subject to review of their award.		Manager National Committees Services/Secretary SACDA
	Copies of documents produced for Members	Destroy immediately after relevant meeting	
	All SACDA (or earlier Scottish Sub-committee of ACDA) and sub-committee minutes which include reference to A+, A and B award decisions	Permanent	
	Scoring Results	Destroy individual score-sheets from committee members at end of relevant awards around. Summary results to be kept indefinitely	
	Annual Report	Permanent	
	SACDA SLA	6 years after end of agreement	
	Receipts in support of expenses claims	2 years after the financial year to which they relate	
	Central Funding	Permanent	
	Media Correspondence	7 years	

	Committee member's declaration of interests	5 years after member ceases to be a member of the Committee	
	<b>NHS National Services Scotland Consultant's Discretionary Points</b>		
	Original CVs/Citations for successful candidates	6 years after they retire or otherwise leave the NHS	Manger National Committee Services / Secretary SACDA
	Original CVs, citations etc or unsuccessful candidates	3 years from receipt	
	Copies of documents produced for Members	Destroy immediately after relevant meeting	
	All minutes of meetings	Permanent	
	<b>NHS Scotland Discretionary Points</b>		
	All NHS Board/Divisions return and summary of information	Permanent	Manager National Committee Services/Secretary SACDA
	<b>Scottish Dental Practice Board</b>		
	Minutes	5 years and then to Scottish Records Office	Manager National Committee Services/Secretary SACDA
	Annual Report	Permanent	
	SDPB SLA	6 years after end of agreement	
	Receipts in support expenses claims	2 years after the financial year to which they relate	
	SDPB Complaints – case records	10 years	
	Freedom of Information Requests and Correspondence	6 years after date of creation	
	Board Papers – master set	Permanent	
	Data Protection Act Requests and Correspondence	6 years after date of creation	
	Financial Reports, receipts and copies of claim forms in support of expenses claims	2 years after the financial year to which they relate	
	Practitioner Investigations	Current + 6 years from close of	

		investigation	
	Payment Requests – case information and decisions	3 years	
	Regulation Breaches including mis-claims – case information	6 years	
	Projects	6 years after completion	
	Media Correspondence	7 years	
	<b>CHI Advisory Group</b>		
	Research Applications (electronic copies)	5 years after receipt	Manager National Committee Services/ Secretary SACDA
	Minutes of Meetings	3 years	
	Receipts and copies of claim forms in support expenses claims	2 years after the financial year to which they relate	
	Meeting Papers – master set	5 years	
	<b>Scottish Association of Medical Directors</b>		
	Minutes of meetings	Permanent	Manager National Committee Services/ Secretary SACDA
	Meeting Papers – master set	5 years	
	Finance Records	7 years	
	SAMD SLA	6 years after end of agreement	
	<b>National Evaluation Committee</b>		
	Job Descriptions and any associated organisational charts and supporting documents (electronic only)	Most recent version and one preceding version	Manager National Committee Services/ Secretary SACDA
	Grading outcome letters	Permanent	
	NEC SLA	6 years after end of agreement	
	<b>NHS Boards Chief Executives’ Group/NHS Boards Chairs’ Group</b>		
	Minutes of meetings	Permanent	Manager National Committee Services/ Secretary SACDA
	Meeting Papers – master set	5 years	
	<b>Scottish Executive Nurse Directors/Chief Nursing Officer Meetings</b>		
	Minutes of meetings	Permanent	Manager National

	Meeting Papers	5 years	Committee Services/ Secretary SACDA
	<b>Committee of the Faculty of Public Health in Scotland</b>		
	Minutes of meetings	Permanent	Manager National
	Meeting Papers – master set	5 years	Committee Services/ Secretary SACDA
	<b>Consultants in Public Health Medicine (Health Protection)</b>		
	Minutes of meetings	Permanent	Manager National
	Meeting Papers – master set	5 years	Committee Services/ Secretary SACDA
<b>Professional and Administration Services – Events</b>	<b>Convention Management Service</b>		
	Booking Forms for events with delegate fee	Destroy 6 months from the end of the financial year in which the event was finalised and paid	Manager – Conventions Management Service
	Booking Forms events with no delegate fee	Destroy after event	
	Client contracts and supporting documentation	6 years from event	
	Supplier contracts and documentation	6 years from event	
<b>Professional and Administration Services – Conference</b>	<b>Conference Centre</b>		
	Client contracts and supporting documentation	6 years from event	Conference Centre Manager
<b>Payment and Registration Services</b>	<b>Financial Reports and Working Papers provided to PCTs</b>		
	Form 12	Current + 3 previous years	Regional Operations

	RC1 / RC's	Current + 3 previous years	Regional Operations Manager
	Regional Office Statements	Current + 3 previous years	Regional Finance Managers
	<b>PSD Wide – Quality</b>		
	<b>Quality Management System (QMS)</b>		
	Customer Survey results and reports	5 years	QA/BE Manager
	QMS Management Review minutes	5 years	QA/BE Manager
	Internal review reports / findings	5 years	QA/BE Manager
	QMS documented procedures	5 years	QA/BE Manager
	External review findings	5 years	QA/BE Manager
	<b>Pharmacy</b>		
	Prescriptions	Retain the paper for 3 months and hold the images for 3 years	Operations Manager
	Reporting letter	6 months	Production Manager
	Letters re special prescriptions	Current + 3 years	Production Manager
	Community Pharmacy Scotland (CPS) Error Schedules	6 years + current year	Production Manager
	Financial Documentation and paperwork relating to Supplementary Payments and Adjustments – Dispensing Contractors	6 years + current year	Production Manager
	Payment Schedules	Current + 6 previous years	Pharmacy Payments / PPC Manager
	Notification and Amendments to Contractor Details	Current + 6 previous years	Pharmacy Payments / PPC Manager
	Ad-hoc reports (PHS claim forms, reports from DCVP system)	Current + 6 previous years	Pharmacy Payments / PPC Manager
	PV Reports	6 year + current year	PV Manager
	Bank Mandates	Previous year + ongoing validation	Regional Finance Managers
	Pharmacy patient charge refunds	Current + 6 previous years	
	<b>Medical - Finance</b>		

	Financial Information e.g. Ledger prints	6 years + current year	Regional Finance Manager
	Payment Statements	6 years + current year	Regional Finance Manager
	Service Claim Forms	2 years + current year	Regional Finance Manager
	Claims for continuing allowances (e.g. Seniority)	2 years after cessation of GP	Regional Finance Manager
	Partnership Share, Bank Mandates etc	2 years after cessation of GP	Regional Finance Manager
	<b>Medical Registration</b>		
	GPR Registration Form	2 years + current year	Regional Operations Manager
	GP1C Change of Name / Address	When action completed	Regional Operations Manager
	GP72 SIRS forms still in use. Used by GP practices to send details of patients who have had pre-school boosters and pre-school immunisations SIRS is the Scottish Immunisation Recall System	6 years + current year	Regional Operations Manager
	Bulk transfers of patients	2 years + current year	Regional Operations Manager
	Quarterly Counts	6 years + current year	Regional Operations Manager
	<b>Medical – Medical Records</b>		
	Adult	6 years after date of last entry or 3 years after death if earlier	Regional Operations Manager
	All types of records relating to Children and young people	Retain until the patient's 25 <sup>th</sup> birthday or 26 <sup>th</sup> if young person was 17 at conclusion of treatment, or 3 years after death. (If the illness or death could have potential relevance to adult conditions or have genetic implications, the advice of clinicians should be sought as to whether to retain for a longer period)	Regional Operations Manager
	Embarked (moved aboard) – paper record	6 years or until the patient reaches the age of 25	Regional Operations Manager

	Untraced – paper record	6 years or until the patient reaches the age of 25	Regional Operations Manager
	GP records, including medical records relating to HM Armed Forces	Retain for the lifetime of the patient and for 3 years after their death. (The Ministry of Defence (MoD) retains a copy of the records relating to service medical history. The patient may request a copy of these under the Data Protection Act (DPA), and may, if they choose, give them to their GP. GPs should also receive summary records when ex-Service personnel register with them is a matter for their professional judgement, taking into account clinical need and DPA requirements. GP records of serving military personnel in existence prior to them enlisting must not be destroyed. Following the death of the patient the records should be retained for 3 years)	Regional Operations Manager
	Prisoner	Permanent	Records now sent to Scottish Prison Service as prisoners part of NHS, although some records held by PSD until all prisoners registered.
	GP4 Medical Card	2 years + current year	Regional Operations Manager
	Application for duplicate Medical Card	2 years + current year	Regional Operations Manager
	FP13 application by a person released or discharged from HM forces	2 years + current year	Regional Operations Manager
	GP22 – Notification to a doctor of the removal of persons from the doctor’s list, and applications for	2 years + current year	Regional Operations Manager

	return of their medical records		
	Electronic Patient Records (EPRs) – GO only	Must not be destroyed, or deleted, for the foreseeable future. The rationale for this is explained in 'SCIMP' Good Practice Guidelines for General Practice Electronic Patient Records – section 6.1	
	<b>Medical – Prepayments and Exemptions</b>		
	EC95 – Applications for Prepayment Certificate	2 years	Regional Finance Manager
	FW8 – Claim for Exemption Certificate	2 years	Regional Finance Manager
	<b>Dental and Ophthalmic</b>		
	Claim Forms (split – paper / electronic)	Current + 6 previous years	Assistant Director
	Practitioner Investigation case notes	3 years + current	Assistant Director
	Payment Statements	Current + 6 years	Assistant Director
	SDRS Patient Examination	If patient <18 then till patient is 25 years old otherwise 6 years or 11 years	Assistant Director
	Data Storage for Dental and Ophthalmic electronic claims and prior approvals	11 years (to cover where appliances / prosthesis provided)	Assistant Director
	Data Storage for Dental and Ophthalmic electronic supporting evidence	11 years	Assistant Director
	Practitioner Profiles and statistical data	Current + 6 previous years	Assistant Director
	Referrals to Health Board / Primary Care Trust (NHS England)	Current + 6 previous years	Assistant Director
<b>Prevention of Fraud</b>	General Correspondence	Current + 6 previous years	Director of Counter Fraud Services
	Investigation case notes and Related papers	Current + 7 previous years	Director of Counter Fraud Services
	Patient exemption checking – patient record	<ul style="list-style-type: none"> <li>▪ Current financial year (all records)</li> <li>▪ Previous financial year (all</li> </ul>	Director of Counter Fraud Services

		records) ▪ Current + 6 previous years (records for cases where charges paid or written off)	
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## 11 Procurement, Commissioning and Facilities

BCS Reference – Level 2	Record Type	Retention Period	Authorised to Dispose
<b>Procurement</b>	Agreements, contracts and supporting correspondence and papers	6 years after the financial year to which they relate or contract expires	Divisional Head of Procurement Area
	Approved suppliers lists	10 years	
	Delivery notes	2 years	
	Indents	2 years after financial year referred to	
	Invitations to tender	6 years after the financial year to which they relate (These transactions relate to 'one-off' purchases e.g. an item of equipment. Tenders relating to the creation of ongoing contracts are covered below)	
	Unaccepted tenders	3 years after the financial year to which they relate (These transactions relate to 'one-off' purchases e.g. an item of equipment. Tenders relating to the creation of ongoing contracts are covered below)	
	Tender Registers	6 years after the financial year to which they relate	
	Supplier Correspondence	6 years after termination of agreement	
	Purchase Orders	6 years after the financial year to which they relate	
	Advice Notices	3 years after the financial year to which they relate	
	Despatch Notices	3 years after the financial year to	

		which they rate	
	Medical equipment specifications – major items purchased	Permanent	
	Medical Equipment – operating manuals	Operational lifetime of equipment	
	Picking Tickets	3 years after the financial year to which they relate	
	Procurement documentation	7 years (One copy of each supplier response from short listed to tender and the contract itself)	
	Products – liability	11 years	
	Requisitions	2 years after financial year referred to	
	Stock control reports	2 years	
	Stock Sheets – Year end	6 years after the financial year to which they relate	
	Stock-take documents including Perpetual Inventory samples	3 years after the financial year to which they relate	
	Stores transfers	3 years after the financial year to which the relate	
	Stores – major (ledgers etc)	6 years	
	Stores – minor (requisitions, issue notes, transfer vouchers, goods received books etc)	2 years	
	Supplies records – minor (e.g. invitations to tender and inadmissible transfers, routine papers relating to catering and demands for furniture, equipment, stationery and other supplies)	2 years	
	<b>Contracts and Agreements</b>		Divisional Head of Procurement Area
	Initial proposal – specification / user requirements	6 years from end of contract	
	Initial proposal – Education criteria	6 years from end of contract	
	Initial proposal – Invitation to tender	6 years from end of contract	

	Initial proposal – Statements of interest	1 year from end of contract	
	Tendering – Successful tenders	6 years from end of contract	
	Tendering – Unsuccessful tenders	1 year from end of contract	
	Tendering – Interview Panel notes and proceedings	1 year from end of contract	
	Tendering – Commissioning letter / contracts	6 years from end of contract	
	Contracts Operation – reports from contractors	2 years from end of contract	
	Contracts Operation – Disputes	6 years from end of contract	
	Contracts Operation – Final Accounts	6 years from end of contract	
	Amendments to Contracts	6 years from end of contract	
<b>Specialist and Screening Services</b>	External Policy records for Scotland on nationally commissioned specialist and screening services	Review 5 years after closure of file for appraisal of permanent retention	Director of NSD and National Co-ordinator Screening Programmes
	National Advisory Group Meeting Papers	Permanent	
	National Advisory Group Meeting Minutes	Permanent	
	Reports send to Ministers for action: Start up papers for services, Service review, Business cases	Permanent	
<b>Health Facilities</b>	National Training Programme <ul style="list-style-type: none"> <li>▪ Presentations, database, records of staff training</li> </ul>	5 years	Head of Business Services
	FMS (Facilities Management System)	Permanent	
	UK Healthcare Estates and Facilities Group <ul style="list-style-type: none"> <li>▪ Agendas, minutes and general correspondence</li> </ul>	5 years	Director
	Advisory Groups Records <ul style="list-style-type: none"> <li>▪ Strategic Facilities Group</li> <li>▪ Scottish Facilities Management Advisory Group plus Sub-Groups</li> <li>▪ Scottish Property Advisory Group plus Sub-Groups</li> <li>▪ Scottish Engineering and Technology Advisory Group plus Sub-Groups</li> </ul> (Agendas, minutes, papers, general correspondence and terms of reference)	5 years	Director, Assistant Directors and Head of Services
	SGHD Joint Premises Review Group Records –	2 years	Director

	Agendas, minutes, papers and general correspondence		
	Cleaning Monitoring Tool Records	Permanent	
	Catering Monitoring Tool Records	Permanent	
	Publications <ul style="list-style-type: none"> <li>▪ UK Publication Meetings – agendas, minutes, papers, general correspondence, agreements</li> <li>▪ Production Final Publications</li> </ul>	2 years Permanent	Director / Head of Business Services
	SCART, EMART	Permanent	
	E-Library – records relating to the collaboration between HFS and NES. Communication plans, presentations, registration information	3 years	Head of Business Services
	BSRIA, BCIS – subscription information, usernames and passwords	1 year	Director / Assistant Director of Property and Capital Planning
	Asset Management System	Permanent	Director /Assistant Director of Property and Capital Planning
	Capital Planning System	Permanent	Director /Assistant Director of Property and Capital Planning
	NHSScotland Adverse Incidents involving medical, laboratory or estates equipment – IRIC defect investigations (adult/none injured)	IRIC Work Instruction (WI) states 6 years from closure of file (minimum 5 year legal requirement for adult patient records plus 1 year)	
	NHSScotland Adverse Incidents – IRIC defect investigation files (safely warning issued)	WI states 10 years from closure of file (minimum 5 year legal requirement for adult patient records plus 5 years for IRIC purposes)	
	NHSScotland Adverse Incidents – IRIC defect	WI states 25 years from closure	

	investigation files (child involved or fatal accident investigation)	of file (legal requirement to retain records until patient is 25 – FAIs retained for valuable information)	
	Oxygen Concentrator Patient Files	10 years from closure of file	
	Technical images on x-ray film	10 years from closure of file	
	Images on x-ray whose results have paper copy	Destroy after one year	
<b>Health Facilities – Decontamination</b>	<b>Surgical instruments used in acute sectors and reprocessing carried out in a Central Decontamination Unit</b>		
	Logbook for testing and maintenance decontamination equipment (e.g. sterilizer / washer disinfectant / ultrasonic cleaner)	13 years - 11 years product liability + 2 years for claims	
	Batch record of decontamination processes		
	Environmental cleaning		
	Purchase records for equipment, instruments etc.		
	Training of decontamination staff		
	Non-conformance record		
	Document change record		
	Medical devices and decontamination equipment specifications – major items purchased		
	Medical devices and decontamination equipment – operating manuals and manufacturer instructions		
	<b>Thermolabile flexible endoscopes and reprocessing carried out in an Endoscope Decontamination Unit</b>		
	Logbook for testing and maintenance	13 years - 11 years product liability + 2 years claims	
	Endoscope washer disinfectors		
	Batch record of decontamination processes		
	Environmental cleaning		
	Purchase records for EWD, Endoscopes, accessories and other equipments e.g. water treatment		

	Training of decontamination staff		
	Non-conformance record		
	Document change record		
	Endoscope and EWD specifications – major items purchased		
	Endoscope and EWD specifications – operating manuals and manufacturer instructions		
	<b>Medical devices used in primary care practices (e.g. GDP, GMP, podiatry etc) and reprocessing carried out in a Local Decontamination Unit</b>		
	Logbook for testing and maintenance decontamination equipment (e.g. sterilizer / washer disinfectant / ultrasonic cleaner)	13 years - 11 years product liability + 2 years for claims	
	Batch record of decontamination processes		
	Environmental cleaning		
	Purchase records for equipment, instruments etc		
	Training of decontamination staff		
	Non-conformance record		
	Document change record		
	Medical devices and decontamination equipment specifications – major items purchased		
	Medical devices and decontamination equipment – operating manuals and manufacturer instructions		

## Appendix B: NSS Document Disposal Register Template

<b>Corporate Records Management</b>						
<b>NSS Document Disposal Register</b>						
SBU/Corporate Function:						
Department:						
Type of Record:	File/Record Name:	Format:	Brief Description of Record contents:	Date Record created:	Date Record destroyed:	Method of Destruction:
<i>Brief description of the type of record eg: Human Resources / Financial</i>	<i>Title by which the record is commonly known</i>	<i>Identify what media format the record is in eg: electronic / paper</i>	<i>Brief description of the record showing the purpose of the record and what information it contains</i>	<i>1st Jan 2005</i>	<i>1st Jan 2007</i>	<i>Does the record contain personal or confidential information - how was the record destroyed eg: Confidential - Shredded</i>

