

The evolution and current position of the Wellcome/National Archives Hospital Records Database

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In 1979 the Wellcome Trust set up the Contemporary Medical Archives Centre out of a concern that many records relating to twentieth century developments in medicine and health care were being lost. We soon realised that it was important, for the archival record of medicine and health, for us not just to acquire material ourselves, but also to identify, locate and survey material that was being held elsewhere. There were other similar enterprises going on, for example there was a project based in Manchester at the University of Manchester Institute of Science and Technology which was surveying the records of hospitals and health administration in the North West of England.¹

In the autumn of 1979 a Health Records Study Group was set up. This led to the hospital records register in its first embryonic form, with an initial focus on hospitals in the 4 Thames Regions of the NHS. But then we started adding information for the rest of the UK gleaned from the Historical Manuscripts Commission's *Accessions to Repositories*, data supplied by the Public Record Office, and information provided by various individuals. By early 1982 there were over 1000 entries in the Hospital Records Register, which at that point was in the form of slips of paper filed in Moore's Modern Methods binders, arranged by locality, and by hospital name within town, which was not necessarily the ideal way for locating information from the researcher's point of view. Even then it was anticipated that eventually the information would be computerised to facilitate searches.

At that point very few hospitals actually had archivists themselves – I think St Bartholomew's /City and Hackney Health Authority, and the Bethlem/Maudsley,. In many cases hospital archives were stored in unsatisfactory conditions and were under the aegis of a

busy administrator with other concerns, or in the care of a retired consultant, with no ongoing provision for care or research access. This situation still pertains in many hospitals, although rather more do now have professional archivists.

A major problem with records kept in hospitals is that there is no inbuilt commitment to their permanent preservation, and changes of management, quite apart from closures, amalgamations, rebuilding, etc can have very adverse consequences. This has been an ongoing cause of concern: we have information in Hosprec about records reported at one time as surviving within particular institutions, but we cannot guarantee that this continues to be the case.

In 1986 a detailed questionnaire about hospital records for distribution to local record offices was hammered out between the Wellcome archivists and the Public Record Office Liaison Officer. With some fairly minor changes, this remains the basis for the information fields in Hosprec today. These consist of:

History and administrative background of the hospital

- Names and previous names of hospital
- Current and previous addresses.
- When founded, if closed, when closed
- Associated institutions
- NHS Management bodies since 1948 i.e.
- 1948-76 Regional Hospital Board/Hospital Management Committee
- 1974-82 Regional Health Authority/District Health Authority
- 1982-96 The same, but reflecting various changes taking place in 1982 due to local government reorganisation
- Trust, present and past
- County, before 1974, 1974-96, and present

The periods reflect various changes in health service or local government administration or structure

- Hospital status
 - Pre-1948: Voluntary, i.e. philanthropic, supported by subscribers; Poor Law Infirmary; Private; Local authority; Military or Naval; Other
 - Post-1948: NHS; Private; Trust; Military or Naval; Other
- Hospital type:
 - Pre-1948: General, isolation, maternity, mental, tuberculosis, women, children and other;
 - Post-1948: Acute, geriatric, Maternity, Mental, Hospice and other.
- Additional information can be entered in free text fields.

Information concerning the surviving records of the hospital:

- Where held
- Administrative, with start and finish dates: General administration; financial, estates and endowments, nursing, staff, admission and discharge; ephemera, pictorial, private papers, other.
- Clinical patient records
- Space for further information
- Where finding aids are (this is much less necessary since the advent of the Web)

Repository information. we now try and encourage online users to check ARCHON on the National Archives website for the most up to date details.

This questionnaire was distributed to local authority and other repositories known to be holding hospital records. The King's Fund Centre generously supplied funding to employ a project researcher, to check the questionnaires, fill in missing information, and input the data into DBaseIII software.

During the 1990s Hosprec underwent various software migrations and upgrades with their concomitant associated problems. We were receiving increasing numbers of queries about hospital records, and researchers were occasionally given access to the database onsite in those pre-Web days. By the mid 1990s the number of entries was already well over 2000. In 1997 a simple user friendly front end finally enabled readers to query the database on the basic search fields of name and town directly from a terminal within the Library. More complex searches still had to be done by the archive staff. Hardly had we achieved this than the new frontier became the World Wide Web and we had to start thinking about mounting the database on the web for online access. Early in 1999, we sent out a mailshot to all repositories known to be holding hospital records, requesting them to update existing entries and complete data-entry forms for new accessions. These were all checked and research to improve the existing background information incorporated. At the conclusion, the database included information on records of nearly 2800 hospitals in over 1600 repositories. At the beginning of 2000 Hosprec finally went online, hosted on the Public Record Office server.

There are a range of potential uses for Hosprec:

- For researchers:
 1. to locate records of specific hospitals
 2. to identify particular kinds of hospital/hospital record

At present the first is possible via the online interface, which provides for simple searches by name (present and previous) or town – a search produces a summary hitlist, with a link to the detailed entry, within which there is a link to current contact details of the repository in ARCHON on The National Archives Website

In the second case Archives and Manuscripts staff at the Wellcome Library are prepared to undertake criteria searches (e.g. admission and discharge registers of public lunatic asylums for the period 1850-1914), to provide a summary hit-list from which further details

can be located using the online version and searching under hospital name. However, we are currently in discussion with TNA about enabling more advanced searching via the public interface

- We also anticipated that Hosprec would also have use for archivists:

Firstly, to identify where surviving records of a hospital already are, when offered material

Secondly, to assist in decision-making about whether to take in (or to establish selection criteria for) records of a particular hospital

In the first case Hosprec is useful when someone turns up with strayed hospital records, which ideally should be reunited with any other surviving records, and in a number of cases we have been able to bring together stray volumes with the rest of the archives or advise upon where no longer current records should be transferred. In the second instance, archivists could use Hosprec to establish how significant the records of a particular hospital might be – was it a type of hospital for which records survive very sparsely? Was it the only hospital of its kind serving a particular region? Does it have unusually full records of a particular type? Or alternatively, was it a fairly run of the mill institution in a well-served area?

At the moment, while the National Archives hosts Hosprec, maintenance and updating of actual data is done by the Wellcome. We are very dependent on repositories letting us know about new and additional accessions, listing, etc: we do not expect that the holding repository will necessarily be able to fill in all the database fields as many can only be completed from reference works in the Wellcome Library. For a number of hospitals links to fuller lists on the website of the relevant repository is now provided via links to The National Archives A2A database. We are also currently moving forward to implement complex online searching, and links with other related databases.

When a project evolves over so many years there are going to be problems – technical issues due to the series of software changes; information that's no longer current; decisions taken at one point in the light of available resources and information that might not be the way we would want to do things now.

On hospital records generally, over the years we have identified three particularly problematic issues. The first is the ongoing lack of interest in the non-current records of institutions among administrators who have immediate responsibility for them. A strong argument can be made that the majority of the problems that arise due to closures, amalgamations, etc, can largely be put down to the fact that administrators are not aware of the status of the records they hold as public records, or of their legal obligations towards them.

The second and third problems are closely related. The bulk of hospital records is ever-expanding, especially with clinical notes. Lack of good records management practice during course of records' life-cycle contributes significantly towards bloat. Hospital records also contain potentially sensitive data, not only in clinical casenotes but in admission and discharge registers and even committee minutes, and therefore repositories need to ensure compliance with relevant Data Protection legislation. These two problems are linked since many archivists are understandably reluctant to commit themselves to taking in bulky amounts which are also subject to stringent limitations on access. While the needs of historians, epidemiologists and social scientists might well be accommodated through some form of statistically valid sampling, it is very apparent from the enquiries received in the Wellcome Library, that there is a great deal of interest in hospital records from genealogists and family historians, who would presumably be unlikely to find sampling acceptable. Hospital records have benefited from some recent funding initiatives aimed at improving access to the UK's rich archival heritage: for example the Wellcome Trust's Research

Resources in Medical History scheme has funded the cataloguing of the records of several significant hospitals. A problem which is not going to go away and is likely to become ever more pressing is that the increasing keeping of records solely in electronic form.

However, to conclude on a less depressing note, there does not appear to be anything comparable to Hosprec in any other country. This is partly because of the legal status of hospital records as public records in the UK, but also has a lot to do with the network of local record offices and the tradition of archive-keeping. Visitors from other countries have been very impressed not merely by the effort involved in creating Hosprec but by the actual survival and availability for research of such a relatively huge quantity of records of hospital care, even if specific gaps are frustrating.

We are always grateful for information amending or supplementing that which we already have in Hosprec as the whole project depends very much on the repositories holding records supplying us with the necessary data.

A more extensive version of this piece is forthcoming in *To Document Health Memory. Medical archives and their uses*, the proceedings of an international conference held at the Royal Library of Belgium in Brussels, 15th-16th March 2007

NOTES

¹ Liz Coyne, Dennis Doyle and John V Pickstone, *A Guide to the Records of Health Services in the Manchester Region (Kendal to Crewe): Part One: Hospital Services* (Manchester: Department of History of Science and Technology UMIST [University of Manchester Institute of Science and Technology], Occasional Publication no 3, 1981).