

Public Records (Scotland) Act 2011

NHS Ayrshire & Arran Assessment Report

The Keeper of the Records of Scotland

3rd October 2016

Assessment Report

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1. Public Records (Scotland) Act 2011

The Public Records (Scotland) Act 2011 (the Act) received Royal assent on 20 April 2011. It is the first new public records legislation in Scotland since 1937 and came fully into force on 1 January 2013. Its primary aim is to promote efficient and accountable record keeping by named Scottish public authorities.

The Act has its origins in *The Historical Abuse Systemic Review. Residential Schools and Children's Homes in Scotland 1950-1995* (The Shaw Report) published in 2007. The Shaw Report recorded how its investigations were hampered by poor record keeping and found that thousands of records had been created, but were then lost due to an inadequate legislative framework and poor records management. Crucially, it demonstrated how former residents of children's homes were denied access to information about their formative years. The Shaw Report demonstrated that management of records in all formats (paper and electronic) is not just a bureaucratic process, but central to good governance and should not be ignored. A follow-up review of public records legislation by the Keeper of the Records of Scotland (the Keeper) found further evidence of poor records management across the public sector. This resulted in the passage of the Act by the Scottish Parliament in March 2011.

The Act requires a named authority to prepare and implement a records management plan (RMP) which must set out proper arrangements for the management of its records. A plan must clearly describe the way the authority cares for the records that it creates, in any format, whilst carrying out its business activities. The RMP must be agreed with the Keeper and regularly reviewed.

2. Executive Summary

This report sets out the findings of the Keeper's assessment of the RMP of **NHS Ayrshire & Arran** by the Public Records (Scotland) Act 2011 Assessment Team following its submission to the Keeper on **4**th **May 2016**.

The assessment considered whether the RMP of NHS Ayrshire & Arran was developed with proper regard to the 14 elements of the Keeper's statutory Model Records Management Plan (the Model Plan) under section 8(3) of the Act, and whether in this respect it complies with it and the specific requirements of the Act.

The outcome of the assessment and the Keeper's decision on whether the RMP of NHS Ayrshire & Arran complies with the Act can be found under section 7 of this report with relevant recommendations.

3. Authority Background

NHS Ayrshire and Arran is one of the fourteen regions of NHS Scotland. It was formed on 1 April 2004.

It has a responsibility to provide health and social care to almost 400,000 people with an operating budget of around £700 million (for 2013-2014).

Areas of responsibility include:

- •Healthcare Quality, Governance and Standards
- Infection Control

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- Patient safety
- •Research and Development
- Waiting times
- Litigation
- Medical workforce
- •Patient Management System
- Appraisal

The Executive Medical Director is the Board's Responsible Officer and the Assistant Director Healthcare Quality, Governance and Standards is the Caldicott Guardian.

http://www.nhsaaa.net/

4. Keeper's Assessment Process

The RMP was assessed by the Public Records (Scotland) Act Assessment Team on behalf of the Keeper. Assessors used the checklist elements listed in section 5, to establish whether **[named public authority's**] RMP was developed with proper regard to the elements of the Model Plan and is compliant with the Act. The assessment also considered whether there was sufficient supporting evidence of such compliance.

Key:

G	The Keeper agrees this element of an authority's plan.	A	The Keeper agrees this element of an authority's plan as an 'improvement model'. This means that he is convinced of the authority's commitment to closing a gap in provision. He will request	R	There is a serious gap in provision for this element with no clear explanation of how this will be addressed. The Keeper may
			that he is updated as		choose to return
			work on this element progresses.		the RMP on this basis.

5. Model Plan Elements: Checklist

NHS Ayrshire & Arran

Element	Present	Evidence	Notes
1. Senior Officer Compulsory	G	G	NHS Ayrshire and Arran have identified John Burns, Chief Executive, as the individual with overall responsibility for records management in the organisation.
element			Mr Burns has provided a <i>Covering Letter</i> , dated 2 May 2016, confirming his overall strategic responsibility for records management.
			Mr Burns approved the <i>Records Management Plan</i> (the <i>Plan</i>) in May 2016, is the document 'owner' and has signed the introduction page to acknowledge this.
			The overall responsibility of the Chief Executive is confirmed by the <i>Scottish Government Records Management NHS Code of Practice (Scotland)</i> (see element 3).
			The Data Protection Policy (see element 9), the Records Management Policy (see element 3), the Information Governance Framework and other evidential documents confirm the Chief Executive as having overall responsibility for records management and data protection in the authority.
			It is the policy of NHS Ayrshire and Arran that the Chief Executive has overall responsibility for the security of information (Secure Storage Communication &

			Transportation of Personal Information Policy 5.1).
			The Chief Executive is responsible for the <i>Data Protection Confidentially and Privacy Policy</i> (see element 9). He attends the Information Governance Committee (see under General Comments below).
			The Keeper agrees that NHS Ayrshire and Arran have identified an appropriate individual to this role as required by the Act.
2. Records Manager Compulsory element	G	G	NHS Ayrshire and Arran have identified two individuals to this element. While recognising that the Act would indicate the identification of a <u>single</u> individual, the Keeper has agreed that shared responsibility is acceptable practice in this particular sector due to the clinical/corporate structure of territorial health boards.
			NHS Ayrshire and Arran have identified Robert Bryden, Head of Health Records Services and Natali Higgins, Information Governance Manager (Corporate Records) as the individuals with day-to-day responsibility for implementing the <i>Records Management Plan</i> .
			These appointments are confirmed by a covering letter from John Burns, Chief Executive Officer of NHS Ayrshire and Arran (see element 1) dated 2 nd May 2016 submitted as evidence. This letter specifies that the Information Governance Manager has primary responsibility for implementing the <i>Plan</i> .
			NHS Ayrshire and Arran have supplied Mr Bryden's <i>Job Description</i> which shows that he has a responsibility to "Develop and maintain appropriate mechanisms for information governance". They have also provide the <i>Job Description</i> for Ms. Higgins: "To manage NHS Ayrshire & Arran's Corporate Records in accordance with the legislative framework and current best practice, specifically the Public Records (Scotland) Act 2011."

			Mr Bryden reviewed the Plan before submission. Ms. Higgins is leading on the developing of the Business Classification Scheme (see element 4). This work will be key to the records management provision in the health board going forward. Ms. Higgins is also responsible for the implementation of the Corporate Records Management Policy (see element 3), reviewing the uptake of the training module (see element 12) and for undertaking compliance audits and providing updates to the Information Governance Committee on the implementation of the Plan as whole. She co-chairs the Records Management Group (for both groups see under General Comments below). The Keeper agrees that NHS Ayrshire and Arran have identified appropriate
3. Policy Compulsory element	G	G	Individuals to this role as required by the Act. NHS Ayrshire & Arran have a Corporate Records Management Policy (the Policy) which has been supplied to the Keeper. This is version 3.0 dated April 2016. The Keeper agrees that the Plan supports the objectives of the Policy. The Corporate Records Management Policy is published at http://www.nhsaaa.net/media/424939/20160908corprecman.pdf During the assessment process NHS Ayrshire & Arran ratified a new Personal Health Records Management Strategy both of which have now been provided to the Keeper. The Keeper thanks the Board for this addition and acknowledges that the new documents improve records management provision in the authority.

			A screen-shot has been provided as evidence that policies are available on the NHS Ayrshire and Arran intranet 'AthenA'. The Keeper agrees that NHS Ayrshire and Arran have a records management policy statement as required by the Act and that this is available to staff.
4. Business Classification	A	G	The introduction to the <i>Plan</i> states that "systematic management of records allows organisations to know what records they have and locate them easily." (<i>Plan</i> page 4). The attached action plan sets out the aim of developing and rolling-out a <i>Business Classification Scheme</i> (<i>Plan</i> page 28). This commitment is repeated in <i>Covering Letter</i> from the Chief Executive (see element 1) that accompanies the submission. To this end, NHS Ayrshire and Arran are developing a three level <i>Classification Scheme</i> based on its statutory functions and drawing on the processes developed by NHS NSS and other NHS Boards. This work will be lead by the Information Governance Manager (Corporate Records) (see element 2) in association with local service areas. The Keeper commends the inclusion of local business units in the development of a <i>Business Classification Scheme</i> . An <i>Update Paper</i> presented to the Board's Corporate Management Team shows their acknowledgement of this project. Progress will be reported to the Records Management Plan Group (see under General Comments below). This must remain a business decision for an authority but the Keeper acknowledges that a <u>functional</u> scheme is currently considered best practice.

The action plan makes it clear that the authority has set itself targets to complete the *Business Classification Scheme* in 3 – 5 years and then roll it out to departments (the implementation phase).

The Records Management Plan Group (see under General Comments below) note the following in their minutes of April 2015: "There will be a generic filing system across the organisation to ensure consistency. This will be done moving forward by archiving existing records and starting a new system. Old files will then be data cleansed over time. At the time of the 5 year review of the RMP, it will then be easier to find information and will know where we are."

The Keeper agrees that, with an organisation the size of NHS Ayrshire and Arran, it is inevitable that progress will be made on an incremental basis. **However, the Keeper will expect to see continual progress over the next year or so.**

NHS Ayrshire and Arran have submitted their *Capital Planning Filing Progress* Report and their *Public Health Filing System Review* as a samples of their business classification pilot work.

NHS Ayrshire and Arran are considering utilising an electronic document management system going forward. Potentially this may be a SharePoint solution. Although this decision must remain with the Board, the Keeper agrees that an EDM is a sensible consideration for an authority the size and complexity of a health board. Many Scottish public authorities have opted for the SharePoint solution. However, the Keeper would remind the Board that SharePoint is not in itself a records management system and for full functionality, particularly relating to ensuring that metadata travels with the record when extracted from the system – for the purposes of archiving for example – a records management bolt-on may be required. He requests that he is kept informed of any decisions in this area.

			The <i>Plan</i> states (under element 2 page 7) that "Service areas are responsible for managing the corporate records that they generate and maintain." The Keeper commends this local involvement as likely to create a stronger records management culture. The Keeper agrees this element of NHS Ayrshire and Arran's records management plan under 'improvement model' terms. This means that the authority has identified a gap in provision (a full business classification scheme has not yet been rolled-out in the organisation) and have put measures in place to close that gap. The Keeper's agreement is conditional on him receiving updates as the BCS project progresses.
5. Retention schedule	G	G	NHS Ayrshire and Arran have full <i>Retention Schedules</i> for clinical and for administrative records. These are based on the <i>Scottish Government NHS Code of Practice</i> published at http://www.gov.scot/Publications/2012/01/10143104/0 . Staff instructions on operating the <i>Schedule</i> are supplied in <i>Corporate Records Management Policy</i> and the <i>Operational Procedure for the Destruction of Personal Health Records</i> which have been supplied to the Keeper (see elements 3 and 6). For example cancer records are kept for 30 years and then destroyed (clinical) and boiler inspection reports are kept for 2 years after the lifetime of the boiler (administration). The Keeper agrees that NHS Ayrshire and Arran have an approved and operational retention schedule that covers the expected record types created by a territorial health board.

6. Destruction Arrangements Compulsory element	Α	G	The introduction to the <i>Plan</i> explains that effective records managements involves the efficient and systematic control of the "use and disposal of records". The <i>Plan</i> also commits the Board to effectively manage records through to their "ultimate disposal" (<i>Plan</i> page 7).
			The Board has the following procedures in place:
			Paper (Internal)
			NHS Ayrshire and Arran have provided the Keeper with staff instructions for the secure and irretrievable destruction of paper records. The Board destroy paper records using in-house shredders. No outside contractor is used.
			The <i>Plan</i> states (page 8) that "A percentage of [clinical] records that have been selected for destruction are sampled by a senior member of staff to provide quality assurance."
			The Board have provided a sample page of the daily <i>Destruction Log</i> that keeps a record of what has been destroyed and when. The Keeper commends this approach.
			Paper (External) NHS Ayrshire and Arran do not holds records with a third party storage supplier.
			Electronic: NHS Ayrshire and Arran acknowledge that procedures for the secure and irretrievable destruction of administrative records (predominantly held electronically) are not implemented throughout the organisation. They state (<i>Plan</i> page 13) "NHS Ayrshire & Arran require to develop a Corporate Records Destruction Procedure and roll this out to all functional areas. Arrangements for auditing compliance with the procedure for recording the

destruction of corporate records require to be put in place." This document the *Corporate Records Retention & Disposal Policy* has been drafted and is currently being circulated via the Records Management Group for comments. The Keeper is able to agree this aspect of the element under improvement model terms as he is convinced that, having identified a gap in provision, the authority has put processes in place to close that gap. This agreement is conditional on his receiving the guidance document when it is approved.

Hardware:

Plan page 14 "NHS Ayrshire & Arran use an external company for the destruction of hardware e.g. laptops, computers etc.." This is detailed in the authority's *Disposal of IT Equipment Process* which has been provided to the Keeper (version 2.5, February 2016). A letter has been provided confirming that a third-party supplier is in place for the destruction of redundant hardware.

The Keeper agrees that processes are in place for the secure destruction of records held on redundant hardware.

<u>Back-Ups</u>: The Board, quite properly, take back-up copies of records for business continuity reasons. This is explained in their Plan page 18 and 19 "...full backups of all data are taken once daily and hourly...". A statement has been supplied from NHS Ayrshire & Arran's Head of Infrastructure, which shows details of the back-up cycle and makes clear that the Board understand the retention period of back-up copies.

The Keeper is able to agree this element of NHS Ayrshire & Arran's *Records Management Plan* under 'improvement model' terms. This means that he acknowledges the authority has identified a gap in their provision (in this case, lack of staff guidance on the routine deletion of records held electronically), but he agrees that they have put in place measures to close

			that gap. His agreement is conditional on his being updated as the project progresses.
7. Archiving and Transfer Compulsory element	A	G	NHS Ayrshire & Arran have selected Ayrshire Archives as the proper repository for records selected for permanent preservation. There is an arrangement where by Ayrshire Archives take NHS records of historical interest. E-mail confirmation of this arrangement from the Archivist has been provided. The <i>Plan</i> lists as an action under this element "the Board will draft a memorandum of understanding or agreement for the depositing of records with Ayrshire Archives." (confirmed by the Action Plan page 30). The Keeper agrees the importance of this action and asks that a copy of the MOU is supplied as soon as possible to keep NHS Ayrshire & Arran's submission up-to-date. The Keeper is able to agree element 7 on 'improvement model' terms while he awaits a signed MOU.
8. Information Security Compulsory element	G	G	NHS Ayrshire and Arran have a Secure Storage Communication & Transportation of Personal Information Policy which has been supplied to the Keeper. This is version 4.2 approved by the Information Governance Operational Delivery Group (see under General Comments below) December 2015. This Policy provides security "best practice" guidance to record creators, principally on the clinical side, both in paper format and electronically (section 2 – Purpose). NHS Ayrshire and Arran have a Appropriate Use of IT Facilities Policy which has also been supplied to the Keeper. This is version 1.5 approved by the Information Governance Operational Delivery Group January 2016. This Policy provides security guidance to ITC users, both clinical and administrative.

			A screen-shot has been provided as evidence that these policies are available on the NHS Ayrshire and Arran intranet 'AthenA'. These security policies are supported by a suite of other policies and guidance such as the Closed Circuit TV Policy and the Password Policy. Many of these have been provided to the Keeper. As samples of information security provision in the authority, the Secure Storage, Communication & Transportation of Personal Information Policy is published at http://www.nhsaaa.net/media/424923/20160908secstor.pdf and the Appropriate Use of IT Facilities Policy at http://www.nhsaaa.net/media/424931/20160809appuseit.pdf Staff contracts include an employee commitment to confidentiality (Data Protection Policy – see element 9 – 7.1). FairWarning software is deployed throughout NHS Ayrshire & Arran; this system flags potentially unauthorised or inappropriate access to information systems, which is duly investigated. The Plan (page 15) states an aim of future compliance with ISO-27001. NHS Ayrshire and Arran have given the Keeper a commitment to alert him when they are confident that they have attained this standard. The Keeper agrees that NHS Ayrshire and Arran have procedures in place that appropriately ensure information security in the authority.
9. Data Protection	G	G	NHS Ayrshire and Arran have a <i>Data Protection, Confidentiality and Privacy Policy</i> (the <i>Data Protection Policy</i>) which has been supplied to the Keeper. This is version

2.1 approved by Information Governance Operational Delivery Group (see under General Comments below) in October 2015.

The Policy states: "[NHS Ayrshire & Arran] seeks to ensure that personal and sensitive information is not divulged with out just cause and that it complies with the requirements of all current data protection in force at any given time."

The Data Protection Policy is published at: http://www.nhsaaa.net/media/356893/20151126dpppol.pdf
And is also available on the authority's intranet. A screen-shot has been supplied confirming this.

The *Data Protection Policy* explains the 8 (current) principles of data protection (Appendix 1).

Subject access is promoted through the *Data Protection Policy* and through a publically available on-line guidance document *Access to Personal Information Held About You* which has been supplied to the Keeper http://www.nhsaaa.net/media/92664/sarform.pdf.

A screen-shot has been provided as evidence that this policy is also available on the NHS Ayrshire and Arran intranet 'AthenA'.

The authority is registered with the Information Commissioner: **Z8437002**.

NHS Ayrshire and Arran have a Secure Storage Communication & Transportation of Personal Information Policy which has been supplied to the Keeper (see element 8).

Staff contracts include an employee commitment to confidentiality (Data Protection

			Policy 7.1). FairWarning software is deployed throughout NHS Ayrshire & Arran; this system flags potentially unauthorised or inappropriate access to information systems, which is duly investigated. New projects are assessed against data protection risk. The Keeper commends this practice. The Checklist employed in this assessment has been provided. The Keeper agrees that NHS Ayrshire and Arran have properly considered their
10 Rusinoss			responsibilities under the Data Protection Act 1998. The introduction to the Planemphasises that systematic management of records
10. Business Continuity and Vital Records	G	G	The introduction to the <i>Plan</i> emphasises that systematic management of records allows NHS Ayrshire and Arran to "provide continuity in the event of a disaster". NHS Ayrshire and Arran operate an overall <i>Business Continuity Strategy</i> supported by individual departmental <i>Continuity Plans</i> . The Keeper has been provided with the overall <i>Business Continuity Plan</i> (version 5.0 January 2016) and the associated <i>IT Disaster Recovery Plan</i> (version 9.0 January 2016).
			He has also been provided with a sample of a departmental plan (Renal Service). The Keeper agrees that both the corporate and the local plans consider the
			recovery of records "Technical Recovery Procedures". A screen-shot has been provided as evidence that policies are available on the NHS Ayrshire and Arran intranet 'AthenA'.
			The Keeper agrees that NHS Ayrshire & Arran has approved business continuity plans in place and that they properly consider the recovery of records.

11. Audit trail	Α	G	It is one of the "main objectives" of the <i>Policy</i> (see element 3) "that corporate records and the information within them can be efficiently retrieved by those with a right of access, for as long as the corporate records are held by NHS Ayrshire & Arran."
			The introduction to the <i>Plan</i> explains that effective records managements involves the efficient and systematic control of the storage and retrieval of records and emphasises the importance of knowing "what records they have, and [the ability to] locate them easily".
			To this end NHS Ayrshire and Arran are reviewing record tracking as part of a larger programme to structure an <i>Business Classification Scheme</i> (see element 4). They state under actions against this element "Roll out of the Corporate Governance Controlled Document Policy and associated Standard Naming Convention for Electronic Files, Folders and Records to all NHS Ayrshire & Arran functional areas; this will be included in the development and roll-out of the business classification scheme." (<i>Plan</i> page 19). Responsibility for this lies with the Information Governance Manager (see element 2). There is an Action (page 31) to develop a methodology of collecting evidence to prove proper adoption of the naming convention when rolled-out. The Keeper commends this forward planning.
			The Keeper agrees that the development of the <i>Business Classification</i> structure will greatly improve document tracking particularly as it is clear that NHS Ayrshire and Arran have standard naming conventions already developed. The Keeper requires to be updated as this project develops.
			He also agrees that many of the line-of-business systems used by the Board, particularly around clinical records, will impose suitable naming convention/version

			control at time of record-creation to adequately track records subsequently. NHS Ayrshire and Arran offer a <i>Health Records Screenshot</i> as an example of when this is likely to be the case. The Keeper agrees this element of NHS Ayrshire and Arran's <i>Plan</i> under 'improvement model' terms. This means that he acknowledges that an authority has identified a gap in records management provision, in this case a lack of board-wide record tracking, but is convinced that the authority has committed to a process to close that gap. The Keeper's agreement is conditional on him receiving updates as the project progresses.
12. Competency Framework for records management staff	G	G	The SG NHS Code of Practice states (section 3) that "the records management function should be recognised as a specific corporate responsibility within every NHS organisation. It should provide a managerial focus for records of all types in all formats, including electronic records, throughout their lifecycle, from planning and creation through to ultimate disposal. It should have clearly defined responsibilities and objectives, and necessary resources to achieve them".
			The Keeper has been provided with the <i>Job Descriptions</i> of both the Head of Health Records Services and the Information Governance Manager (Corporate Records). These show that the individuals identified at element 2 have the appropriate responsibilities and skills to implement the <i>Plan</i> as required (see element 2).
			It is one of the "main objectives" of the <i>Policy</i> (see element 3) "that all staff are made aware of their corporate record-keeping responsibilities through generic and specific training programmes and guidance".
			This is supported by a statement in the <i>Plan</i> (page 20/21): "NHS Ayrshire & Arran provides appropriate training and development to ensure all staff are aware of their confidentiality, data protection and records management responsibilities."

The *Plan* contains details of the information governance principles that staff will be trained in (*Plan* page 22).

Staff are made aware of policies and procedures through: 'Daily Digest', Stop Press' and Learn-Pro training. A sample of the electronic training has been provided. A screen shot showing staff access to training intranet sites has also been supplied. The Keeper thanks the Board for sharing these. The Keeper notes a commitment to update this training (*Plan* page 8) and requests that he is provided with the update when possible to keep the authority's submission up-to-date. A sample of a Stop Press article (Fairwarning) has also been supplied.

Staff are expected to "participate in any training required in order to achieve a standard of knowledge and understanding...relative to the duties of their post." (*Data Protection Policy* – **see element 9** - 6.5).

There is a specific commitment in the *Data Protection Policy* that staff are appropriately trained and effectively supervised. This training is to be arranged by the Information Governance Team. Managers are required to ensure their teams undertake training (*Data Protection Policy* 6.4).

The Board have provided the Keeper with a sample awareness raising poster as has a sample training manual.

The Keeper agrees that NHS Ayrshire and Arran have ensured that the individuals identified at element 2 have the required authority and skills to implement the *Plan*. They also consider training opportunities for other members of staff when appropriate.

13. Assessment and Review	G	G	The Act requires a scheduled public authority to "keep its records management plan under review" (part 1 5.1 (a)).
und Newew			NHS Ayrshire and Arran have set a review date on the <i>Plan</i> of May 2017 and annually thereafter.
			The Information Governance Manager (see element 2) and the Records Management group (see under General Comments below) are responsible for the review, for monitoring the implementation of the <i>Plan</i> and for delivering the objectives of the <i>Action Plan</i> . The Records Management Group reports to the Information Governance Operational Delivery Group and the Information Governance Committee quarterly.
			Before creating the Records Management Plan, NHS Ayrshire and Arran engaged their Internal Audit facility to create a base standard of current provision from which an action plan could be created. The Keeper highly commends this approach.
			Although the first review is not due until 2017, NHS Ayrshire and Arran have provided the Keeper with a sample of how a self assessment report will appear. The Board make the following statement regarding review methodology: "NHS Ayrshire & Arran will carry out future audits regarding compliance with the implemented policies, procedures and guidance. We will seek our internal auditors assistance and support with this and will also involve local service areas in audits e.g storage of information audit which has been piloted in our Corporate Support Services." And "NHS Ayrshire & Arran have engaged their internal auditors, PWC, to conduct other information governance related audits e.g. Review of arrangements around Policies and Procedures. NHS Ayrshire & Arran are currently conducting an IT General Controls internal audit."
			The Plan (page 15) commits the authority to run a gap analysis on its information

security structure in light of a directive from the Scottish Government e-health: http://www.ehealth.nhs.scot/wp-content/uploads/sites/7/2015/07/Director-Letter-Information-Governance-3.pdf

The Keeper also acknowledges that policies and procedures submitted in evidence have review dates included in their control sheets and commends this:

The *Health and Safety Manual Security Procedure* document is due for review by September 2016.

The *Information Governance Framework* is due for review by March 2017.

The Data Protection Policy (see element 9), the Corporate Governance Controlled Document Policy, the Corporate Records Management Standards (for both see element 11) and the Access to Personal Information Held About You document (element 9) are all due for review by October 2017.

The Secure Storage, Communication & Transportation of Personal Information Policy is due for review by December 2017.

The Appropriate Use of IT Facilities Policy (see element 8) is due for review by January 2018.

The Operational Procedure for the Destruction of Personal Health Records document is due for review by February 2018.

The *Policy* (see element 3) is due for review by April 2018.

Coincidentally, the *eHealth Disaster Recovery Plan* and accompanying procedures are due to be reviewed during the period of this assessment. **In order to keep the**

submission current, can NHS Ayrshire and Arran please submit any new version of these document as soon as possible.

The Data Protection Policy (see element 9) commits NHS Ayrshire and Arran to conduct a regular review of the management of personal information (Data Protection Policy section 7.8). The Board make the following statement regarding this: "The auditing and review of the management of personal identifiable information has been conducted in functional areas which have been subject to an information security breach, to address risks and seek improvements to ensure compliance with Data Protection legislation."

The *Plan* (page 12) commits NHS Ayrshire and Arran to review their retention decisions every two years. The Keeper notes that NHS Ayrshire and Arran intend to audit compliance with retention decisions in the early part of 2016. (Action Plan) this work was to be carried out by the Information Governance Manager (see element 2) and local service areas. The Keeper commends the involvement of local business units in self-assessment.

NHS Ayrshire and Arran's registration with the Information Commissioner (see element 9) must be renewed before 09 February 2017.

The Keeper also acknowledges that NHS Ayrshire and Arran have an 'Action' against element 6 (*Plan* page 30) to progress "Arrangements for auditing compliance with the procedure for recording the destruction of corporate records..." with a target date of September 2017. The Keeper commends this.

The Keeper agrees that NHS Ayrshire & Arran has arrangements in place to properly review their RMP and other key records management policies.

14. Shared Information	G	G	The RMP states that NHS Scotland undertakes information sharing on a routine basis in line with the Data Protection Act 1998.
			NHS Ayrshire and Arran enters into data sharing agreements using the Ayrshire & Arran Protocol for Sharing Information. Their partners in this accord are East Ayrshire Council, North Ayrshire Council, South Ayrshire Council, Police Scotland and the Scottish Fire and Rescue Service. A copy of the Accord has been submitted as evidence and is dated August 2014.
			NHS Ayrshire and Arran has also submitted a sample <i>Information Sharing Protocol</i> guidelines (with East Ayrshire Council) developed using Scottish Accord for the Sharing of Personal Information (SASPI). The Keeper is familiar with SASPI and agrees it appropriately considers information governance.
			The Keeper agrees that NHS Ayrshire and Arran properly consider information governance when entering into arrangements to share information with third parties.

NHS Ayrshire & Arran

Version:

This assessment is on the Records Management Plan (the Plan) of NHS Ayrshire & Arran v1.1 dated September 2016.

The *Plan* contains an 'action plan' section against each element (section 3) explaining the entries in the *Action Plan* which appears at the end of the document. The Keeper agrees this action plan appears robust and the targets reasonable. A separate, but complimentary, action plan going forward was presented to the Corporate Management Team in April 2016 and has also been supplied to the Keeper.

The Plan is accompanied by a Covering Letter of endorsement from the Chief Executive (see element 1) who personally approved it.

The *Plan* mentions the Act and is based on the Keeper's, 14 element, Model Plan http://www.nrscotland.gov.uk/record-keeping/public-records-scotland-act-2011/resources/model-records-management-plan.

The Board have supplied, as part of their evidence pack, a paper presented to the Corporate Management Team in which they explain the Act as follows: "The purpose of the PRSA is to place demands on public authorities to make improvements to the way they manage their records. The Act aims to raise the profile of records management across the public sector in Scotland and to instigate improvements and efficiencies in public record keeping. As well as increasing business efficiency, good records management helps authorities meet their statutory obligations and thereby respond better to their users needs. Good records management helps authorities to better monitor public services, maintain accurate records of the circumstances and experiences of individuals, and safeguard the records of vulnerable people." The Keeper endorses this statement and thanks NHS Ayrshire and Arran for formerly record it.

Information Governance Operational Delivery Group/Records Management Plan Group and IG Committee

The Information Governance Committee is a board-level committee attended by the Chief Executive (see element 1). The membership of this group has been provided.

The Information Governance Operational Delivery Group is a sub group reporting to the Information Governance Committee.

The Records Management Group, co-chaired by the Information Governance Manager (see element 2), meets bi-monthly.

These groups approved the Plan as it passed through various stages prior to sign-off from the CEO. Update reports on implementation will be submitted to the Information Governance Committee quarterly.

The Information Governance Operational Delivery Group, attended by the Head of Information Governance, reports to the Information Governance Committee. The Head of Information Governance is the authority's Data Protection Officer.

The Operational Delivery Group updated and ratified the *Records Management Policy* (see element 3) approved the *Data Protection Policy* (see element 9). Compliance with this *Policy* is delegated to the Head of Information Governance.

The Information Governance Operational Delivery Group approved The Secure Storage, Communication & Transportation of Personal Information Policy

These groups are clearly of fundamental importance to records management in the authority and the Keeper thanks NHS Ayrshire & Arran for including information about its work in their submission.

Third Parties:

The Act makes it clear that records created by a contractor in carrying out a scheduled authority's functions are public records (Part 1 section 3.1 (b)).

NHS Ayrshire & Arran may send patients to other NHS Health Boards for healthcare and is content that these Health Boards take their responsibilities under record management and information governance seriously and to the same standard as NHS Ayrshire & Arran. As public authorities they are also bound by the principles of the Data Protection Act 1998 and the requirements of the Public Records (Scotland) Act 2011.

Assessment Report

Private healthcare providers and third party providers contracted by NHS Ayrshire & Arran are expected to manage their records in line the Scottish Government Records Management Code of Practice (Scotland) Version 2.1 2012. Evidence has been submitted as an example of the clauses that are included within Service Level Agreements relating to Data Protection, Confidentiality, Freedom of Information and the Public Records (Scotland) Act. NHS Ayrshire & Arran have made a commitment to take into account the clause provided by Scottish Archives Council and the practices of other NHS Boards going forward.

6. Keeper's Summary

Elements 1 - 14 that the Keeper considers should be in a public authority records management plan have been properly considered by NHS Ayrshire & Arran. Policies and governance structures are in place to implement the actions required by the plan.

7. Keeper's Determination

Based on the assessment process detailed above, the Keeper agrees the RMP of NHS Ayrshire & Arran.

• The Keeper recommends that NHS Ayrshire & Arran should publish its agreed RMP as an example of good practice within the authority and the sector.

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This report follows the Keeper's assessment carried out by,

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Pete Wadley
Public Records Officer

Robert Fotheringham
Public Records Officer

8. Endorsement of Report by the Keeper of the Records of Scotland

The report has been examined and is endorsed under the signature of the Keeper of the Records of Scotland as proof of compliance under section 1 of the Public Records (Scotland) Act 2011, and confirms formal agreement by the Keeper of the RMP as submitted by **NHS Ayrshire & Arran** In agreeing this RMP, the Keeper expects NHS Ayrshire & Arran to fully implement the agreed RMP and meet its obligations under the Act.

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Tim Ellis

Keeper of the Records of Scotland