

The Public Records (Scotland) Act 2011

Board of Trustees of the National Museums of Scotland

Progress Update Review (PUR) Report by the PRSA Assessment Team

1st December 2023

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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 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 recordkeeping 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. Progress Update Review (PUR) Mechanism

Under section 5(1) & (2) of the Act the Keeper may only require a review of an authority's agreed RMP to be undertaken not earlier than five years after the date on which the authority's RMP was last agreed. Regardless of whether an authority has successfully achieved its goals identified in its RMP or continues to work towards them, the minimum period of five years before the Keeper can require a review of a RMP does not allow for continuous progress to be captured and recognised.

The success of the Act to date is attributable to a large degree to meaningful communication between the Keeper, the Assessment Team, and named public authorities. Consultation with Key Contacts has highlighted the desirability of a mechanism to facilitate regular, constructive dialogue between stakeholders and the Assessment Team. Many authorities have themselves recognised that such regular communication is necessary to keep their agreed plans up to date following inevitable organisational change. Following meetings between authorities and the Assessment Team, a reporting mechanism through which progress and local initiatives can be acknowledged and reviewed by the Assessment Team was proposed. Key Contacts have expressed the hope that through submission of regular updates, the momentum generated by the Act can continue to be sustained at all levels within authorities.

The PUR self-assessment review mechanism was developed in collaboration with stakeholders and was formally announced in the Keeper's Annual Report published on 12 August 2016. The completion of the PUR process enables authorities to be credited for the progress they are effecting and to receive constructive advice concerning on-going developments. Engaging with this mechanism will not only maintain the spirit of the Act by encouraging senior management to recognise the need for good records management practices, but will also help authorities comply with their statutory obligation under section 5(1)(a) of the Act to keep their RMP under review.

3. Executive Summary

This Report sets out the findings of the Public Records (Scotland) Act 2011 (the Act) Assessment Team's consideration of the Progress Update template submitted for Board of Trustees of the National Museums of Scotland. The outcome of the assessment and relevant feedback can be found under sections 6 – 8.

4. Authority Background

National Museums Scotland is a public body. The Board of Trustees is National Museums Scotland's governing body and the Board is accountable to Scottish Ministers and the Scottish Parliament. The Board is responsible for setting the National Museums Scotland's vision, strategy and policy and for monitoring progress to achieve these. The Museums' Director has overall responsibility for implementing the agreed strategic priorities and actions of the Board. The principle aim of National Museum's Scotland is to preserve, interpret and make accessible for all, the past and present of Scotland, other nations and cultures, and the natural world.

The Director and Executive Team make up the top management tier of National Museums Scotland.

<https://www.nms.ac.uk/about-us/>

5. Assessment Process

A PUR submission is evaluated by the Act's Assessment Team. The self-assessment process invites authorities to complete a template and send it to the Assessment Team one year after the date of agreement of its RMP and every year thereafter. The self-assessment template highlights where an authority's plan achieved agreement on an improvement basis and invites updates under those 'Amber' elements. However, it also provides an opportunity for authorities not simply to report on progress against improvements, but to comment on any new initiatives, highlight innovations, or record changes to existing arrangements under those elements that had attracted an initial 'Green' score in their original RMP submission.

The assessment report considers statements made by an authority under the elements of its agreed Plan that included improvement models. It reflects any changes and/or progress made towards achieving full compliance in those areas where agreement under improvement was made in the Keeper's Assessment Report of their RMP. The PUR assessment report also considers statements of further progress made in elements already compliant under the Act.

Engagement with the PUR mechanism for assessment cannot alter the Keeper's Assessment Report of an authority's agreed RMP or any RAG assessment within it. Instead the PUR Final Report records the Assessment Team's evaluation of the submission and its opinion on the progress being made by the authority since agreeing its RMP. The team's assessment provides an informal indication of what marking an authority could expect should it submit a revised RMP to the Keeper under the Act, although such assessment is made without prejudice to the Keeper's right to adopt a different marking at that stage.

Key:

G	The Assessment Team agrees this element of an authority's plan.	A	The Assessment Team agrees this element of an authority's progress update submission as an 'improvement model'. This means that they are convinced of the authority's commitment to closing a gap in provision. They will request that they are updated as work on this element progresses.	R	There is a serious gap in provision for this element with no clear explanation of how this will be addressed. The Assessment Team may choose to notify the Keeper on this basis.
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6. Progress Update Review (PUR) Template: Board of Trustees of the National Museums of Scotland

Element	Status of elements under agreed Plan 12FEB18	Status of evidence under agreed Plan 12FEB18	Progress review status 01DEC23	Keeper's Report Comments on Authority's Plan, 12FEB18	Self-assessment Update as submitted by the Authority since 12FEB18	Progress Review Comment 01DEC23
1. Senior Officer	G	G	G	Update required on any change.	No change in the post or the named individual. Senior Officer is Keith Pentland, Director of Finance & Resources.	Thank you for confirming that there has been no change to this Element. Update required on any future change.
2. Records Manager	G	G	G	Update required on any change.	No change in the Records Manager post or the named individual. Operational responsibility for records management lies with Dawn Lindsay, Information & Knowledge Manager. Katy Mackin, Information and Knowledge Management Assistant replaced Ailsa James in September 2023. This position has now been made permanent.	Thank you for notifying the Assessment team that there has been no changes to the Keeper's Key Contact. It is also positive to know that the Information and Knowledge Management now has a permanent Assistant post as well. Update required on any future change.
3. Policy	G	G	G	The Keeper notes the Board have included the following improvement in the action plan (<i>Plan</i> appendix 2): "Revision of Records Management policy as part of ICT Action Plan,	The Records Management Policy was updated in 2019 to reflect the change in Data Protection legislation (GDPR) and minor amendments were made in 2021 to reflect the move from EU Data Protection legislation to the UK Act post-Brexit. The policy is aligned to the revised Information Security Policy.	Thank you for this update on scheduled Records Management Policy review and update to align with the current legislative landscape. The receipt of the Policy is also noted with thanks.

				to ensure it is aligned with other policies comprising Information Security Management System (ISMS).” This is confirmed in the <i>Plan</i> under element 8 Information Security. He requests that he is updated when this action has been completed.	The next Records Management policy review is due by 21 January 2024. Evidence: 3.1. Records Management Policy	
4. Business Classification	A	G	G	The Keeper agrees this element of The Board of Trustees of the National Museums of Scotland’s <i>Records Management Plan</i> under ‘improvement model’ terms. This means that the authority has identified a gap in provision (in this case that the formal business classification scheme is still under development), but the Keeper is confident that they have put processes in place to close that gap. The Keeper’s agreement is dependent on his being updated as the project progresses. He acknowledges that the Board have	A FAT (function, activity, task) business classification scheme has been developed following revisions to retention schedules as set out in the 2018 Records Management Plan. The Business Classification Scheme is a live document and will be reviewed and updated as necessary. Evidence: 4.1. Business Classification Scheme	The Assessment Team thanks you for this positive update; it is great to hear that a Business Classification Scheme is now operational, and the team thanks NMS for providing a copy. It is agreed that this is a live document and should be kept up to date through regular reviews. As NMS has now closed the gap identified by the Keeper in 2018, the Team is content to change this Element from Amber to Green in the PURs. If this was a formal resubmission, it is likely that this Element would be graded Green by the Keeper. This does not change the original RAG status of the Element, but shows potential for a future resubmission.

				committed to do this.		
5. Retention Schedule	G	G	G	<p>The Board have submitted their retention schedule, which is being revised 2017/18. This review will coincide with the development of the authority's <i>Business Classification Scheme</i> as explained in element 4 above. However, the Keeper acknowledges that the authority has a current operational retention schedule. He requires to be updated to any changes when the review is completed.</p>	<p>Revisions to the organisational Retention Schedules took place in 2019/2020 and an up-to-date master Retention Schedule has been completed. The revised Schedules have been endorsed by the relevant Heads of Departments/Directors and are applied to records at a departmental level.</p> <p>All revised Schedules have been compiled into a master document arranged by business function which aligns with the Business Classification Scheme (BCS).</p> <p>The Retention Schedules are live documents and will be reviewed and updated as necessary. The Schedules are available to all staff via the intranet.</p> <p>Evidence: 5.1. Master Retention Schedule 5.2. Retention Schedule Guidance Notes 5.3. Screenshot of NMS Intranet page (Retention Schedules)</p>	<p>Thank you for this update on Retention Schedule revision, and the necessary alignment of this with the Business Classification Scheme. It is also good to hear that these documents are readily available to all staff via NMS intranet.</p> <p>The receipt of Master Retention Schedule, Retention Schedule Guidance Notes, and the screenshot of the relevant intranet page, are noted with many kind thanks.</p>
6. Destruction Arrangements	G	G	G	<p>Update required on any change.</p>	<p>Physical Records Waste Management services are managed centrally by our Facilities Management department. In 2022 the contract moved from Scotwaste to Hamilton Waste Management (on a 12-month contract). The confidential waste sub-contract is with Secure Shed who</p>	<p>Thank you for this update on physical (paper) records destruction arrangements. The Team notes that confidential waste destruction is now provided by a commercial provider who, in turn, has outsourced the service. That Waste Transfer Notices and</p>

					provide Waste Transfer Notices and Destruction Certificates. Evidence: 6.1. IKM Guidance – Disposing of Documents	Destruction Certificates are provided is noted with thanks. Thank you for providing the Assessment Team with the Information & Knowledge Management Team’s Documents Disposal Guidance provided; this is noted with thanks.
7. Archiving and Transfer	G	G	G	Update required on any change.	Work is ongoing to undertake a full audit of the museum’s paper record store and to review the processes around the deposition and destruction of records. We are working with colleagues in the Library Services department to identify records for transfer to the NMS institutional archive, to review the paperwork and workflow. Evidence: 7.1. IKM Guidance – Disposing of Documents	Thank you for this update on archiving and transfer arrangements. It is great to hear that a full audit of paper records help in store is in the works alongside the relevant processes, and that collaborative work on records selection and transfer for permanent preservation in the NMS Institutional Archive is ongoing. The review of procedural paperwork and associated workflows is also very appropriate. The receipt of Evidence also provided under Element 6 is noted with thanks.
8. Information Security	G	G	G	The Keeper notes the Board have included the following improvement in the action plan (<i>Plan</i> appendix 2): “Revision of Records Management policy as part of ICT Action Plan,	ICT policies have been revised and consolidated into 2 documents: Acceptable Use of ICT Facilities Policy and Information Security Policy. These updated policies were implemented in 2020. Barracuda email security protection was	Thank you for notifying us of the consolidation of ICT policies into two policies in 2020. It is also interesting to hear about the email security protection software and backups in use. It is also good to hear that NMS

				<p>to ensure it is aligned with other policies comprising Information Security Management System (ISMS)" He requests that he is updated when this action has been completed.</p>	<p>introduced in 2020. This also includes a full backup of all O365 data, held independently from Microsoft.</p> <p>National Museums Scotland rolled out mandatory cyber security training to all staff in 2021 through an online e-learning package.</p> <p>All laptops are encrypted to ensure safe working both in the office and from home.</p> <p>Phishing exercises are conducted each month to assess the effectiveness of staff cyber training.</p> <p>Vulnerability scanning is conducted every month to identify systems for patching.</p> <p>Cyber Essentials Plus accreditation was regained on 23/09/22.</p> <p>Cyber Security was audited at NMS in 2019 and 2022 as part of our routine internal audit programme. An additional internal audit of remote working was conducted in 2020/21.</p> <p>ICT introduced 3rd party supplier security/due diligence questionnaires and processes to ensure the safety and security of NMS data when engaging suppliers and data processors.</p> <p>In 2022 two factor authentication was enabled for access to O365 apps.</p>	<p>has taken steps to enable secure working from both at home and at the office through device encryption, vulnerability scanning, two-factor authentication, awareness campaigns, mobile device management, and all the associated guidance.</p> <p>For comments on training, see Element 12.</p> <p>The Team would also like to extend congratulations for NMS regaining Cyber Essential Plus accreditation in 2022. While external certification is not required, it is a great way to demonstrably maintain good practice in all aspects of organisational information security.</p> <p>The Evidence documents provided are noted with thanks.</p> <p>The Keeper's comments in 2018 Assessment included reference to ongoing work to ensure RMP alignment with other policies comprising NMS' Information Security Management System (ISMS). The Assessment Team acknowledges that the ISMS is no longer in existence, and has been replaced by the revised and consolidated ICT policies.</p>
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					<p>Mobile device management was introduced in 2022.</p> <p>Guidance was produced for the introduction of hybrid working/WFH in 2022 – Hybrid Working Policy & Procedure – Section 6.5 covers Information Management & Data Security</p> <p>Responsible Officer has changed: Colin Watson, Head of ICT.</p> <p>Evidence: 8.1. Acceptable Use of ICT Facilities Policy 8.2. Information Security Policy 8.3. Hybrid Working Policy & Procedures 8.4. IKM Guidance – Sharing & Securing Documents 8.5. Cyber Essentials Certificate</p>	
<p>9. Data Protection</p>	<p>G</p>	<p>G</p>	<p>G</p>	<p>Update required on any change.</p>	<p>A Data Protection Working Group was created to plan for and oversee the implementation of the transition to EU GDPR in May 2018.</p> <p>The Information & Knowledge Manager was appointed as Data Protection Officer for NMS.</p> <p>The Data Protection Policy was last reviewed in January 2021 and is available to all staff on the NMS intranet.</p> <p>Personal data registers have been</p>	<p>Thank you for this comprehensive update on NMS’ Data Protection arrangements. It is clear from this update that NMS continues to take extensive measures to maintain its compliance with this Element, including continuing monitoring, appropriate use of DPIAs, guidance, and a data protection audit. Thank you also for providing the suite of relevant evidence which has been received with thanks.</p>

					<p>completed for every department across the organisation and this data is reflected in the revised organisational retention schedules. We also maintain an organisational register of data processors.</p> <p>NMS intranet pages have been updated with comprehensive guidance on data protection legislation at work, especially in regard to the management of records and information.</p> <p>We have introduced a formal Data Breach procedure (tested through a tabletop exercise), we undertake Data Protection Impact Assessments for all new projects, processes and technologies which involve personal data and we have created a suite of Privacy Notices.</p> <p>A series of Data Protection training sessions were rolled out in 2018-2019. These were well-attended and well received by staff. The training will move to an online e-learning format in 2023.</p> <p>An annual report on Data Protection activity is submitted to the NMS Trustees Audit and Risk Committee.</p> <p>We underwent an audit of Data Protection compliance at NMS in 2019 as part of our routine internal audit programme.</p> <p>Evidence: 9.1. Data Protection Policy</p>	<p>Please also see comments and update provided under Element 14.</p>
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					<p>9.2. IKM Personal Data Register 9.3. Screenshot of Intranet (Data Protection Pages)</p> <p>9.4. Data Breach Procedure</p> <p>9.5. DPIA Guidance</p> <p>9.6. DPIA Template</p> <p>9.7. Privacy Notice</p>	
10. Business Continuity and Vital Records	G	G	G	Update required on any change.	No change apart from the responsibility for Business Continuity in the organisation now lies with Keith Pentland, Director of Finance & Resources.	Thank you for updating us on a change in Business Continuity responsibility. It is clear that NMS' Business Continuity arrangements and continuing access to Vital Records during an unexpected event will have been thoroughly tested in the past few years.
11. Audit Trail	A	G	A	The Keeper can agree this element under 'improvement model' terms. This means that the Board has identified a gap in provision (audit trail for electronic records needs improvement) and has put processes in place to close that gap. The Keeper is convinced of a commitment to pursue this objective, but will ask for annual updates as the project progresses.	<p>An audit of shared electronic files was conducted in line with the implementation of department retention schedules.</p> <p>During 2020 National Museums Scotland began using Microsoft Teams to enable colleagues to work from home more efficiently. Clear guidance was issued to all departments on the records lifecycle in Microsoft Teams, advising that all finalised records are transferred to secure locations on the network drives.</p> <p>The roll out of Teams across the organisation in 2020 was carefully managed with governance put in place at an early stage. Creation and deletion of Teams sites is managed by our ICT department, who also monitor the usage of</p>	<p>The Keeper will expect an authority's RMP to provide evidence that the authority maintains a complete and accurate representation of all changes that occur in relation to a particular record.</p> <p>The completion of an audit of shared electronic files is excellent news. It is also noted that this was completed in line with implementing departmental retention schedules.</p> <p>The adoption of Microsoft Teams to enable efficient work from home due to the pandemic and multiple lockdowns is noted with thanks. It</p>

					<p>Teams sites, and features such as external sharing have been disabled by default. Regular communications and contact with departments ensured that colleagues were following a standardised structure for their data which reflected our previous set up on Shared drives.</p> <p>IKM have worked to ensure that staff do not save corporate information in OneDrive but rather use the network drives and Teams locations by issuing guidance.</p> <p>National Museums Scotland is embarking on a project to migrate all staff files from network drives to Sharepoint during 2023. This project will involve the audit and migration of data, and introduction of records management tools to improve the management, security, audit and visibility of our data.</p> <p>Evidence: 11.1. IKM Guidance – Naming Your Files & Folders 11.2. IKM Guidance – Version Control 11.3. IKM Guidance – Electronic Document Management 11.4. IKM Guidance Sharing & Securing Documents 11.5. IKM Guidance – Disposing of Documents 11.6. IKM Guidance – Transferring Records to Corporate Archive 11.7. IKM Guidance – Leaving NMS</p>	<p>is positive to hear that this implementation was accompanied with clear guidance. The Team is also very glad to hear of the steps taken to ensure adherence to this guidance.</p> <p>It is good to hear that NMS is moving away from the use of shared network drives for the storage and management of born-digital public records. The structured and accountable records migration – from network drives to SharePoint – is a major endeavour, and should be guided by the Business Classification Scheme. Once completed, this will improve the automated audit trail functionality available within NMS’ systems.</p> <p>The suite of IKM Guidance shared with the Assessment Team has been received with thanks.</p> <p>In 2018, the Keeper identified a gap in provision under Element 11, specifying that audit trail arrangements for electronic records needed improvement. A great deal has changed since that point, but the records migration project will be a significant step towards better audit trail functionality. The Assessment</p>
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					11.8. Destruction Log	Team is content to keep this Element at Amber while to work is ongoing, but it is clear that NMS is making significant progress in this Element. We look forward to updates on this project in subsequent PURs.
12. Competency Framework	G	G	G	New staff are provided with information security policies on entry and must sign to agree they have understood and will comply with their clauses. The <i>Plan</i> states (page 14) that the Board intend to improve their practice in training and awareness of information security. Appropriate training is a requirement of the <i>Information Security Policy (IS Policy page 2)</i> . The Keeper would be interested to know more about this when the <i>Plan</i> is reviewed.	<p>A series of in-depth Data Protection training sessions were rolled out in 2018-2019. These were well-attended and well received by staff.</p> <p>National Museums Scotland has purchased an online Data Protection training course which will be made available to all staff during 2023/24. This will ensure we reach all staff who require data protection training, who may not be able to attend in-person training.</p> <p>National Museums Scotland rolled out mandatory cyber security training to all staff in 2021 through an online e-learning package.</p>	<p>Element 12 stipulates that 'staff creating, or otherwise processing records, [should be] appropriately trained and supported'.</p> <p>The Team notes with thanks that in-depth Data Protection training took place as indicated in the Agreement Report in 2018. The more recently-acquired online-base training is also noted with thanks</p> <p>Thank you also for sharing that mandatory cyber security training was rolled out to all staff in 2021.</p>
13. Assessment and Review	G	G	G	Update required on any change.	<p>Reviews of the Records Management Plan are undertaken by the Information and Knowledge Management team.</p> <p>The plan will continue to be reviewed every 2 years or in line with major organisational change.</p>	Thank you for confirming that regular, scheduled reviews of the Records Management Plan continue. It is also good to see NMS participating in the PUR process.
	N/A	N/A	N/A	The Board of Trustees	NMS adheres to the Information	The Assessment Team is grateful

14. Shared Information				<p>of the National Museums of Scotland state: "National Museums Scotland does not routinely share personal, sensitive or confidential information with third parties as part of its function." (<i>Plan</i> page 25)</p> <p>Update required on any change.</p>	<p>Commissioners Data Sharing Code of Practice.</p> <p>Where appropriate, NMS has signed Data Processing Agreements with external parties to protect and secure personal data that is passed from the Controller to the Processor for processing.</p> <p>The NMS Privacy Notice on the website confirms how we protect users' personal data and privacy and with whom that information is shared.</p> <p>Where we share data for an ad hoc "one off" purpose we use the Data Sharing Form below.</p> <p>Evidence: 14.1. Ad hoc Data Sharing Form</p>	<p>for the confirmation that NMS continues to adhere to the Information Commissioner's Data Sharing Code of Practice, that Data Processing Agreements are in use where appropriate, and that the website contains a Privacy Notice. The receipt of the Ad Hoc Data Sharing Request Form, provided as part of the submission, is also noted with thanks. See also Element 9.</p> <p>While responsible data sharing is part of NMS' business-as-usual operations, the Assessment Team acknowledges that NMS 'does not routinely share personal, sensitive or confidential information with third parties <i>as part of its function</i>'. This Element remains 'not relevant' to NMS at this time.</p> <p>An update would be required on any future change to this status.</p>
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7. The Public Records (Scotland) Act Assessment Team's Summary

Version

The progress update submission which has been assessed is the one received by the Assessment Team on 30th May 2023. The progress update was submitted by Dawn Lindsay, Information & Knowledge Manager.

The progress update submission makes it clear that it is a submission for **Board of Trustees of the National Museums of Scotland**.

The Assessment Team has reviewed Board of Trustees of the National Museums of Scotland's Progress Update submission and agrees that the proper record management arrangements outlined by the various elements in the authority's plan continue to be properly considered. The Assessment Team commends this authority's efforts to keep its Records Management Plan under review.

General Comments

Board of Trustees of the National Museums of Scotland continues to take its records management obligations seriously and is working to bring all elements into full compliance.

Section 5(2) of the Public Records (Scotland) Act 2011 provides the Keeper of the Records of Scotland (the Keeper) with authority to revisit an agreed plan only after five years has elapsed since the date of agreement. Section 5(6) allows authorities to revise their agreed plan at any time and resubmit this for the Keeper's agreement. The Act does not require authorities to provide regular updates against progress. The Keeper, however, encourages such updates.

The Keeper cannot change the status of elements formally agreed under a voluntary submission, but he can use such submissions to indicate how he might now regard this status should the authority choose to resubmit its plan under section (5)(6) of the Act.

8. The Public Records (Scotland) Act Assessment Team's Evaluation

Based on the progress update assessment the Assessment Team considers that Board of Trustees of the National Museums of Scotland continue to take their statutory obligations seriously and are working hard to bring all the elements of their records management arrangements into full compliance with the Act and fulfil the Keeper's expectations.

The Assessment Team recommends authorities consider publishing PUR assessment reports on their websites as an example of continued good practice both within individual authorities and across the sector.

This report follows the Public Records (Scotland) Act Assessment Team's review carried out by



Iida Saarinen
Public Records Officer