

The Public Records (Scotland) Act 2011

Scottish Social Services Council

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

20th June 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 the Scottish Social Services Council. The outcome of the assessment and relevant feedback can be found under sections 6 – 8.

4. Authority Background

The Scottish Social Services Council (SSSC) is responsible for registering people who work in social services and regulating their education and training.

The Regulation of Care (Scotland) Act 2001 established the SSSC. Their responsibilities set out in the Act are:

- To set up and maintain Registers of key groups of social service workers
- To publish Codes of Practice for all social service workers and their employers
- To regulate the education and training of the workforce
- To promote education and training
- To undertake the functions of the sector skills council; Skills for Care and Development (SfCD), this includes workforce planning and development.

<http://www.sssc.uk.com/>

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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Progress Update Review (PUR) Template: Scottish Social Services Council

Element	Status of elements under agreed Plan 13OCT14	Progress review status 22MAR22	Progress review status 20JUN23	Keeper's Report Comments on Authority's Plan 13OCT14	Self-assessment Update 28JAN22	Progress Review Comment 22MAR22	Self-assessment Update as submitted by the Authority since 22MAR22	Progress Review Comment 20JUN23
1. Senior Officer	G	G	G	Update required on any change.	Since our last progress update review was submitted the role holder has changed. See updated letter 01-01 as evidence.	The Keeper's Assessment Team note this update, and the accompanying evidence provided, with thanks.	No update required.	Thank you for letting the Assessment Team know that there have been no changes to this Element. Update required on any change.
2. Records Manager	G	G	G	Update required on any change.	No updated required.	Noted with thanks. Update required on any future change.	No update required.	Update required on any change.
3. Policy	G	G	G	The Keeper would welcome updates following the planned review of the <i>Records Management Policy</i> in 2017	The SSSC's Records Management Policy has now been reviewed and was approved by Council on 26 August 2021. A copy of this policy was submitted to National Records Scotland on 16 September 2021.	The Assessment Team thank the authority for the update regarding their Records Management Policy. The Team welcome news that the Policy has been reviewed and is now approved. As a result, the Element status returns to Green.	No update required.	Update required on any change.
4. Business Classification	A	A	G	<p>SSSC have a full <i>Business Classification Scheme</i> (BCS) although they are still in the process of ensuring staff map the folders on the shared drive to that scheme. This will be aided by the planned roll-out of an EDRM and a corresponding review of the Scheme in 2014-15. The Keeper commends these efforts to implement a fully functioning BCS and would like updates on the progress of this work and the results of the review of the Scheme.</p> <p>Alongside the roll-out of an EDRM the authority's <i>Records Management Strategy and Plan</i> identifies the creation of an Information Asset Register. This is to be commended. The Keeper notes that he is to be provided with a copy of this register when available.</p> <p>The Keeper agrees this element of the Scottish Social Services Council's RMP on 'improvement model' terms. This means that he is convinced of the authority's commitment to implement the BCS fully over time, but would request that he is updated as this project progresses.</p>	<p>SharePoint migration is now complete. 95% of our records have been migrated over to SharePoint. A small number of files will remain on our file server for operational reasons. Training sessions were held with staff prior to the data migration to SharePoint, and training guidance and materials are available to all staff via a dedicated SharePoint site. See 04-01 as evidence.</p> <p>We are in the process of updating our Information Asset Register. While this is not complete at the moment, we will be in a position to submit as evidence during the next PUR process.</p>	<p>Update noted with thanks. The Team commend SSSC on completing their SharePoint migration.</p> <p>It is positive to hear that the authority provided staff training in preparation for the implementation of SharePoint, and that staff continue to be supported through the availability of guidance and materials relating to SharePoint. Evidence on this point received with thanks.</p> <p>The Team look forward to more information in future PURs regarding the update to the IAR once completed by the authority.</p> <p>The Element remains Amber while progress, including the establishment of SharePoint as the authority's records management solution, continues.</p>	<p>SharePoint migration is now complete and work on the application of automatic deletion polices is now due to commence in March 2023, as noted in element 6 update below.</p> <p>We have now updated our Information Asset Register, and we have expanded it to include further details about the assets and the measures in place to protect them, as well as a detailed overview of the personal data within assets, and how we process this data. See evidence 04-01.</p>	<p>Element 4 stipulates that Records should be known and identified within a structure, ideally founded on function. The Keeper expects an authority to have properly considered business classification mechanisms and its RMP should therefore reflect the functions of the authority by means of a business classification scheme, information asset register or similar.</p> <p>The Assessment Team would like to thank SSSC for this update. It is great to hear that the next steps, such as application of automatic deletion policies, are underway.</p> <p>Thank you also for confirming that the IAR has been updated, and that these have</p>

								<p>been appropriately labelled when business-critical, or containing sensitive data. A copy of IAR has been received with thanks.</p> <p>It is clear, that SSSC has reached significant benchmarks in this long process of establishing SharePoint as their records management solution. While work on the automated retention is still in progress (see Element 6), the Information Asset Register can be used to record business classification information. It sounds like SSSC now has a Business Classification structure in place.</p> <p>This PUR Element has been changed from Amber to Green to celebrate this progress. If this was a formal resubmission, the RMP would likely be classed as Green.</p>
5. Retention Schedule	G	G	G	<p>The monitoring of the application of the <i>Retention Schedule</i> is specifically mentioned in the Strategic Objectives section of the submitted Strategy/RMP document. The Keeper would welcome updates concerning this monitoring and would like to be informed if retention decisions have been affected by the implementation of an EDM.</p>	<p>No update required – our retention schedule will be comprehensively considered in 2021/22 as evidenced previously. This piece of work is scheduled to begin in March 2022.</p>	<p>Noted with thanks. Update required on any future change.</p>	<p>We have now completed a comprehensive review of our retention schedule. Our Executive Management Team approved the new Schedule on 21 December 2022. Please see 05-01 as evidence.</p>	<p>This is welcome news, and SSSC should be commended on this comprehensive review. This shows commitment to making sure the schedule remains fit for purpose. The copy of this has been received with many thanks.</p>
6. Destruction Arrangements	G	A	A	<p>The Keeper would be interested to learn how the implementation of an EDM has assisted in prompting record destruction.</p> <p>The Keeper understands that SSSC is currently reviewing the destruction of back-up tapes. To some extent this must remain a business decision for the Council. He accepts that there may be particular issues in any authority that must be addressed by that authority. The Keeper looks forward to seeing the results of the Council's review when they are available.</p>	<p>Work on automatic retention policies in SharePoint is due to commence. Please see screenshot of Records Management Plan 06-01 as evidence.</p>	<p>The Team thank the authority for provision of SSSC's Records Management Project Plan to accompany this update.</p> <p>News that work on automatic retention policies in SharePoint is due to start is welcomed by the Team. In time, this will strengthen the systematic and controlled destruction of electronic records. However, the authority will be aware that this functionality will take some time to "bed-in" and become fully operational. The Element remains at Amber while progress continues.</p>	<p>Work on the application of automatic deletion policies is now due to commence in March 2023. We revised the timescale given in our records management project plan, which we submitted during our last PUR submission, due to slippage in our timeframe to review and have our retention schedule approved. We plan to apply these policies to the Legal and Corporate Governance team before agreeing a schedule for roll</p>	<p>Thank you for this update. It is clear that the work on the automatic deletion policies is now ongoing, and that these will be made operational in the foreseeable future on a rolling basis.</p> <p>This Element will remain at Amber as work continues. The Assessment Team looks forward to being updated on progress in subsequent PURs.</p>

							out across other departments.	
7. Archiving and Transfer	G	G	G	<p>SSSC are currently in contact with the Client Management Team at National Records of Scotland (NRS) with the aim of developing a Memorandum of Understanding (MoU) to enable the transfer of records selected for permanent preservation from SSSC to NRS. This is confirmed by the Keeper's Client Managers.</p> <p>The SSSC have agreed that, once the MoU has been agreed, the Keeper will be sent a copy for inclusion in SSSC's evidence package.</p>	No Update required.	Noted with thanks, update required on any future change.	We have an MOU in place with NRS. The MOU was agreed and signed off in December 2014. We reported this and attached the MOU as evidence in our PUR submission in 2020.	<p>It is good to hear that an MoU continues to be in place with NRS.</p> <p>Update required on any change.</p>
8. Information Security	G	G	G	<p>Update required on any change.</p>	<p>We have a new approved IT security policy. See 08-01 submitted as evidence.</p> <p>Our ICT team have developed a Digital Asset Acquisition/Development procedure which was approved 13 January 2021. See 08-02 submitted as evidence. (Please note that there is an error in the procedures review date, and it should read 13 January 2022, not 13 January 2021). The procedure has now been reviewed and no changes were made, therefore no further approval was required.</p> <p>Policies are built into the SharePoint system to control unauthorised access, destruction and alteration of records, for example version control, auditing, 90 day restore period and access is controlled by permissions. There are also alerts built into office 365 that sends an alert to the ICT team if someone tries to delete files on mass. Multi-factor authentication is also in place to help prevent unauthorised access to data. Anomaly detection is used to detect potential unauthorised access ie multiple logins in quick succession, access from foreign countries etc.</p> <p>We reviewed and updated our local data security procedures which support these polices in 2021. See evidence submitted as 08-03 through to 08-14. These are the procedures for each Team.</p>	<p>The Assessment Team thank the authority for the positive and detailed update regarding Information Security.</p> <p>The Team thank SSSC for sight of the newly approved IT Security Policy.</p> <p>The authority now have a Digital Asset Acquisition/Development procedure approved and in place and this is commended by the Team. Accompanying evidence received with thanks.</p> <p>SSSC have indicated in their update how SharePoint's inbuilt policies, security alerts, and anomaly detection will improve various facets of information security across the organisation. These changes will streamline and enhance the authority's information security processes overall.</p> <p>The Assessment Team commend the SSSC's recent review and update to their local data security procedures in light of the migration to SharePoint, and thank the authority for providing the relevant procedural documents for each Team.</p> <p>The Assessment Team commend SSSC's clear commitment to their RM responsibilities under Element 8. The authority are working hard to maintain compliance and to meet the Keeper's expectations.</p>	<p>We keep our data security procedures under review and update these where required following recommendations made for data breaches.</p> <p>Please see update provided for Element 10 regarding our Cyber Response Plan and incident management.</p>	<p>Thank you for this update which has been noted. Update required on any future change.</p>

9. Data Protection	G	G	G	Update required on any change.	<p>Our Data Protection Policy was reviewed and approved by Council in November 2021. The updated policy now contains updated roles and a named SIRO. Please see 09-01 submitted as evidence. This policy is also available along with our up to date privacy notice on our website, which can be accessed at this link.</p> <p>A Data Protection Audit is due to commence in March 2022, by our appointed Internal Auditors. We will be in a position to provide an update on the result of that audit during the next PUR process.</p>	<p>The Assessment Team welcome the update regarding the approval of SSSC's Data Protection Policy, and note the accompanying evidence with thanks.</p> <p>The Team are pleased to hear that the authority plan to carry out an internal audit of their Data Protection provisions, and look forward to being updated on this in future PURs.</p>	<p>Our Data Protection Audit is complete, and the final audit report was issued on 13 April 2022. We received a 'Good – system meets control objectives' rating, with no formal recommendations and two areas identified for improvement, which management accepted. Please see final report at 09-01 as evidence. The first improvement was creation of a Privacy Notice Register. This is now complete. Please see evidence 09-02 as evidence. The second improvement was to undertake a review of HR records to ensure that records no longer required are disposed of securely and that consideration be given to the use of the data retention features within the HR system. Our HR team are in the process of consolidating staff records and now that our retention schedule has been approved, this work will be finalised.</p>	<p>Thank you for sharing the results of the Data Protection Audit with the Assessment Team; a copy of the report has been received with thanks. It is great to see that the recommendations are resulting in action, and that one of these recommendations has already been completed.- This is very commendable.</p> <p>Update required on any future change.</p>
10. Business Continuity and Vital Records	G	G	G	<p>The review of the <i>Business Classification Scheme</i> as part of the implementation of an EDRM will offer SSSC an opportunity to identify vital records. The Keeper commends this decision and welcomes any updates.</p>	<p>A Cyber Incident Response Plan has been developed by our ICT team. This plan is still in draft format. While this is not complete at the moment, we will be in a position to submit as evidence during the next PUR process.</p> <p>Our Strategy and Performance Directorate have planned activity in 2022/23 to provide the SSSC with a robust business continuity management system by coordinating business continuity planning, exercising and response. Please see screenshot of business plan at 10-01 as evidence. We will provide an update during the next PUR process.</p>	<p>The authority indicate that a Cyber Incident Response plan has been developed and is currently in draft. The Assessment Team commend this undertaking and look forward to receiving further information once the Plan is approved in future PURs. The Team welcome news that SSSC have made arrangements to start work on a business continuity management system. The Team acknowledge receipt of the business plan screenshot with thanks, and look forward to an update on this project in subsequent PURs.</p>	<p>Work on our Cyber Response Plan is ongoing, and we aim to have this finalised and approved by our EMT by the end of this financial year. We will send a copy of this plan to the NRS once approved. Work on the Business Continuity Management System (BCMS) is ongoing. Since our last submission, Council approved the Business Continuity Policy, and EMT approved the Business Continuity Planning Procedure. Please see evidence 10-01 and 10-02.</p> <p>A new approach to incident management is currently being finalised and documented before submission to EMT for</p>	<p>An authority's business continuity arrangements should include the recovery of records made temporarily unavailable due to an unexpected event.</p> <p>Thank you for confirming that the work on SSSC Cyber Response Plan is ongoing. It is great to hear that work on the Business Continuity Management System is also ongoing, and that the Business Continuity Policy and the Business Continuity Planning Procedure (both documents received with thanks) have been approved.</p> <p>Thank you also for sharing your future plans regarding the standardisation of the</p>

							approval. This plan and the Cyber Incident Response Plan will complement and align with each other. We will continue to develop the remaining elements of the BCMS, which will include some testing of plans and the training or raising awareness of staff. We will provide an update during the next PUR process.	approach to incident management through parallel policy reviews and consolidation with the Business Continuity Management System. This sounds very positive, and will hopefully assist in SSSC's overall preparedness for unexpected events.
11. Audit Trail	G	G	G	<p>The audit trail element of the RMP is likely to change when the EDRM is fully implemented. The introduction of the EDRM should assist with document tracking. The SSSC have agreed to update the Keeper as the project progresses.</p> <p>The Keeper is satisfied that SSSC are taking steps to improve consistency in naming conventions and would welcome updates on this project.</p>	<p>Our records have now been migrated over to SharePoint which makes version control more robust. Staff are still expected to follow the naming conventions that have been sent previously as evidence, however we have unfortunately been unable to continue with audits at this time. This is due to the Information Governance Coordinators role (records manager) being widened in scope and responsibility, but additional resources are now available. We are currently in the process of refining the naming conventions and creating bespoke and simplified versions for each department and will resume audits upon completion of these conventions. Please see point 3 of Records Management Plan 06-01 for evidence of planned work on naming conventions.</p>	<p>The Assessment Team agree that SharePoint will make version control more robust. It is positive to hear that SSSC are currently doing work surrounding naming conventions and that the authority are committed to keeping staff informed on this matter as evidenced in the document provided. This is vital in ensuring all records can be properly traced and identified within the structure of SharePoint.</p> <p>The Assessment Team note that SSSC have had to halt audits. The Team recognise authorities will face pressures on resources at various times, and look forward to updates regarding the planned recommencement of these audits in future PURs.</p>	<p>We have now refined our naming conventions and created bespoke and simplified versions for each department. Please see evidence 11-01-11-09.</p>	<p>Thank you for letting us know of this recent work on refining and simplifying naming conventions, specific to each department. Accompanied with relevant training and publicity, this is a welcome development. Many thanks also for providing The Assessment Team with copies of these departmental Naming Convention documents.</p> <p>Update required on any future change.</p>
12. Competency Framework	G	G	G	<p>The theme of implementing specific staff training in recordkeeping and disaster recovery alongside efforts to instil a culture of good records management across the authority is a particularly strong element of the RMP and is highly commended by the Keeper. He would like to hear about the new training being offered and its impact on bringing about this cultural change.</p>	<p>The Information Governance Coordinator completed training on Microsoft 365 and SharePoint records management on 21 October 2021. Please see completion certificate 12-01 as evidence.</p>	<p>Update and evidence noted with thanks. The Assessment Team commend the Information Governance Coordinator on their completion of M365 and SharePoint training.</p>	<p>Our Business Support Assistant for the Legal and Corporate Governance team, who works with the Information Governance Coordinator/Records Manager, completed records management training on 7 November 2022. Please see 12-01 as evidence.</p> <p>Whilst our Information Governance Coordinator has not completed further training this year, they are signed up to complete their GDPR Practitioners Certificate in February 2023.</p>	<p>The Assessment Team is grateful for this update on records management training provision within SSSC. It is great to see that essential records management training is completed by support staff as well; The copy of e-learning completion certificate has been received with thanks. It is also very positive to hear of the GDPR qualification of the acting records manager (IG Coordinator).</p> <p>Update required on any future change.</p>

13. Assessment and Review	G	G	G	SSSC has committed to reviewing key documents and policies, including the RMP and <i>Records Management Policy</i> , and undertaking audits to ensure staff are following guidance surrounding matters such as naming conventions. The Keeper applauds this commitment to regular review and would welcome updates and reports following these reviews.	Please see updates provided at elements 3, 8, 9 and 11.	Noted with thanks. SSSC clearly take their RM responsibilities relating to Element 13 seriously. The authority have taken steps to ensure that their RM policies and procedures are updated regularly and kept under review. Engagement with the PUR process is also commendable.	Please see updates provided at elements 4, 5, 9 and 11.	Thank you for the update on regular RMP and relevant policy reviews reported under Elements 4, 5, 9 and 11; these have been noted with thanks. The commitment to inform the Assessment Team on progress in the next PUR on several Elements is also very positive. Update required on any future change.
14. Shared Information	A	G	G	SSSC have committed as part of their <i>Records Management Strategy and Plan</i> to develop and implement standard sharing protocols and agreements. The SSSC have committed to supply these updated protocols and agreements when available in order to keep the SSSC file up-to-date. The Keeper can agree this element on 'improvement model' terms. This means that the authority has recognised a gap in its provisions and the Keeper is convinced of a commitment to close that gap.	A standard information sharing agreement template has now been developed. Please see template 14-01 as evidence. Please also see samples of data sharing agreements at 14-02 and 14-03 as evidence that all information governance issues are addressed in data sharing agreements. However, the samples provided are based on the sharing partner bodies templates.	Update noted with thanks. The Assessment Team thank the authority for sight of the standard information sharing agreement template and the accompanying provision of sample data sharing agreements. The authority is commended for their ongoing commitment to their RM responsibilities under Element 14.	No update required.	Update required on any change.

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 27th January 2023. The progress update was submitted by Caroline Gowans, Information Governance Coordinator.

The progress update submission makes it clear that it is a submission for the **Scottish Social Services Council**.

The Assessment Team has reviewed the Scottish Social Services Council'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

The Scottish Social Services Council 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 the Scottish Social Services Council 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