

Public Records (Scotland) Act 2011

NHS Lanarkshire Assessment Report

The Keeper of the Records of Scotland

16 May 2016

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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 Lanarkshire** by the Public Records (Scotland) Act 2011 Assessment Team following its submission to the Keeper on 5th February 2015.

The assessment considered whether the RMP of NHS Lanarkshire 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 Lanarkshire complies with the Act can be found under section 7 of this report with relevant recommendations.

3. Authority Background

NHS Lanarkshire provides a wide range of healthcare services through numerous locations. There are three district general hospitals in the area - Hairmyres, Monklands and Wishaw General Hospital. Each of these hospitals has an accident and emergency (A&E) department and provides a range of specialist medical and surgical services. Maternity services are based at Wishaw General Hospital. Primary health care is provided in the community and includes general practitioners (GPs), dentists, pharmacists, health visitors and a wide range of health professionals. NHS Lanarkshire's primary care facilities include health centres and community and day hospitals.

NHS Lanarkshire employs approximately 12,000 staff.

<http://www.nhslanarkshire.org.uk/Pages/default.aspx>

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 NHS Lanarkshire’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 that he is 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 Keeper may choose to return the RMP on this basis.
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NHS Lanarkshire

5. Model Plan Elements: Checklist

Element	Present	Evidence	Notes
1. Senior Officer <i>Compulsory element</i>	G	G	<p>NHS Lanarkshire have identified Dr Harpreet Kohli, Director of Public Health, as the individual with overall responsibility for Records Management in the authority.</p> <p>This appointment is confirmed by a covering letter from Ian Ross, Chief Executive Officer of NHS Lanarkshire (at time of RMP creation) dated 25th November 2014 submitted as evidence 1.0.</p> <p>Dr Kohli is an executive member of the NHS Lanarkshire Board. He was appointed to establish a records management project team by the Corporate Management Team (CMT) with a specific remit around the PRSA submission. This is confirmed in the text of evidence 3.4.</p> <p>The Keeper agrees that NHS Lanarkshire has identified an appropriate individual to this role as required by the Act.</p>
2. Records Manager <i>Compulsory element</i>	G	G	<p>NHS Lanarkshire has 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.</p> <p>NHS Lanarkshire has identified John Duncan, Head of Health records and Neil</p>

			<p>Agnew, Corporate Affairs Manager as the individuals with day-to-day responsibility for implementing the RMP.</p> <p>This appointment is confirmed by a covering letter from Ian Ross, Chief Executive Officer of NHS Lanarkshire (at time of RMP creation) dated 25th November 2014 submitted as evidence 1.0.</p> <p>The Keeper agrees that NHS Lanarkshire has identified appropriate individuals to this role as required by the Act.</p>
<p>3. Policy <i>Compulsory element</i></p>	<p>G</p>	<p>G</p>	<p>NHS Lanarkshire has submitted two policies in this element. The Keeper has agreed that this is acceptable in this particular sector due to the clinical/corporate structure of territorial health boards.</p> <p>NHS Lanarkshire has submitted their <i>Health Records Management Policy</i>. This has been supplied to the Keeper as evidence 3.1. This is version 2.4 agreed by the Health and Clinical Governance Committee in 2011 and due for review in 2016.</p> <p>This policy is available on the NHS Lanarkshire website: http://www.nhslanarkshire.org.uk/About/policies/Documents/Health-records-policy.pdf</p> <p>The <i>Health Records Management Policy</i> has sections on records retention and destruction; review (Quality Improvement) and training. It emphasises the importance of confidentiality in section 4 (see element 9).</p> <p>NHS Lanarkshire has submitted their <i>Administrative Records Management Policy</i>. This has been supplied to the Keeper. This is version 2 ratified by the Information Governance Committee (see under General Comments below) in 2014.</p>

			<p>These policies are highlighted to staff on their Intranet (FirstPort) and feature in the provided communication plan (evidence 3.5). The Keeper commends this method of communicating changes to staff.</p> <p>According to pages 3 and 4 of the <i>Administrative Records Management Policy</i>, responsibility for producing and implementing an effective administrative records management policy lies with the Chief Executive. General managers, clinical leads, service managers and senior nurses are responsible for ensuring their staff understand the policy.</p> <p>The <i>Administrative Records Management Policy</i> has sections on records retention and destruction; review (Audit) and training. It emphasises the importance of confidentiality (see element 9). It states on page 5 that “Security and Confidentiality applies to non-medical records” this is an important recognition for NHS Boards.</p> <p>This policy mentions in section 12 the records governance risk involved in vacating premises and in critical incidents such as a fire.</p> <p>The <i>Administrative Records Management Policy</i> refers to NHS Scotland Information Governance Standards: http://www.isdscotland.org/About-ISD/Confidentiality/</p> <p>The submitted policies have been approved by the Information Assurance Committee (see under General Comments below) and compliance will be reviewed by NHS Lanarkshire Internal Audit.</p> <p>Staff have access to the <i>Records Management Policies</i> through a ‘staff communication plan’ supplied as evidence 3.5.</p> <p>The RMP states “As NHSL moves to a greater reliance on electronic records we will ensure that arrangements are in place to permanently delete records from systems.</p>
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			<p>These will be embedded within the <i>Health and Administrative Records Policies.</i>” NHS Lanarkshire are due to review these policies in December 2015 and commit to update the Keeper with any changes.</p> <p>The Keeper agrees that NHS Lanarkshire has approved and operational records management policies, that are available to relevant staff.</p>
<p>4. Business Classification</p>	<p>A</p>	<p>G</p>	<p>NHS Lanarkshire has a wide ranging <i>Business Classification Scheme</i> which has been supplied to the Keeper as evidence 4.0. This is a high level structure with separate business areas populating it locally.</p> <p>There is a commitment in the RMP that it will be “developed and maintained in partnership with each business unit”. The Keeper commends this principle as likely to lead to a stronger business tool.</p> <p>However, the RMP seems to indicate that the <i>Business Classification Scheme</i> is not yet complete. It refers, under element 10, to ‘records that are outwith the Business Classification’. These records are held on ‘R’ drives. There is a commitment in the RMP’s Action Plan section to develop the <i>Business Continuity Scheme</i> and the <i>Information Asset Register</i> and to develop standard operating practices for the maintenance of R drives. NHS Lanarkshire have committed to provide updates to the Keeper when available.</p> <p>The <i>Administrative Records Management Policy (see element 3)</i> states under 5.1.2 “Records are kept in a structured filing system ensuring information is easily accessible and retrievable.”</p> <p>NHS Lanarkshire has also developed an <i>Information Asset Register</i> (evidence 4.1). This is a demand of the <i>Information Security Policy (see element 8) (Policy page 8)</i>.</p>

			<p>The Keeper agrees this element under ‘Improvement Model’ terms. This means that he is convinced that having identified a gap in provision NHS Lanarkshire has committed to a series of actions to close that gap. The Keeper agrees this element on condition that he is kept informed as these projects progress.</p>
<p>5. Retention schedule</p>	<p>G</p>	<p>G</p>	<p>NHS Lanarkshire has supplied separate retention and disposal schedules as part of the separate <i>Records Management Policies (see element 3)</i> covering all the record types created by the authority, including health and corporate records.</p> <p>NHS Lanarkshire have provided a screen shot of a sample retention schedule page from the FirstPort site as evidence.</p> <p>All NHS Lanarkshire’s Health Records are retained and destroyed in accordance with the recommendations of the Scottish Government Records Management NHS Code of Practice (Scotland) and NHS Lanarkshire’s Health Records Policy. Staff have access to these retention decision through their ‘FirstPort’ Intranet site.</p> <p>Evidence of how the retention schedule informs the destruction procedures has been provided as evidence 5.0.</p> <p>There is a review of e-mail ongoing. This will include e-mail retention.</p> <p>Both the <i>Health Records Management Policy</i> and the <i>Administrative Records Management Policy</i> have a section on records retention.</p> <p>The Keeper agrees that NHS Lanarkshire has approved and operation retention schedules that reflect the business activities of the authority.</p>

<p>6. Destruction Arrangements <i>Compulsory element</i></p>	<p>A</p>	<p>G</p>	<p>NHS Lanarkshire state in the RMP (element 6):</p> <p>“The Board has procedures for managing the confidential destruction of expired records in all formats, in a way that is auditable and irreversible.”</p> <p>However, it is not clear that procedures are currently <u>operational</u> regarding the auditable and irretrievable destruction of electronic records (see below).</p> <p><u>Paper:</u> Paper records are destroyed under contract with a third party shredding company. A contract, proving that these arrangements are operational, has been supplied as evidence 5.0. NHS Lanarkshire uses a third party storage company and accepts that arrangements for destruction of paper records held in these out-stores should be formalised by contract. They state:</p> <p>“If users of 3rd party storage contractors have complied with the appropriate Records Management Policies these arrangements should be in place. We acknowledge that there is some further work required by NHSL to ensure that this is actually the case and the following actions have been added to the RMP.</p> <p>Request that senior operational managers undertake a review of all uses of 3rd party storage provision and that there is an agreed contract to comply with NHSL Records Management Policies and retention schedules.</p> <p>Consider implementing a policy\procedure that seeks senior management approval to the use of 3rd party storage.”</p> <p><u>Back-ups:</u> “All records and data held on NHS Lanarkshire networks are subject to regular back-up and associated recovery procedures” (quote from RMP under element 10). An explanation has been provided to the Keeper regarding the ‘purging’ of data backed up as part of NHS Lanarkshire’s business continuity</p>
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			<p>arrangements: “All backup data is expired in the backup software database...according to an agreed schedule.” This has been sent as evidence 6.2.</p> <p>Hardware: It is the responsibility of the IM&T Department (in conjunction with Data Owners in service areas) to ensure that “All information is securely removed and appropriately destroyed before equipment is re-allocated or sent for secure disposal/destruction” (<i>Information Security Policy</i> page 7 see element 8). NHS Lanarkshire destroys electronic media using a contract with a third party. The contract, proving that these arrangements are in place, has been provided to the Keeper as evidence 6.1</p> <p>Electronic: The RMP states “As NHSL moves to a greater reliance on electronic records we will ensure that arrangements are in place to permanently delete records from systems. These will be embedded within the Health and Administrative Records Policies.” The Keeper acknowledges this commitment.</p> <p>Currently there is a review of e-mail ongoing. This will include e-mail retention.</p> <p>Evidence of how the retention schedule informs the destruction procedures has been provided as evidence 5.0.</p> <p>The <i>Administrative Records Management Policy</i> (see element 3) demands that a record is kept of destroyed documents (at 9.1.1). Paper records should be destroyed by an approved contractor (see above) and a register kept of records destroyed (<i>Policy</i> 9.1.7). The Keeper commends this principle. The record of destroyed records is to be kept by the relevant business area manager which in NHSL management structure is the delegated operational manager</p> <p>Upon the renewal of contracts a Data Processing Agreement will be signed between</p>
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			<p>NHS Lanarkshire and third party contractors. This will set up standards for certifying destruction while simultaneously creating metadata about documents destroyed.</p> <p>The <i>Administrative Records Management Policy</i> has a section on records destruction. It states at 5.3.5: “It is [...] vital that staff always suitably dispose of records as soon as possible (subject to local and national retention requirements)”. Staff have access to these retention decision through their ‘FirstPort’ Intranet site. At 6.2.12 the <i>Policy</i> states “All confidential documentation which has to be destroyed should be managed in accordance with local confidential waste disposal procedures.” NHS Lanarkshire state: “Local confidential waste disposal procedures will vary from Department to Department. NHSL recognise that further work is required and that the element will be approved under an improvement model.”</p> <p>At the moment, the Keeper can only agree this element under ‘Improvement Model’ terms: That NHS Lanarkshire has identified a gap in provision (electronic record destruction procedures and tightening up on written procedures with third party providers) and has committed to a series of actions to close that gap. The Keeper agrees this element on condition that he is kept informed as these projects progress.</p>
<p>7. Archiving and Transfer <i>Compulsory element</i></p>	<p>G</p>	<p>G</p>	<p>NHS Lanarkshire has a memorandum of understanding with North Lanarkshire Council Archives (in fact their ALEO, CultureNL). A copy of this agreement has been provided to the Keeper.</p> <p>This MOU considers Transfer, storage and access arrangements.</p> <p>The Keeper agrees that NHS Lanarkshire has identified an appropriate archive repository for records of enduring value and has arrangements in place for the secure transfer of records to that repository.</p>

<p>8. Information Security <i>Compulsory element</i></p>	<p>G</p>	<p>G</p>	<p>NHS Lanarkshire has an <i>Information Security Policy</i> which has been provided to the Keeper as evidence 8.0. This is version 2.4 written by Alan Ashforth, NHS Lanarkshire’s E-Health IT Manager and approved by the Information Assurance Committee (see under General Comments below) in September 2010 and reviewed with some changes in 2014.</p> <p>The <i>Policy</i> is consistent with NHS Scotland’s <i>Security Policy and Standards</i>: www.ehealth.scot.nhs.uk/wp.../standard-security-policy-and-standards.doc and ISO/IEC27002 Information Security Standards.</p> <p>The <i>Policy</i> states on page 5 “From an information security perspective, appropriate protection should be applied to all forms of information stored including paper-based information, computer databases, portable and fixed IT media and any other methods used to communicate information.”</p> <p>It is supported by a suite of policies, such as the <i>IT Policy</i>, <i>NHS Scotland Information Assurance Strategy</i> and <i>NHSiS minimum Requirements for IT Security</i>. Security classification is applied to documents as explained in the <i>Administrative Records Management Policy</i> (page 7 and 8) (see element 3).</p> <p>NHS Lanarkshire carries out Privacy Impact Assessments and a sample has been provided the Keeper as evidence 5.1. Data protection (see element 9) is specifically referred to in the <i>Information Security Policy</i> (for example evidence 8.0 page 6).</p> <p>NHS Lanarkshire commit to following <i>NHS Scotland Information Assurance Strategy</i>.</p> <p>The <i>Policy</i> states on page 6 “Information Security will be promoted at all levels of the business through comprehensive user awareness education and training.” Staff are trained on information procedures using a Learnpro training module “Secure</p>
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			<p>Information Handling”. This training is compulsory. The <i>Information Security Policy</i> is highlighted to staff on their Intranet (FirstPort) and features in the provided communication plan (evidence 3.5).</p> <p>Major systems are password protected to control access (<i>Administrative Records Management Policy</i> 6.2.2). Only those with relevant level of responsibility can access a record on these systems (6.2.3). Data ‘owners’ in service areas are responsible for preparing a register of their approved system users (<i>Information Security Policy</i> page 8). User access is regularly audited for security purposes (<i>Administrative Records Management Policy</i> 6.2.7).</p> <p>The <i>Information Security Policy</i> has a scheduled review date of September 2017.</p> <p>Although it is a responsibility of the IT Security Manager to ensure information security policies are embedded in the Board, information security is, as a final step, the responsibility of the Chief Executive (evidence 8.0 page 6).</p> <p>The Keeper agrees that NHS Lanarkshire has an approved and operational information security policy as required by the Act and that this policy is available for appropriate staff.</p>
<p>9. Data Protection</p>	<p>G</p>	<p>G</p>	<p>NHS Lanarkshire has an <i>Data Protection Policy</i> which has been provided to the Keeper as evidence 9.0</p> <p>NHS Lanarkshire is registered with the Information Commissioner at Z8528515.</p> <p>NHS Lanarkshire has committed to establishing a Subject Access Request link on the NHSL website.</p> <p>The Keeper has been provided with a hierarchy showing where the Data protection</p>

			<p>Officer sits in the Corporate Structure.</p> <p>Staff have confidentiality risks, including data protection, explained at induction and sign a confidentiality form (<i>Administrative Records Management Policy</i> 6.2.1). The <i>Administrative Records Management Policy</i> states at 6.2.9 “No person identifiable information should be transmitted externally via e-mail unless approved encryption procedures are in place.” In response to principle 5 the <i>Policy</i> states (at 9.1.6) “all records will be subject to regular review to ensure that they remain appropriate for retention.”</p> <p>NHS Lanarkshire complies with CEL 25 Safeguarding the Confidentiality of Personal Data Processed by Third Party Contractors.</p> <p>The authority has sent details of its ‘Fairwarning’ software (operational since 2013). This is designed to restrict inappropriate or casual access to health records.</p> <p>NHS Lanarkshire commit to following <i>NHS Scotland Information Assurance Strategy</i>. Staff are trained on information procedures using a Learnpro training module “Secure Information Handling”. This training is compulsory.</p> <p>In the RMP NHS Lanarkshire specifically commit to sharing information line with the Data Protection Act 1998.</p> <p>Both the <i>Health Records Management Policy</i> and the <i>Administrative Records Management Policy</i> (see element 3) emphasise the importance of confidentiality. They specifically mentions the Data Protection Act 1998. Data protection is also specifically referred to in the <i>Information Security Policy</i> (see element 8) (for example evidence 8.0 page 6).</p> <p>The <i>Data Protection Policy</i> has a scheduled review date of September 2017.</p>
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			<p>The Keeper agrees that NHS Lanarkshire properly considers its responsibilities under the Data Protection Act 1998.</p>
<p>10. Business Continuity and Vital Records</p>	<p>G</p>	<p>G</p>	<p>NHS Lanarkshire has business continuity arrangements at corporate, department and site levels. A sample (eHealth) has been provided to the Keeper as evidence 10.0.</p> <p>These plans include arrangements for the recovery of both physical and digital records and data.</p> <p>The <i>Information Security Policy</i> (see element 8) specifically includes recovery as part of its initiatives (evidence 8.0 page 6). It is the responsibility of the IM&T Department to ensure that “Back-up and recovery procedures are in place to assist in contingency arrangements to support business continuity” and that “Back-ups of IT systems are kept in a secure place and procedures are in place to ensure that systems can be recovered in accordance with business needs.” (both <i>Information Security Policy</i> page 7 see element 8).</p> <p>Under element 10 the RMP refers to a ‘Grey Pack’ this has been supplied as evidence 10.</p> <p>The Administrative Records Management Policy (see element 3) mentions in section 12 the records governance risk involved in critical incidents such as a fire.</p> <p>The Keeper agrees that NHS Lanarkshire has an approved and operational business continuity plan that appropriately considers the recovery of records.</p>

<p>11. Audit trail</p>	<p>A</p>	<p>G</p>	<p>NHS Lanarkshire track their clinical records through the systems on which they are kept. Examples of how these systems operate have been given to the Keeper and are stated in the RMP. A planned change in procedure to bring mental health records in line with acute health records is noted by the Keeper.</p> <p>The Keeper also notes that a piece of evidence has not been submitted as the contents are considered too sensitive. The Keeper agrees this. However, he would like to assure NHS Lanarkshire that all documents submitted in evidence are held securely by NRS and access is strictly limited to the PRSA Assessment Team, the Head of Government Records and himself.</p> <p>However, tracking of administrative records is at an early stage. Staff guidance on version control is in development.</p> <p>The Keeper can agree this element under ‘improvement model’ terms. This means that he is convinced that, having identified gaps in provision (including mental health records in the clinical system, version control guidance), NHS Lanarkshire has committed to a series of actions to close that gap. The Keeper agrees this element on condition that he is kept informed as this project progress.</p>
<p>12. Competency Framework for records management staff</p>	<p>G</p>	<p>G</p>	<p>NHS Lanarkshire have provided the job descriptions of both the Head of Health Records and Corporate Affairs Manager (see element 2) these show that both individuals identified as having day-to-day responsibility for implementing the RMP are properly empowered to do so.</p> <p>Staff have confidentiality issues, including data protection explained at induction and sign a confidentiality form (<i>Administrative Records Management Policy 6.2.1</i>).</p> <p>The <i>Information Security Policy</i> (see element 8) states on page 6 “Information</p>

			<p>Security will be promoted at all levels of the business through comprehensive user awareness education and training.” NHS Lanarkshire make ‘secure information management’ training compulsory and have committed to extending records management training: “NHS Lanarkshire recognises the important role of Admin and Clerical staff in the management of records and will include this in their learning and development plan”.</p> <p>There is a commitment in the RMP that NHS Lanarkshire will ensure all staff are aware of their records management responsibilities. There is a further commitment to develop a records management module in Learnpro to match that for secure data handling (see element 8). This commitment is repeated in the Administrative Records Management Policy (section 11).</p> <p>NHS Lanarkshire have committed to keep the Keeper informed of developments after a review in December 2015.</p> <p>According to page 4 of the <i>Administrative Records Management Policy</i> general managers, clinical leads, service managers and senior nurses are responsible for training their staff in administrative records management.</p> <p>Samples of how policies and procedures are communicated to staff, for example using ‘The Pulse’ staff magazine, have been provided (for example 9.2). The <i>Public Records Act Communications Plan</i> has been provided as evidence 3.5. This seems very thorough and is commended by the Keeper. The lead officer on this project is F. O’Dowd is a Communication Officer for NHS Lanarkshire and is a member of the PRSA Project Team and attends the Information Assurance Committee.</p> <p>The <i>Administrative Records Management Policy</i> has a section on training.</p> <p>The Keeper agrees that NHS Lanarkshire have provided evidence that the</p>
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			<p>individuals identified in element 2 have appropriate skills and authority to undertake the role.</p>
<p>13. Assessment and Review</p>	<p>G</p>	<p>G</p>	<p>It is a requirement of the Public Records (Scotland) Act 2011 that “An authority must— (a) keep its records management plan under review” (PRSA Part 1 5.1.a.).</p> <p>There is a review date shown on the cover of the <i>RMP</i>: December 2015. The change record commits NHS Lanarkshire to review thereafter every 3 years. The local review of the RMP is confirmed by CMT minutes supplied as evidence 3.4.</p> <p>This review will be carried out by the records managers identified in element 2 supported by the Information Assurance Committee (see under General Comments below) and by the NHS Lanarkshire Internal Audit, who have Information assurance as part of their remit. An example of the procedures used has been supplied to the Keeper as evidence 13.2; an example of an <i>Internal Audit Report</i> has been provided as 8.2.</p> <p>The <i>Records Management Policies (see element 3)</i> and the <i>Information Security Policy (see element 8)</i> are scheduled for review every three years or sooner. The <i>Information Security Policy</i> has a scheduled review date of September 2017. Reviews will be done by NHS Lanarkshire Internal Audit (see <i>Administrative Records Management Policy</i> section 10.)</p> <p>There is a strong commitment, under Element 4, to continue to develop the <i>Business Classification Scheme</i> and <i>Information Asset Register</i>.</p> <p>NHS Lanarkshire will review the need for a <i>Document Disposal Register</i> in 2015.</p> <p>NHS Lanarkshire have committed to keep the Keeper informed of developments after a review in December 2015.</p>

			<p>Currently there is a review of e-mail ongoing. This will include e-mail retention.</p> <p>There is a commitment in the RMP to review the Business Continuity Plan (see element 10 for the 'Grey Pack'), but no date for this review to be completed.</p> <p>Vital records will appear in the <i>Information Asset Register</i> (see element 4).</p> <p>User access is regularly audited for security purposes (<i>Administrative Records Management Policy 6.2.7</i>).</p> <p>Data sharing agreements are subject to 'continuous review' by partner agencies (RMP under element 14) and a regular audit of the operation of these agreements will be carried out by the NHS Lanarkshire IT Security Manager.</p> <p>The <i>Administrative Records Management Policy</i> has a section on review (Audit).</p> <p>The Keeper agrees that NHS Lanarkshire has put in place procedures to review the RMP as required by the Act.</p>
<p>14. Shared Information</p>	<p>G</p>	<p>G</p>	<p>NHS Lanarkshire has an <i>Information Sharing Protocol</i> which has been provided to the Keeper as evidence 14.1. A sample agreement has been provided as evidence 9.1.</p> <p>The <i>Administrative Records Management Policy</i> mentions under 6.2.10 'safe-haven arrangement'. This is a safe haven fax arrangement where agreed fax numbers are used to fax patient identifiable information. The fax machines are located in secure areas. Although intended for patient information they can be used to fax personal identifiable information.</p>

			<p>See <i>Third Parties</i> under General Comments below</p> <p>The Keeper agrees that both the <i>Protocol</i> and the <i>Data Processing Agreement</i> properly consider the governance of records and that, therefore NHS Lanarkshire have properly considered this element.</p>
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NHS Lanarkshire

General Notes on RMP, Including Concerns:

Version

This assessment is on the *Records Management Plan* dated December 2014 and marked Version 1.0. It is 'owned' by the Head of Health Records/Corporate Affairs Manager (**see element 2**).

The RMP was created by John Duncan, Head of Health Records.

There is a review date shown on the cover of the *RMP* of December 2015.

The introduction to the *RMP* explains the need for robust records management in the authority.

The RMP 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>.

Third Parties

NHS Lanarkshire correctly notes that many of the third party contracts in place are with other Scottish public authorities who are covered by PRSA under the schedule to the Act. However, the RMP also makes clear that third party contractors not so covered, such as private hospitals, are bound by agreements that include the proper provision of records management. A copy of the record keeping standards required by NHS Lanarkshire has been provided to the Keeper as evidence 14.0. Currently Private Healthcare providers are required to follow the *NHS Scotland Records Management Code of Practice*: <http://www.gov.scot/Publications/2012/01/10143104/0>. The Keeper agrees this is suitable. There is a further commitment in the RMP under element 14: "On renewal contracts with private healthcare providers will include reference to requirements of PRSA and compliance with NHSL RMP." The Keeper welcomes this commitment. The RMP gives the example of SALUS who provide occupational health services, although a sample agreement with SALUS is not yet in place, the Keeper accepts it will be similar to that for all private healthcare providers. NHS Lanarkshire are due to review the RMP in December 2015 and the Keeper will be informed of results.

NHS Lanarkshire complies with CEL 25 Safeguarding the Confidentiality of Personal Data Processed by Third Party Contractors.

The *Information Security Policy* (**see element 8**) specifically applies to contractors (evidence 8.0 page 5). A risk assessment is undertaken before any information sharing arrangement becomes operational (page 7). The *Policy* refers to records governance terms being included in any data sharing agreement being signed. A regular audit of the operation of these data sharing agreements will be carried out by the IT Security Manager.

Information Assurance Committee and Information Governance Committee

A key supervisory body in the operation of the RMP will be the Information Assurance Committee. This confirmed by minutes of the CMT provided as evidence 3.4. The RMP will feature as a standing item on their agenda. This committee will oversee the work that is to be carried out in the Action Plan section of the plan. The Committee approved the *Records Management Policies* (**see element 3**) and the *Information Security Policy* (**see element 8**). The Committee monitor the take up of the compulsory Learnpro Training Module (**see element 12**). The Committee will be asked to approve the results of any review of the RMP.

The Information Governance Committee has a responsibility to ensure that NHS Lanarkshire Internal Audit reviews compliance with the *Policies*. It also has responsibility 'to review and approve all Information Security policies' (evidence 8.0 page 6). CMT minutes (evidence 3.4) mention an *Information Assurance Strategy Action Plan*. This plan has been supplied to the Keeper as evidence.

6. Keeper's Summary

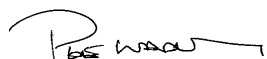
Elements 1 - 14 that the Keeper considers should be in a public authority records management plan have been properly considered by NHS Lanarkshire. Policies and governance structures are in place to implement the actions required by the plan.

7. Keeper's Determination

Based on the assessment process detailed above, the Keeper **agrees** the RMP of NHS Lanarkshire.

- The Keeper recommends that NHS Lanarkshire should publish its agreed RMP as an example of good practice within the authority and the sector.

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



.....
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 Lanarkshire. In agreeing this RMP, the Keeper expects NHS Lanarkshire to fully implement the agreed RMP and meet its obligations under the Act.



.....
Tim Ellis
Keeper of the Records of Scotland