

The Public Records (Scotland) Act 2011

NHS Forth Valley

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

25th May 2021

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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 NHS Forth Valley. The outcome of the assessment and relevant feedback can be found under sections 6 – 8.

4. Authority Background

NHS Forth Valley is governed by a Board of Directors and is accountable to the Cabinet Secretary for Health and Well-being through the Scottish Government Health Directorate. The Board controls an annual budget of **£550** million, and is responsible for providing health services and improving the health for the population of Forth Valley.

NHS Forth Valley employs around **7000** staff from a wide range of professional and support occupations in an acute hospital, four community hospitals and **56** health centres.

Forth Valley has a population of nearly **300,000** and covers a geographic area from Killin and Tyndrum in the North and Strathblane and Bo'ness in the South.

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): NHS Forth Valley

Element	Status of elements under agreed Plan 09SEP16	Progress status 30JUL19	Progress status 06MAY20	Progress status 25MAY21	Keeper's Report Comments on Authority's Plan 09SEP16	Self-assessment Update 02APR20	Progress Review Comment 06MAY20	Self-assessment Update as submitted by the Authority since 06MAY20	Progress Review Comment 25MAY21
1. Senior Officer	G	G	G	G	Update required on any change.	No Change.	No immediate action required. Update required on any future change.	No Change.	No immediate action required. Update required on any future change.
2. Records Manager	G	G	G	G	NHS Forth Valley is committed to designating individuals within each Directorate to support the work of the records manager. The 'Future Developments' section of the RMP notes that job statements need to be created for these nominated individuals. The Keeper commends this approach of using 'local champions' and would welcome receiving a sample job statement once these are available.	In the process of recruiting a Corporate Records Manager who will sit within the Health Records Service. This will then become the Health Record and Corporate Record Department. (See evidence folder - SLT paper submitted June 2019 – 2.1)	This is excellent news. The Keeper will be pleased to learn that NHS Forth Valley is recruiting this extra resource. The Assessment Team request that they are provided with the name of the successful candidate when in post in order that we can keep our Contacts up-to-date. The Assessment Team acknowledged receipt of the <i>Information Governance Resources Paper</i> provided as evidence of senior management approval to recruit.	Corporate Records Manager and Corporate Records Project Support Officer both in post. Both roles sit within the Health Records Service. This will then become the Health Record and Corporate Record Department. Corporate Records Manager – Amy Cawood. Corporate Records Project Support Officer – Claire Goodwin.	The Keeper's Assessment Team thanks NHS Forth Valley for this update which has been noted.
3. Policy	G	G	G	G	Update required on any change.	No Change. Approved 17/04/2019 (see evidence folder 3.1)	In their original submission NHS Forth Valley committed to updating relevant policy documents on a regular basis. The Assessment Team acknowledges that this is routinely being done (see also last PUR). The Assessment Team acknowledged receipt of the new	No Change. Corporate Records Management Policy is currently being updated to bring it in line with the Heath Records Strategy and Management Policy. This will be taken to the next available Information Governance Group for approval.	In their original submission NHS Forth Valley committed to updating relevant policy documents on a regular basis. The Assessment Team acknowledges that this is routinely being done.

							version of the <i>Corporate Records Management Policy</i> . This document will be retained in order that the Board's submission can be kept up-to-date.		
4. Business Classification	A	A	A	A	<p>NHS Forth Valley does not have an operational Business Classification Scheme (BCS) but is committed to implementing one using the example of NHS Scotland. Identified as a priority project by the Records Management Plan Implementation Working Group, a draft BCS will be trialled between September 2016 and March 2017, with full roll-out throughout the authority starting in April 2017. The Keeper requests that he is kept updated as work progresses on this project.</p> <p>The Records Management Improvement Plan further outlines the authority's intention to create an Information Asset Register. This is commended by the Keeper, who would welcome news of development of this document.</p> <p>The Keeper can agree this element on an 'improvement model' basis. This means that the authority has identified a gap in provision (lack of an operational BCS) and has evidenced a commitment to closing that gap. This agreement is conditional on the basis that the Keeper is kept informed of the project's progress.</p>	<p>No Change</p> <p>Recruitment underway for a Corporate Records Manager. Project Management Team set up for implementation of Office 365</p> <p>Information Asset Register system is being developed with supplier. Best in breed approach taken.</p> <p>Information Asset Administrator has been recruited awaiting completion of process by Recruitment Department. IG Project Manager interviews pending, cancelled due to COVID.</p> <p>(See evidence folder – Job Description 4.1)</p>	<p>The Assessment Team notes that NHS Forth Valley are developing an Information Asset Register (IAR).</p> <p>The IAR will have a major effect on Elements 4, 5 and 11, as well as tackling some requirements of the Data Protection Act 2018. It is reasonable to expect that the process of disseminating this to staff will take some time. This should start with senior management. Once senior management understand the purpose and the benefit of this work it will be easier to achieve effective compliance.</p> <p>The Assessment Team looks forward to updates in subsequent PURs.</p> <p>This element remains at Amber while this work is ongoing.</p> <p>The Keeper will be pleased that extra resource, in the form of a manager and administrator for the project, has been allocated. The Assessment Team acknowledged receipt of the <i>Information Asset Administrator Job Description</i>. This document will be</p>	<p>No Change.</p> <p>Project Management Team set up within NHS Forth Valley (IT) for implementation of Office 365 – Corporate Records Manager is a member of this group.</p> <p>Corporate Records Manager is working with the National RMG on the development of the BCS, structuring records management and retention around the Office365/SharePoint solution.</p> <p>Information Asset Register project is working at pace with over 130 assets having been registered to date.</p> <p>Information Asset Administrator (Tamara Anderson) and the Information Governance Project Manager (Mr Sandy Blair) are both now in post.</p> <p>The Corporate Records Management team are assisting with the implementation of the IAR project, working with departments to ensure assets are registered in a timely manner.</p>	<p>In previous updates NHS Forth Valley have indicated that they were pursuing an Information Asset Register structure around the management of their public records. The Assessment Team acknowledge that this action is now underway. The liaison between the Corporate Records Manager and local business areas to progress the population of the IAR is noted and commended. Local involvement in this work is essential in a large organisation.</p> <p>Pursuing this objective marks a measurable improvement in the records management provision in the authority.</p> <p>The Assessment Team looks forward to updates in subsequent PURs.</p> <p>This element remains at Amber while this work is ongoing.</p> <p>The Keeper is aware that all NHS Boards are migrating their systems to a O365 solution. This is bound to be incremental and take several years to bed-in properly. The Assessment Team remind NHS Forth Valley of the importance of appropriate policies, governance and staff training in making this major project a success.</p> <p>The adoption of the O365 solution will directly affect various elements below, such as 6 and 11, as the full functionality is tested. The Keeper understands that this national implementation project is currently at the pilot stage.</p> <p>The Assessment Team recognise that NHS Forth Valley's Information Governance team has been consistently engaged in developments in NHS Scotland centrally through the NHSS Forum. This group are closely monitoring the O365 implementation.</p>

							retained in order that the Board's submission can be kept up-to-date.		
5. Retention Schedule	A	A	A	A	<p>The 'Latest Developments' section of this element states that retention schedules and associated procedures will be developed on a Departmental or Directorate basis to ensure that records are properly managed. The RMP Implementation Plan indicates that work to implement these retention schedules and procedures will commence in November 2016. The Keeper requests that he is kept informed of the progress of this project.</p> <p>The Records Management Improvement Plan also identifies a commitment to ensure that Directorate corporate records are identified and included in its Document Storage, Retention and Disposal Policy. The Keeper requests sight of this Policy once it has been finalised and approved.</p> <p>The Keeper can agree this element on an 'improvement model' basis. This means that the authority has identified an area for improvement (lack of organisation wide retention schedules and identifying records to be selected for permanent preservation) and has provided evidence showing a commitment to closing the gap in provision. As part of this agreement, the Keeper will need to be kept informed of progress in this area.</p>	No Change	<p>No immediate action required. Update required on any future change.</p>	<p>A Corporate Records Retention and Disposal Policy and a Retention and Disposal Register have been developed to ensure that the Board complies with its statutory obligations and good practice in relation to records retention and disposal. These will be taken to the next Information Governance Group in January for approval.</p> <p>During 2021, NHS Forth Valley intends to develop a Board-specific retention schedule to complement the retention decisions set out in the updated NHS Code of Practice. It is expected that the new retention schedules will reflect administrative records not covered in</p>	<p>Thank you for the update regarding the development of an NHS Forth Valley retention schedules.</p> <p>It is noted that further work and roll-out of this new schedule, including board-specific administrative records will be pursued in 2021.</p> <p>The Assessment Team looks forward to updates in subsequent PURs.</p> <p>This element remains at Amber while this work is ongoing.</p> <p>As noted under element 4 above, the Assessment Team recognise that NHS Forth Valley's Information Governance team has been consistently engaged with the NHSS Forum which has been developing the updated Code of Practice which includes standard retention decisions.</p>

								detail by the Code of Practice and assist NHS Forth Valley staff with disposal decisions.	
6. Destruction Arrangements	A	A	A	A	<p>The 'Future Developments' section of this element states that the description for the process of disposing of paper confidential waste in the Waste Disposal Policy needs to be expanded. The Keeper requests that he is sent an updated version of this Policy once it is available.</p> <p>NHS Forth Valley is currently awaiting guidance in order to tackle the issue of the deletion of electronic records on new and legacy systems. A declared objective is to ensure that appropriate mechanisms are put in place for the secure disposal of electronic records. The development of destruction protocols and procedures for all formats of records forms a part of the High Level Implementation Plan. The Keeper requests sight of these once completed.</p> <p>The Plan notes that retention arrangements for emails are currently being reviewed. The Keeper would be interested in hearing about the results of these reviews.</p> <p>The Keeper can agree this element on an 'improvement model' basis. This means that the authority has identified a gap in provision (destruction of electronic records) and has identified how it intends to close the gap. As part of this agreement the Keeper will need to be kept informed of the progress of work to close this gap.</p>	No Change.	No immediate action required. Update required on any future change.	No Change.	No immediate action required. Update required on any future change.
7. Archiving and Transfer	A	G	G	G	The Keeper requests sight of evidence of an agreement between NHS Forth Valley and an archive service which shows a	No Change.	No immediate action required. Update required on any future	No Change. The Corporate Records	The Assessment Team acknowledge that NHS Forth Valley now has a formal agreement with their chosen archive

					<p>commitment to transfer records selected for permanent preservation to a suitable archive on an on-going basis. The High Level Implementation Plan states that such a procedure will be in place by September 2016. The Keeper requests that he is sent evidence of this once completed.</p> <p>The Keeper can agree this element on an 'improvement model' basis as NHS Forth Valley has identified University of Stirling Archives as its place of deposit and has previously deposited historical records there, albeit as a one-off transfer. Both bodies have entered into a Data Processing Agreement regarding this transfer which took place in 2012. The Keeper commends this consideration of historical records but does not consider this to be evidence of a longer-term agreement between NHS Forth Valley and University of Stirling Archives for the permanent preservation of records identified in NHS Forth Valley's retention schedules. The Keeper will need to see evidence of such an agreement showing that the Archive has indicated that it is happy to take archival records from NHS Forth Valley at the appropriate time on an on-going basis. The Keeper therefore requests that NHS Forth Valley begins negotiations with University of Stirling Archives as soon as practicably possible regarding the development of such an agreement. The Keeper will expect to receive a copy of this agreement by the end of February 2017. Should this not be forthcoming the Keeper may re-consider his agreement of this Element and as archiving is specifically mentioned in the Public Records (Scotland) Act 2011 he may re-consider his agreement of the RMP.</p>		change.	<p>Retention and Disposal Policy and a Retention and Disposal Register include appraisal and selection decisions for records identified for permanent preservation.</p> <p>In time, the process will be expanded to cover digital records identified for permanent preservation and transfer to a suitable place of deposit. Work on this will not be possible until the O365 implementation is complete, but consideration is being given to this as the project progresses.</p>	<p>repository and thanks them for providing the Keeper with a copy of the relevant MoU in evidence.</p> <p>If this were a formal re-submission under section 5 of the Public Records (Scotland) Act it is likely that the Keeper would be able to upgrade this element of the NHS Forth Valley's Records Management Plan to a 'green' RAG status.</p> <p>The Assessment Team note the comments about digital archiving. This is in its infancy in the Scottish public sector at the moment, but it is important to recognise that this will become increasingly important over the next several years. It is also important that an authority can be confident that digital records can be transferred from their records management solution (O365 or otherwise) while retaining appropriate metadata to ensure authenticity can be proved. The Keeper is aware that this is currently the subject of discussions between the records management community and Microsoft.</p>
8. Information Security	G	G	G	G	<p>As the Information Security Policy was due for review in March 2016 when the assessment was underway, the Keeper would appreciate being sent an updated version once it becomes available.</p> <p>The Email Acceptable Use Policy is also currently undergoing review. The Keeper would similarly appreciate being sent an updated version of the Policy once it has been approved.</p> <p>The Internet Acceptable Use Policy is undergoing review during the period of assessment. As such the Keeper would</p>	Information Security The main Information Security Policy was extensively re-written in 2019 with a focus on responsibilities and controls relating to the Network and Information Systems	<p>In their original submission NHS Forth Valley committed to updating relevant policy documents on a regular basis. The Assessment Team acknowledges that this is routinely being done (se also last PUR).</p> <p>The Assessment Team acknowledged receipt of the new <i>Information Security</i></p>	<p>Information Security</p> <p>The main Information Security Policy was extensively re-written in 2019 with a focus on responsibilities and controls relating to the Network and Information Systems Regulation 2018.</p> <p>Information Security Policy V6.00 issued December 2019</p>	<p>Thank you for this update. The authority's information security suite of policies and guidance has been subject to major revision since the time of the last PUR.</p> <p>It is important that all information governance policies and procedures are reviewed to ensure they remain robust. This is particularly important with regard to information security where any failure presents a high risks to the authority and there is a constant change in the landscape (with new apps coming online for example). It is welcome that NHS Forth Valley recognise</p>

					<p>appreciate being sent an updated version of this Policy when it becomes available.</p> <p>NHS Forth Valley's Moveable Media Acceptable Use Policy is likewise under review. The Keeper would welcome having sight of the updated Policy once this has been approved.</p>	Regulation 2018. Information Security Policy V6.00 issued December 2019 Remote Access Policy V1.00 issued December 2019 Several Information Security policies will be updated in 2020 to reflect our change in working practices with Office 365 (See evidence Folder 8.1 and 8.2)	<i>Policy and the Remote Access Policy.</i> These documents will be retained in order that the Board's submission can be kept up-to-date.	Remote Access Policy V1.00 issued December 2019 Several Information Security policies have been updated in 2020 to reflect our change in working practices with Office 365, including revisions during 2020 to the following: <ul style="list-style-type: none"> • Cryptographic Control Policy • Access to systems • Internet Acceptable use • Transportation and handling of confidential & sensitive information. 	this and have clearly put considerable resource into keeping up-to-date with the issue.
9. Data Protection	G	G	G	G	Update required on any change.	No Change	No immediate action required. Update required on any future change.	No Change.	No immediate action required. Update required on any future change.
10. Business Continuity and Vital Records	G	G	G	G	The 'Future Developments' section of this element states that NHS Forth Valley will develop business continuity plans specifically for records in each department/directorate. The Keeper would be interested to see a sample of one of these once they have been implemented.	Information Asset Register system is being developed with supplier. Best in breed approach taken. The new IAR takes account of record recovery.	See element 4 above. The expansion of an Information Asset Register to identify record recovery processes is commendable (and not an approach universally adopted). The Assessment Team would be pleased to see an example of what this looks like at the time of the Board's next PUR.	Information Asset Register system is being developed with supplier. Best in breed approach taken. Unfortunately, the planned inclusion of a process to take into account record recovery has not been possible. As the IAR is a bespoke database, it may be possible in the future to include record recovery.	As noted in the previous PUR the adoption of record recovery as part of the IAR (see element 4 above) is 'not an approach universally adopted'. Although it is disappointing that the IAR structure adopted by NHS Forth Valley does not in fact allow for this as hoped, it is not surprising, nor does it invalidate the Keeper's 'green' rating against this element.
11. Audit Trail	A	G	G	G	NHS Forth Valley is committed to creating and implementing audit trail functionality in each Directorate by the end of November 2016. Similarly, document version control procedures will be rolled out across the organisation and guidance issued for records that contain sensitive personal information. The Keeper commends these initiatives and requests that he is kept informed of the progress of this project.	No Change	No immediate action required. Update required on any future change.	No Change.	No immediate action required. Update required on any future change.

					The 'Future Developments' section of this element states that the authority are considering the use of the Covalent Performance Management System which could assist in providing audit trail information. The Keeper would be interested to receive updates concerning these plans. The Keeper is able to agree this element on an 'improvement model' basis. This means that NHS Forth Valley has identified a gap in provision (the lack of organisation-wide audit trail provision) and has provided the Keeper with evidence on how it intends to close the gap. As part of this agreement the Keeper will need to be kept informed of progress.				
12. Competency Framework	A	A	A	G	The High Level Implementation Plan states the need to identify key competencies relating to records management and to include these within job descriptions. The target date for completion of this work is December 2016. The Keeper requests that he is sent the job descriptions of the individuals identified in Element 2 once these have been finalised. The 'Future Developments' section of this element declares that staff training in information governance and security will be extended to staff across all departments/directorates. The Keeper applauds this endeavour and would welcome updates on the progress of this project. The Keeper is able to agree this element on an 'improvement model' basis. This means that the authority has identified a gap in provision (the inclusion of records management competencies into the job descriptions of relevant staff and the rolling out of records management training) and has committed to closing this gap. As part of this agreement, the Keeper requests that he is kept informed of progress in this area.	The roll out has stalled, the module requires to be updated and the Director of HR has agreed that it should be role specific mandatory at this stage. The Records Management Implementation Group continues to lobby for this to be made mandatory for all staff. Each manager would have to go to Learn-pro and allocate this to individual members of staff which is not a priority at the moment due to COVID-19 outbreak. (Please see evidence folder Job Descriptions for Corporate Records Manager, Head of Information Governance)	Thank you for this update. The Keeper has been quite clear that all staff creating, or otherwise processing records, should be appropriately trained and supported. I suppose a debate could be had around the word 'appropriate', but I think it is safe to say we at the PRSA Team would support the principle for mandatory training for all staff. Please let us know if there is anything we can do in practice to further your lobbying efforts. Also it is worth noting that LearnPro has been rolled out in other territorial health boards in Scotland (for example NHS Highland) who would we are sure be willing to share their experience if asked (you may have already done this). Obviously, while the result of the internal discussion regarding	The Records Management LearnPro has now been made mandatory for all staff. The Corporate Records Manager holds an MSc in Records Management and Digital Preservation and is a member of both the IRMS and ARA professional bodies. It is expected that the postholder will work towards IRMS accreditation over the next 2 years.	This is very welcome news and a reflection of the work of the information governance team in successfully demonstrating the importance of robust records management to senior people in the authority. The achievement of this objective marks a measurable improvement in the records management provision in the authority. At the time of the last PUR the Assessment Team noted that they have received Job Descriptions for key staff. These have been retained on file to keep the NHS Forth Valley submission up-to-date. As with element 7 above, if this were a formal re-submission it is likely that this element of the Plan would turn from Amber to Green.

							LearnPro is still not resolved, this element remains at Amber. At the time of the last PUR the Assessment Team noted that they had not received Job Descriptions for key staff. They are happy to report that these have now been received and will be retained on file to keep the NHS Forth Valley submission up-to-date.		
13. Assessment and Review	A	G	G	G	NHS Forth Valley has provided details concerning who will carry out reviews of the RMP, how often, and to whom they will report. The High Level Implementation Plan has also identified the need to investigate options for measuring compliance with the agreed RMP and records management systems. The Action Plan states that this authority will evaluate ARMS as a tool for undertaking this work and that a self-assessment mechanism will be developed by June 2017. The Keeper looks forward to being informed of the results of this project. The Director of Finance has announced that a full review of the RMP will be included within the internal auditors programme for 2017/18. The Keeper commends this initiative and would be pleased to receive updates on this work. The Keeper is able to agree this element on an 'improvement model' basis. This means that the authority has identified a gap in provision (the lack of a mechanism for measuring compliance with RMP) and has committed to closing this gap. As part of this agreement, the Keeper requests that he is kept informed of progress in this area.	No Change Continue to carry out PUR for submission to the Keeper	The Assessment Team notes that NHS Forth Valley have previously explained the review and reporting structure in a way that is liable (if evidenced) to elicit a Green RAG status if this were a formal resubmission. They also acknowledge that the continual engagement with the PUR process indicates that the Board take the continual review of their RMP (as required by the Act) seriously.	No Change. Continue to carry out PUR for submission to the Keeper.	<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>The Assessment Team notes that NHS Forth Valley have previously explained the review and reporting structure in a way that is liable (if evidenced) to elicit a Green RAG status if this were a formal resubmission.</p> <p>They also acknowledge that the continual engagement with the PUR process indicates that the Board take the continual review of their RMP (as required by the Act) seriously.</p> <p>Despite the uncertainty around the implementation of the national O365 solution, which affects all Scottish NHS Boards, it is worth noting that in the particular case of NHS Forth Valley several elements have significantly improved since the original submission and might be upgraded by the Keeper from amber to green in a formal voluntary resubmission.</p> <p>With this in mind, the Assessment Team would like to remind NHS Forth Valley that the PRSA says at section 5.6 "An authority may at any time revise its records management plan and submit the revised plan to the Keeper for agreement."</p> <p>NHS Forth Valley should consider doing this because of the scale of the improvement actions recently completed. The Keeper does not currently intend to</p>

									<p>issue a formal resubmission invitation to NHS Forth Valley in 2021 or 2022.</p> <p>If NHS Forth Valley is considering a formal re-submission please contact the assessment team to discuss what evidence would need to be supplied public_records@nrscotland.gov.uk We will fully engage and support a section 5 re-submission. Happy to talk through the process at any time.</p>
14. Shared Information	G	G	G	G	NHS Forth Valley has entered into an Accord with a number of authorities and this Accord has been submitted as evidence. As the Accord is set for review in February 2017, the Keeper requests a copy of the revised Accord once it has been approved.	No Change	No immediate action required. Update required on any future change.	No Change.	No immediate action required. Update required on any future 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 6th January 2021. The progress update was submitted by Amy Cawood, Corporate Records Manager.

The progress update submission makes it clear that it is a submission for **NHS Forth Valley**.

The Assessment Team has reviewed NHS Forth Valley'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

NHS Forth Valley 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.

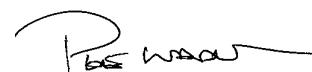
The Keeper cannot change the status of elements formally agreed under a voluntary submission, but he can use such submissions to indicate how he might now regard this status should the authority choose to resubmit its plan under section (5)(6) of the Act.

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

Based on the progress update assessment the Assessment Team considers that NHS Forth Valley 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,



Pete Wadley
Public Records Officer