

The Public Records (Scotland) Act 2011

Scottish Social Services Council

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

22nd March 2022

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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 assessment status 21FEB20	Progress assessment status 22MAR22	Keeper's Report Comments on Authority's Plan 13OCT14	Self-assessment Update 08JAN20	Progress Review Comment 21FEB20	Self-assessment Update as submitted by the Authority since 21FEB20	Progress Review Comment 22MAR22
1. Senior Officer	G	G	G	Update required on any change	Since the RMP was agreed the role holder has changed. See updated letter 01-01 as evidence.	Thank you for this update. The change of identified individual has been noted. The Assessment Team acknowledge the receipt of a letter from Maree Allison, Acting Chief Executive confirming this change. Subsequent to the PUR submission the Assessment Team has been informed that the Chief Executive of SSSC is Lorraine Gray.	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.
2. Records Manager	G	G	G	Update required on any change	Since the RMP was agreed the role holders job title has changed. See updated letter 02-01 as evidence The role holders job description has also changed. Please see 02-02 for updated job description.	Thank you for this update. The change of title for the previously identified individual has been noted. The Assessment Team acknowledge the receipt of a letter from Maree Allison, Acting Chief Executive confirming this change. The Assessment Team acknowledge receipt of the <i>Information Governance Coordinator job description</i> . This document will be retained in order that the Scottish Social Services Council's submission can be kept up-to-date.	No updated required	Noted with thanks. Update required on any future change.
3. Policy	G	A	G	The Keeper would welcome updates following the planned review of the <i>Records Management Policy</i> in 2017	The Records Management Policy has not been reviewed since 2014. However, the policy will be reviewed in quarter 2 of 2020. Please see 03-02, draft business plan for 2020/21 as evidence.	In their original submission the Scottish Social Services Council committed to keep its information governance policy documents under review. The document control sheet for the Records Management Policy showed a review date of March 2017. It appears this was not done. However, the Assessment Team acknowledge that this is now scheduled. This element temporarily moves to an Amber rating as the authority has no in-date Records Management Policy.	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.

						The Assessment Team is confident that this will be resolved by the time of the next PUR.		
4. Business Classification	A	A	A	<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>Since the RMP was agreed the organisation has decided to manage its corporate information within SharePoint. The folder structure in SharePoint will reflect the BCS. The organisation is currently migrating data from our shared drive into SharePoint. See updated evidence 04-02</p> <p>An information asset register was created as planned. See evidence 04-03</p>	<p>In their original submission the Scottish Social Services Council indicated that they were pursuing an Information Asset Register structure around the management of their public records. The Assessment Team acknowledge that this action has now been completed.</p> <p>The achievement of this objective marks a measurable improvement in the records management provision in the authority.</p> <p>The Assessment Team acknowledge receipt of the authority's Information Asset Register. This document will be retained in order that the Scottish Social Services Council's submission can be kept up-to-date.</p> <p>The Keeper is acknowledges that the SSSC are migrating their public records to a O365/SharePoint solution. This is bound to be incremental and take several years to bed-in properly. The Assessment Team remind the authority of the importance of appropriate policies, governance and staff training in making this major project a success.</p> <p>The Assessment Team acknowledge receipt of evidence around the SharePoint migration project.</p> <p>This element remains at Amber while this work is ongoing. The Assessment Team looks forward to further updates in subsequent PURs.</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>
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 EDRM.</p>	<p>The retention schedule was last reviewed 2015. Please see updated evidence 05-01.</p> <p>We are in the process of reviewing the schedule as part of our migration to SharePoint. Once the review is concluded, the retention policies will be set on electronic records held in SharePoint, which will allow automatic disposal of records. See 03-02 as evidence of this planned activity.</p>	<p>The Assessment Team acknowledge the receipt of the latest version of the SSSC Retention schedule (version 3 May 2015)</p> <p>However, a Retention Schedule is a living document and is liable to be reviewed and updated regularly. The Assessment Team agree with the authority that the SharePoint Migration Project is an ideal time to look carefully at retention decisions.</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>The schedule will be comprehensively considered in 2021/22. In particular, consideration will again be given to reducing timescales that we keep records, particularly permanent retention, and the time scale in which fitness to practise records are retained. We had originally planned to hold off on reviewing this part of our retention schedule until the Scottish Child Abuse Inquiry had concluded, however given that this inquiry is now indefinite, we have incorporated this review into our business plan for 2021/22. Please see 05-04 as evidence of this planned activity.</p>	<p>The Assessment Team notes that the authority intends to impose automatic deletion of electronic records. This is generally considered a positive development.</p> <p>The Assessment Team acknowledge receipt of evidence around the SharePoint migration project.</p> <p>The Assessment Team acknowledges receipt of the <i>Legal and Corporate Governance Business Plan (Information Governance)</i>. This confirms the work around this, and other, elements that has been explained in the PUR.</p> <p>The Assessment Team looks forward to further updates in subsequent PURs.</p>		
<p>6. Destruction Arrangements</p>	<p>G</p>	<p>A</p>	<p>A</p>	<p>The Keeper would be interested to learn how the implementation of an EDRM 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>Enterprise Vault EDRM was deployed onto out network drives but unfortunately the auto delete function would not work as it should have. As above, we are currently in the process of migrating our corporate records held in networks drives over to SharePoint. Once migration is complete retention policies will be applied to these files.</p> <p>Further updates to this element are needed to reflect new systems:</p> <p>Our Fitness to Practise records are now held on our MatterSphere system which is hosted by NVT. This system is backed up daily and retention of data on backup is 28 days.</p> <p>Registration records are held on our dynamics system which is hosted in the cloud by Microsoft.</p>	<p>In their original submission the Scottish Social Services Council indicated that they were reviewing the destruction of back-up tapes. The Assessment Team are pleased to report this has now been done and a clear explanation of the length of time public records are available as business continuity copies has been provided.</p> <p>The authority has been quite open about a failure in their EDRM functionality that means they cannot currently be certain of the secure, timely and controlled destruction of digital records.</p> <p>This element is graded as Amber due to this unexpected gap in provision.</p> <p>Clearly, once all the public records of the authority are managed on the SharePoint system the routine and controlled destruction of electronic records should be more robust. However, this functionality will probably not be universally operational for some time. In the meantime it will remain important that staff are correctly prompted to destroy records appropriately.</p> <p>To this end SSSC have produced <i>How we Destroy and Delete</i> guidance which has been shared as evidence accompanying this PUR.</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>

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>	<p>The MOU has been agreed. Please see evidence 07-03</p>	<p>In their original submission the Scottish Social Services Council committed to engaging with client managers in the National Records of Scotland to create a formal agreement for the archiving and transfer of records. The Assessment Team is pleased to acknowledge that this has now been done.</p> <p>The Assessment Team has received a copy of the Memorandum of Understanding between SSSC and NRS. This document will be retained in order that the authority's submission may be kept up to date.</p>	<p>No Update required</p>	<p>Noted with thanks, update required on any future change.</p>
8. Information Security	G	G	G	<p>Update required on any change</p>	<p>The SSSC has established its own ICT team rather than receiving a shared service through the Care Inspectorate and are working on updating relevant policies to reflect this.</p>	<p>Thank you for this update.</p> <p>The Assessment Team is satisfied that the public records of the authority are still protected under the information security suite presented with the original 2014 submission (albeit updated versions). However, they note the intention of undertaking a major revision of these to reflect a change in ICT provision.</p> <p>The Assessment Team looks forward to an update on this at the next PUR.</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.</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>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 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>
9. Data Protection	G	G	G	Update required on any change	<p>Following the GDPR and the Data Protection Act 2018, we have updated our data protection policy and website privacy notice. Please see the following link and 09-03 as evidence.</p> <p>Data protection and privacy notice - Scottish Social Services Council</p>	<p>As with all other Scottish public authorities the Social Service Council have been required to review and update their data protection procedures in light of the 2018 legislation.</p> <p>The Assessment Team acknowledges that the public facing SSSC website has been updated appropriately: https://www.sssc.uk.com/knowledgebase/article/KA-02011/en-us</p> <p>The Assessment Team also acknowledge that the SSSC have provided a copy of this policy in evidence. This document will be retained in order that the SSSC submission ca be kept up-to-date.</p>	<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>
10. Business Continuity and Vital Records	G	G	G	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.	The updates to this element are the new Fitness to Practise and Registration systems name change, and as above, we have now established our own ICT team rather than received a shared service through the Care Inspectorate, and are working on updating relevant policies to reflect this	<p>Thank you for this update. The Assessment Team notes that a new record recovery system may be developed due to the change in IT provider.</p> <p>We look forward to an update on this in subsequent PURs.</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 Strategic and Performance Directorate have planned activity in</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.</p>

							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.	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.
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>The updates to this element are the new Fitness to Practise and Registration system names but the premise is the same:</p> <p>Fitness to Practise records are held in our Mattersphere system and has its own document repository. Registration records are held in our Dynamics 365 system which provides an MS SharePoint repository. Both systems provide a full workflow functionality and audit trail for these records. For information on changes please see evidence 11-10 and 11-11</p> <p>SharePoint is used as our main document repository; SharePoint provides inbuilt versioning and auditing to allow changes to be tracked and previous versions of documents to be restored by the owner of the SharePoint library.</p>	<p>The Assessment Team thanks SSSC for this update.</p> <p>The Keeper has previously indicated that he accepts that line-of-business systems have their own record tracking (audit trail) functionality. The Assessment Team acknowledge that they have been provided with staff instructions around these in evidence.</p> <p>The Assessment Team agrees that the adoption of SharePoint will automatically make version control more robust. However, there is still a need for staff to name records correctly (and for appropriate training) to ensure all records can be traced and properly identified in the SharePoint structure.</p> <p>In the original agreement (October 2014) the Keeper mentioned the steps taken to ensure standardised naming conventions were rolled-out. SSSC have provided the Assessment Team with a 2017 audit report that shows monthly checking that staff are following naming conventions (which are attached as an appendix to the report). This is to be commended.</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 commencement of these audits in future PURs.</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</p>	<p>The records management Officer post has been renamed to Information Governance Coordinator. A new job description has been agreed. Please see updated evidence 02-02. No corresponding person specification has been produced yet.</p> <p>Continued records management training has been identified as a development need for the information governance</p>	<p>Thank you for the update regarding your change in job title. This has been noted. The Assessment Team acknowledges the receipt of an updated job description. This will be retained in order that the SSSC submission can be kept up-to-date.</p> <p>The Keeper expects to see evidence that Staff creating, or otherwise processing records, are appropriately trained and supported.</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>

				on bringing about this cultural change.	coordinator and been requested in our budget for financial year 2020/21.	The Assessment Team notes the intention to provide the Information Governance Coordinator with relevant training. This would seem to be vital and the Keeper would expect to see evidence of a commitment to this in the case of a formal resubmission.		
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 element 3. The Records Management Policy is to be reviewed in 2020. Please see 13-03 as evidence of audit reports	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.) The Assessment Team acknowledges that the RMP appears to have been reviewed. The authority’s participation in the PUR process in 2018 and 2020 demonstrates a commitment to reviewing its RMP. It is important that the information governance policies and guidance that support the implementation of the plan are also routinely reviewed. The Assessment Team acknowledge that SSSC recognise this. However, see element 3.	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.
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.	Upon reflection, standard sharing agreements are not particularly suitable in relation to the work of the SSSC. The SSSC does not have standard agreements. The SSSC is, in the majority of cases, the recipient of information from third parties and any agreements entered into are likely to be based primarily upon that third parties’ terms. In relation to protocols, the SSSC occasionally releases information to third parties. A style data release form is completed to help decide whether the release of such information is appropriate under the terms of the data protection legislation, and it is released to third parties on those terms. Please see 14-02 as evidence. Members of staff in our Fitness to Practise department have guidance about what information they can release to various people with an interest in their casework.	As long as information governance is appropriately embedded in all data sharing agreements the methodology of data sharing must be a business decision for an authority. The Assessment Team, therefore accepts that the original plan to develop standard sharing protocols and agreements has not been progressed and agreements will be crafted on a case-by-case basis. The Assessment Team notes that this is likely to be led by the arrangements present in the data sharing partner body. If this were a formal re-submission, the Keeper would require samples to be submitted and would expect all information governance issues clearly addressed. In that case it is likely that the RAG status of this element would turn Green. For data protection see element 9 above.	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.

					Our privacy notice was also updated in line with GDPR (see Data protection and privacy notice - Scottish Social Services Council)			
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7. The Public Records (Scotland) Act Assessment Team's Summary

Version

The progress update submission which has been assessed is the one received by the Assessment Team on 28th January 2022. 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.

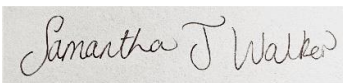
The Keeper cannot change the status of elements formally agreed under a voluntary submission, but he can use such submissions to indicate how he might now regard this status should the authority choose to resubmit its plan under section (5)(6) of the Act.

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



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