

# **The Public Records (Scotland) Act 2011**

## **Scottish Ambulance Service**

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

**3<sup>rd</sup> April 2020**

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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 Scottish Ambulance Service. The outcome of the assessment and relevant feedback can be found under sections 6 – 8.

### 4. Authority Background

The Scottish Ambulance Service is a national organisation providing a service in five Regional Operational Divisions:

- North Division – covering the Highlands, Grampian, the Western and Northern Isles
- East Central Division – covering Tayside, Forth Valley and Fife
- South East Division – covering Lothian and the Borders
- West Central Division – covering Lanarkshire, Greater Glasgow and Dunbartonshire
- South West Division - covering Ayrshire & Arran, Argyll & Clyde, Dumfries and Galloway

Operations are co-ordinated through three Ambulance Control Centres. These centres dispatch responses to 999 calls, arrange patient transport services to hospitals as requested by other medical professionals and manage air ambulance response. The Air Ambulance operates from Inverness, Aberdeen and Glasgow and operates across the country with two fixed wing aircraft and two helicopters.

The Scottish Ambulance Service National Headquarters is in Edinburgh. Executive directors are based there, along with other administrative functions such as finance, personnel and corporate affairs. Training and development services are run from the Scottish Ambulance Academy at Glasgow Caledonian University.

A board is responsible for ensuring that the Scottish Ambulance Service meets all of its obligations to patients and staff.

The Board is made up of:

- a non-executive chairman
- the chief executive
- eight non-executive directors including an employee director
- five executive directors

The chairman and non-executive directors are appointed by the Scottish Government through the Commissioner for Public Appointments. The chief executive and other executive directors are appointed through a process of public advertising and formal interview.

<http://www.scottishambulance.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 Ambulance Service**

Element	Status of elements under agreed Plan 12NOV15	Status of evidence under agreed Plan 12NOV15	Progress assessment status 03APR20	Keeper's Report Comments on Authority's Plan 12NOV15	Self-assessment Update as submitted by the Authority since 12NOV15	Progress Review Comment 03APR20
1. Senior Officer	G	G	G	Update required on any change	Pauline Howie, Scottish Ambulance Service Chief Executive, has overall accountability for records management throughout the Service.  Senior management responsibility is devolved to Claire Pearce, Director of Care Quality and Strategic Development. Ms Pearce is SAS's Senior Information Risk Owner and chairs the Information Governance Group.	The Assessment Team thanks the Scottish Ambulance Service for this update which has been noted.
2. Records Manager	G	G	G	Update required on any change	Elizabeth O'Brien, Records Management Officer, has been in post since March 2019 and has day-to-day operational responsibility for records management through SAS.	The Assessment Team thanks the Scottish Ambulance Service for this update which has been noted.
	G	G	G	Update required on any change	The <i>Records Management Policy v1.00</i> was approved in December	In their original submission the Ambulance Service committed to



3. Policy					<p>2014 and distributed to all staff via the intranet in January 2015.</p> <p>There have been no major reviews or updates since the submission of SAS's Records Management Plan in 2015. However, the policy is currently under review, to be completed prior to the resubmission of the RMP in 2020/21.</p>	<p>keep its information governance policy documents under review and the Assessment Team acknowledge that this is currently being done.</p> <p>They look forward to receiving updates in subsequent PURs.</p> <p>The Keeper has been kept appraised of the development of an updated <i>Code of Practice</i> through the NHSS Forum and accepts that the Scottish Ambulance Service will adopt that Code when it is available.</p>
4. Business Classification	<b>A</b>	<b>G</b>	<b>A</b>	<p>The Scottish Ambulance Service is embarking on a project to populate and roll-out a full Business Classification Scheme (BCS) within the next five years. This Scheme is being developed in line with guidance from the <i>NHS Scotland Code of Practice</i> and, once completed, the BCS will be used to populate any EDRMS adopted by the service. The Keeper commends this approach, particularly the principle of</p>	<p>The Information Governance Team is currently developing and implementing the Service's Information Asset Register. The IAR has been designed to capture many important records management elements, including function, activity, retention period, location, format, tracking, and the legal basis for processing of personal data. In addition, the IAR will identify vital records and those worthy of permanent preservation. The information collected through the IAR will help form a more detailed classification scheme.</p>	<p>The Scottish Ambulance Service have indicated that they are pursuing an Information Asset Register structure around the management of their public records.</p> <p>Once completely populated the <i>Information Asset Register</i> will need to be reviewed at a local level (the involvement of local business areas in the work is vital).</p>

				<p>local involvement in creating a detailed classification, and requests updates as work progresses on this project.</p> <p>The Keeper can agree this element of the Scottish Ambulance Service's Records Management Plan on 'improvement model' terms. This means that he acknowledges that the authority has identified a gap in provision (full business classification not rolled out throughout the authority) and has put procedures in place to close that gap. He agrees this element on the condition that the Service provides updates on the progress of this important project.</p>	<p>The Records Management Officer has also been involved in discussions on the implementation of Office365 throughout the Service during 2020/21. This is a long-term project but which should lead to the adoption of a structured record management system, including a classification scheme and file plan, within SharePoint.</p> <p>The NHS Scotland Records Management Forum is currently developing a NHS Scotland nationwide BCS and file plan for use with O365. Information gathered during the IAR project on ambulance-specific record types will be included within this BCS.</p>	<p>In other parts of the PUR the authority notes that the IAR will log the legal bases for processing personal information, the identification of vital records and records considered suitable for permanent preservation will be identified</p> <p>The Assessment Team looks forward to updates in subsequent PURs.</p> <p>The creation and roll-out of an operational Information Asset Register will mark a measurable improvement in the records management provision in the authority.</p> <p>This element remains at Amber while work on the Information Asset Register 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 the Scottish Ambulance Service of the importance of</p>
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						<p>appropriate polices, governance and staff training in making this major project a success.</p> <p>The Assessment Team recognise that the Scottish Ambulance Service's Records Manager has been consistently engaged in developments in NHS Scotland centrally through the NHSS Forum. This body is developing a BCS and an update to the Code of Practice while closely monitoring the O365 implementation.</p>
5. Retention Schedule	<b>G</b>	<b>G</b>	<b>G</b>	Update required on any change	<p>SAS continues to use the Retention Schedule included in the <i>Documents Storage, Disposal and Retention Policy v2.01</i> published in January 2015.</p> <p>However, the Retention Schedule is currently under review, incorporating the identification of new information assets through the IAR project, as well as new guidance currently in draft from the <i>Scottish Government Records</i></p>	<p>The <i>NHS Code of Practice</i> is the key source for retention decisions and, as noted above, this <i>Code</i> is being updated at the moment. For the present the Assessment Team is content that the Scottish Ambulance Service is operating the retention provision in their <i>Documents Storage, Disposal and Retention Policy</i> document.</p>

					<p><i>Management Health &amp; Social Care Code of Practice (Scotland) 2019.</i></p> <p>We anticipate this being completed in 2020, in line with the IAR project and to allow for the implementation of Office365 throughout the Service.</p>	<p>The Assessment Team note that the Scottish Ambulance Service will include retention decisions in its <i>Information Asset Register</i>. This is to be commended as liable to create a stronger business tool.</p>
6. Destruction Arrangements	A	G	A	<p>The Scottish Ambulance Service have recognised the need to develop and implement comprehensive policies and staff guidance on the confidential disposal of records. This is particularly relevant for electronic records, with the authority aware that disposal procedures for these records are still currently in their infancy. The Keeper commends the authority's commitment to improve its arrangements and requests a submission of the new Guidance once it becomes available. The Keeper likewise recognises that the authority's implementation of a BCS should greatly assist implementing processes for the irretrievable and controlled</p>	<p>Destruction arrangements are currently a focus within the Service. A review of external destruction arrangements and off-site storage locations is currently in progress, with a targeted completion date of the end of 2020. This has begun to identify where records are held and due for review and disposal. The project will also allow SAS to determine where improvements can be made, specifically in terms of consolidating offsite storage locations, streamlining the process of transferring and logging records offsite, and revising the use of external contractors for confidential waste disposal.</p> <p>In January 2020, a revised <i>Records Review &amp; Disposal Register</i> was rolled out to all work areas, along with communications on review and disposal arrangements and best practice. We anticipate this will assist in raising awareness of records held both on- and off-site, as well as electronically, that are due for review and disposal, while</p>	<p>The Keeper agreed this element of the Scottish Ambulance Service's Records Management Plan under 'improvement model' terms on the grounds that the authority was not satisfied with the procedures in place for ensuring the timely, controlled and secure destruction of electronic records.</p> <p>This PUR makes it clear that this situation has not been fully resolved. However, the Assessment Team are pleased to acknowledge that steps are being taken to close what would otherwise be a gap in provision.</p> <p>Clearly, once all the public records of the authority are managed on the O365 system the routine and controlled destruction of electronic records</p>

				<p>destruction of electronic records.</p> <p>The Keeper agrees this element under 'improvement model' terms. This means that an authority has correctly identified a gap in their records management provision (the management of electronic records destruction is not fully embedded in the organisation) and have put processes in place to close that gap. The Keeper's agreement is conditional on him being provided with updates as the business classification/EDRMS project progresses.</p>	<p>working towards ensuring this becomes part of business-as-usual for all staff.</p> <p>There is still a gap in provision in terms of the review and disposal of electronic records. This is a long-term project but it is anticipated that there are many current developments which should assist in closing this gap. These include the <i>Records Review &amp; Disposal Register</i> and guidance mentioned above, the continued development of the IAR, the revised Retention Schedule, and data cleansing of shared network drives prior to the implementation of Office365. These will take place throughout 2020/21. It is anticipated that the implementation of SharePoint as SAS's EDRMS will greatly improve and streamline review and disposal processes for electronic records throughout the Service.</p>	<p>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>The Assessment Team notes the introduction of the <i>Records Review &amp; Disposal Register and Guidance</i>.</p> <p>It seems that the authority plans a clear-out of redundant paper records and, in order to facilitate this, a survey of hard-copy holdings is taking place. The Keeper agrees this action is appropriate and the Assessment Team looks forward to updates in subsequent PURs.</p> <p>This element remains at Amber.</p>
7. Archiving and Transfer	<b>G</b>	<b>G</b>	<b>G</b>	Update required on any change	<p>Currently, SAS is working with NRS to update the Memorandum of Understanding to the 2018 (GDPR) version).</p> <p>As part of the IAR project, ongoing reviews and disposals, and the revision of the Retention Schedule, records worthy of permanent preservation will be identified and</p>	<p>The Keeper's client management team acknowledges contact from the Scottish Ambulance Service to discuss the identification of records of enduring value. This is to be done for the purposes of populating the IAR - for comments regarding the</p>

					provisions will be put in place to transfer any such records to the NRS.	<p><i>Information Asset Register</i> see element 4 above.</p> <p>The engagement with the NRS Client Management Team has taken forward the process of updating the MoU to the 2018 (GDPR) version.</p> <p>At the time of any formal resubmission the Keeper would expect an authority to be operating under the most up-to-date version of the MoU.</p>
8. Information Security	<b>G</b>	<b>G</b>	<b>G</b>	Update required on any change	<p>Information security remains a priority as SAS within both the ICT and IG teams. There have been a number of policy reviews and updates since the submission of SAS's RMP.</p> <p><i>ICT Security Policy v2.0</i> was reviewed and updated September 2019.</p> <p><i>Information Governance Policy v2.0</i> was updated and published in May 2018.</p> <p><i>Information Security Incident Management Procedure v3.02</i> was updated and published in May 2017.</p> <p><i>Information Security Policy v1.0</i> was published in April 2015.</p>	<p>In their original submission the Ambulance Service committed to keep its information security suite under review and the Assessment Team acknowledge that this has been done.</p>

9. Data Protection	G	G	G	<p>The Scottish Ambulance Service show a strong commitment under this element, as evidenced by their plan to review their <i>Data Protection Policy</i>. The Keeper commends this initiative and requests that any updated version is forwarded when available in order that he may keep the Service's submission up to date.</p>	<p>In order to promote compliance with GDPR, a new <i>Data Protection Notice v1.0</i>, which details how SAS uses and shares personal data, was published on SAS's website in May 2018.</p> <p>Revision of the <i>Data Protection Policy v1.02</i> is also currently priority for the Information Governance Team.</p> <p>The <i>NHS Scotland Data Protection Impact Assessment (DPIA) Questionnaire v1.0 (2018)</i> has replaced the <i>Privacy Impact Assessment Template and Guidance</i>.</p> <p>The IAR includes sections which aim to clarify and log the legal bases for processing personal information, as well as ensuring that all information is handled, stored, access, and shared appropriately.</p>	<p>As with all other Scottish public authorities the Scottish Ambulance Service have been required to review and update their data protection procedures in light of the 2018 legislation.</p> <p>The Assessment Team acknowledges that a GDPR Data Protection Notice appears on the SAS website: <a href="http://www.scottishambulance.com/userfiles/file/TheService/SAS%20Data%20Protection%20Notice%20-%20General_v1%200_2018-05-18_WithActions.pdf">http://www.scottishambulance.com/userfiles/file/TheService/SAS%20Data%20Protection%20Notice%20-%20General_v1%200_2018-05-18_WithActions.pdf</a></p> <p>For comments regarding the <i>Information Asset Register</i> see element 4 above.</p>
10. Business Continuity and Vital Records	A	G	A	<p>The authority recognises that they do not currently have a service-wide Business Continuity Plan and they are committed to developing one which will include the identification of vital records.</p> <p>The Keeper agrees this element of the Scottish Ambulance Service's Records Management</p>	<p>It has been identified that a service-wide Business Continuity Plan is not practicable for SAS and instead, business continuity plans are to be created for each work area. This project is headed by the Business Continuity Manager and is currently in progress. This project sits alongside the IAR project with a timeline of approximately two years. Each work area will be tasked with identifying their vital records and</p>	<p>The Assessment Team note that the Scottish Ambulance Service have decided not to pursue a central, service-wide, Business Continuity Plan. This is agreed as long a suite of separate plans are implemented targeted at local business areas and with local input. The authority has committed to creating these and</p>

				Plan under 'improvement model' terms. This means that the authority has identified a gap in its records management provision (business continuity arrangements are in development) and have put processes in place to close that gap. The Keeper's agreement is conditional on the Service providing updates as the project develops.	ensuring that provisions are in place to protect them. This information is also captured and reflected in the IAR.	this element remains at Amber while this is progressing.  Once the local plans are created they should be tested. The Assessment Team looks forward to updates on this project in subsequent PURs.  The inclusion of vital records in the Information Asset Register ( <b>see element 4</b> ) is noted and commended. That these records are to be identified by local business areas is to be encouraged.
11. Audit Trail	A	G	A	Currently there is no overarching system that allows all records to be efficiently tracked and located. The Scottish Ambulance Service is developing a BCS to assist in record location and have submitted a <i>Document Version Control and Naming Conventions</i> document in the meantime.	With the NHS Scotland move to Office365 and the implementation of SharePoint, SAS anticipates that tracking and locating records will be much improved. Currently, the Service does not have an EDRMS. However, many of the other systems used throughout the Service do create audit trails of records.  For unstructured electronic records, the <i>Document Version Control and Naming Conventions</i> guidance is used to provide some structure.	The Keeper agreed the original submission on 'improvement model' grounds. That is to say the authority had recorded a gap in provision and was taking steps to close that gap.  This was bound to be incremental and the Assessment Team is pleased to acknowledge that steps have been taken as agreed.



				<p>The Keeper agrees this element on 'improvement model' terms. This means that he acknowledges that the Scottish Ambulance Service have identified a gap in provision (unstructured records cannot be satisfactorily tracked) and have put programmes in place to close that gap (the business classification/EDRMS project). The Keeper's agreement is conditional on him being provided with updates as the project progresses.</p>	<p>Processes are also in place to track and record the movement of paper records, such as those moving from regional to national offices.</p> <p>The IAR has provisions to capture the locations of records and if, and where, they move. This will allow SAS to have a fuller picture of whether new tracking processes need to be designed and implemented.</p>	<p>However, it is vitally important that staff correctly name records at time of creation for any system that does not impose this. Similarly, version control instructions are key. The Assessment Team acknowledge that the Scottish Ambulance Service have recognised this and issued Document Version Control and Naming Conventions guidance.</p> <p>It is important that any organisation can be confident that they can find a record when required and identify the correct version of that record. The Assessment Team acknowledge that the Scottish Ambulance Service are pursuing this objective. The IAR/O365 project will be a significant step forward.</p> <p>The O365 migration should greatly increase the control over document tracking although it will take some time for this to be universally applied in the authority. However, in the short term the Assessment Team</p>
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						<p>would expect the populated Information Asset Register to strengthen this element. (For comments regarding the O365 migration and the Information Asset Register see element 4 above).</p> <p>Until the <i>Information Asset Register</i> is completed and rolled-out this element remains at Amber (this element often matches element 4). The Assessment Team looks forward to updates in subsequent PURs.</p>
12. Competency Framework	G	G	G	<p>The Keeper commends this authority's aim to have a Records Management Champion within each directorate. The Keeper encourages this principle as likely to establish better engagement with the Plan in local business areas. He would be interested in receiving updates on this project.</p>	<p>The IAR Project includes the identification of Information Champions, to work closely with the Information Asset Owners and Deputy IAOs within their work areas. The Information Champions will be fundamental in disseminating records management, data protection, and information compliance guidance throughout the Service.</p> <p>Once the Information Champions have been identified, an assessment of their training needs will be undertaken in order to ensure they have the knowledge</p>	<p>Training in information governance for appropriate staff is of vital importance when implementing an authority's Records Management Plan.</p> <p>The Assessment Team notes the intention to pursue the use of local records management 'champions'. This is to be commended.</p>

					and skills needed to undertake this important role.	The authority has correctly identified the importance of staff training for these 'champions'.
13. Assessment and Review	G	G	G	The Scottish Ambulance Service demonstrates its compliance under this element by its scheduled review of the Plan by December 2016 and the reporting of findings at the quarterly meetings of the Audit Committee. The Keeper commends this approach and would be interested in receiving updates on any reviews concerning records management policies and guidelines.	The Records Management Officer was appointed in March 2019 and has undertaken an assessment and review of the implementation of the RMP, including this Progress Update Review, with an eye to the ongoing overall improvement of record keeping throughout the Service.  Actions continue to be monitored by the Audit Committee by means of a report presented at each quarterly meeting by the Head of Business Intelligence.	Thank you for the update regarding your role in the review process Elizabeth.
14. Shared Information	G	G	G	Updates required on any change	There have been some significant updates to policies and guidance on the sharing of information both within SAS and with other organisations. The <i>Data Transfer and Backup of Personal Information Policy</i> was reviewed and v2.0 was published to the staff intranet in January 2019.  SAS's registration with the ICO is renewed annually, with the last in June 2019. This registration	More evidence that policy and guidance documents are being reviewed appropriately.  The authority is registered as a data controller (see element 9): Z5417525  The Keeper is aware of the Scottish Information Sharing Toolkit (replacing SASPI) and

					<p>outlines who personal data may be shared with.</p> <p>A new version of the <i>Scottish Information Sharing Toolkit</i> was published in May 2019. This toolkit provides a framework for information sharing which SAS follows.</p> <p>The <i>Data Protection Notice v1.0</i> is publicly available on SAS's website and discusses the instances where personal information may be shared with other organisations. The <i>Patient Information &amp; Confidentiality Leaflet v2.0</i> is also available on SAS's website and details why information is collected on patients and how it may be used and shared.</p>	<p>acknowledges that the Service shares data under this framework.</p> <p>For data protection see element 9.</p>
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## 7. The Public Records (Scotland) Act Assessment Team's Summary

### Version

The progress update submission which has been assessed is the one received by the Assessment Team on 14<sup>th</sup> January 2020. The progress update was submitted by Elizabeth O'Brien, Records Management.

The progress update submission makes it clear that it is a submission for the **Scottish Ambulance Service**.

### PRSA Assessment Team's Summary

The Assessment Team has reviewed the Scottish Ambulance Service's Progress Update submission and agrees that the proper record management arrangements outlined by the fourteen 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 Ambulance Service 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.

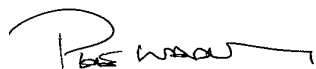
The Keeper cannot change the status of elements formally agreed under a voluntary submission, but he can use such submissions to indicate how he might now regard this status should the authority choose to resubmit its plan under section (5)(6) of the Act.

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

Based on the progress update assessment the Assessment Team considers that the Scottish Ambulance Service 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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**Pete Wadley**  
Public Records Officer