

The Public Records (Scotland) Act 2011

Caledonian Maritime Assets Ltd (registered number SC001854)

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

10 December 2019

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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 Caledonian Maritime Assets Ltd. The outcome of the assessment and relevant feedback can be found under sections 6 – 8.

4. Authority Background

Caledonian Maritime Assets Limited owns the ferries, ports and harbours and infrastructure necessary for ferry services serving the West coast of Scotland, the Clyde Estuary and the Northern Isles.

They are wholly owned by the Scottish Government with Scottish Ministers the sole shareholders. The Caledonian Maritime Assets Limited Board have an executive management team and supporting staff at headquarters in Port Glasgow.

<http://www.cmassets.co.uk/en/home.html>

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): Caledonian Maritime Assets Ltd

Element	Status of elements under agreed Plan, 2 Jun 2016	Status of evidence under agreed Plan, 02 Jun 2016	Progress assessment status, November 2019	Keeper's Report Comments on Authority's Plan, 2 Jun 2016	Self-assessment Update as submitted by the Authority since 2 Jun 2016	Progress Review Comment, November 2019
1. Senior Officer	G	G	G	Update required on any change	Chief Executive Officer, Mr Kevin Hobbs, in post from April 2016.	This update is noted with thanks.
2. Records Manager	G	G	G	Update required on any change	Victoria McAleese, Quality Governance & Data Officer, new role created as a dedicated staff resource for the purposes of information governance, in post from March 2018. Some training in records management undertaken as part of a data protection course in September 2018.	This new post is a welcome development, which will enable the authority to make greater progress in compliance and in implementing its RMP. As this is a statutory role, the job description and a supporting statement from the CEO has been provided to the Assessment Team which confirms that this post has operational responsibility for records management within the authority. The Assessment Team are pleased to confirm that if

						this were a statutory submission this would retain the Green status of this element.
3. Policy	G	G	G	Update required on any change	Minor updates since last submission.	The Assessment Team have been advised separately that a new policy is under development. This demonstrates that the authority is keeping its policy under review and the Assessment Team look forward to seeing the new policy in the next Progress Update Review.
4. Business Classification	A	G	A	<p>The new <i>Business Classification Scheme</i> shall be used to inform the roll-out of the authority's EDM project. CMAL also intends to create an <i>Information Asset Register</i> (IAR). The Keeper requests updates on these developments and the receipt of copies of documents including the IAR itself once available.</p> <p>The Keeper agrees this element of the Plan under</p>	<p>Information Asset Register updated in 2017. The IAR will be forwarded once staff vacancies have been filled. Currently hiring for Director of Port Infrastructure and Planning, we will update the register again once post is filled (end of 2019 early 2020.)</p> <p>The business classification has been used to map existing information stores (digital) to a new corporate filing structure.</p>	<p>The use of the BCS to assist with the transfer of records to a new filing structure is good practice and demonstrates the value in the longer term of a BCS that is fully implemented. The IAR is also a useful tool for managing the records and it is positive to hear about these developments.</p> <p>This element remains at Amber until the electronic</p>

				<p>Improvement Model conditions. This means that the authority has identified a gap in provision (the electronic records management solution is not fully rolled-out to staff) and have taken steps towards closing this gap. The Keeper's agreement is conditional on his being updated as the project progresses and as the improvements outlined in the Action Plan are implemented.</p>		<p>records management solution has been fully rolled out but there is good progress in this element.</p>
5. Retention Schedule	A	G	A	<p>The current <i>Retention Schedule</i> is being revised in line with legal requirements, best practice, and the authority's completion of the SharePoint development.</p> <p>The Keeper agrees this element of CMAL's Plan on an Improvement Model basis. This means that the authority has identified a gap in provision (the retention schedule is under review) and the Keeper</p>	<p>Our plan is to utilise our SharePoint environment for Electronic Document and Records Management with the ability to automate retention policies. Following a feasibility study, we were delivered options by our IT provider (Microtech) and the company that they contract to develop our SP site (Chess Digital). We have run into difficulty as the current environment is on premise and is limited to what we can do with its existing</p>	<p>There is clearly significant work taking place to identify and procure an electronic document and records management system. As yet, the review of the retention schedules has not been completed while work continues on developing an appropriate system and this element therefore remains at Amber. The Assessment Team would encourage continued progress with</p>

				<p>acknowledges that they are implementing processes to close this gap. The Keeper's agreement is conditional on his being alerted when the review of the retention schedule is complete and on his being provided with a copy of the new version as soon as practicable.</p>	<p>capability. The proposal summary provided to cloud enable our environment has costs of circa 250K. Our provider Microtech have been tasked to look at other options to reduce costs such as advise what we can do with Office 365. A new IT resource will be in place by Q1 of 2020, this role will provide dedicated onsite support 5 days per week. We would expect this new resource to drive forward the upgrade plans for the Sharepoint environment.</p> <p>Proposal summary, cloud roadmap and other supporting documentation will be made available under separate cover.</p> <p>We will also be visiting Scottish Parliament on 29 August 2019 to see their SharePoint EDRM in action with a view to better understand how we can improve our environment for information governance. The findings of this visit will be delivered to SMT, findings will</p>	<p>the review and implementation of the retention schedules in conjunction with these technical developments.</p>
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					<p>also be communicated to our IT provider who are currently reviewing best way forward for our systems.</p> <p>Hard copy being destroyed in accordance with the schedules set out for each business unit.</p>	
6. Destruction Arrangements	A	G	A	<p>CMAL is in the process of developing corporate procedures for the destruction of electronic records which will coincide with the completion of the Sharepoint project. The Keeper will require a copy of any such procedures when available.</p> <p>The Keeper can agree this element of CMAL's Plan on Improvement Model terms. This means that he acknowledges that CMAL have identified a gap in their records management provision (an authority-wide system for the destruction of electronic records is lacking), and have put</p>	<p>Please see section 5 above, we are investigating SharePoint, Office 365 etc. with this purpose in mind.</p> <p>Copy of the IT proposal documents to follow under separate cover.</p> <p>Destruction arrangements for hard copy are in place via contract with Redrock Haven. A certificate of destruction for each tranche of files destroyed will be with CMAL within 14 days of destruction.</p> <p>As per the detail in section 5, with the plan to move to the cloud, we are reviewing records management as a whole, consideration will be</p>	<p>Progress in this element is dependent on planned developments in other elements. The systematic destruction of electronic records in accordance with the retention schedules therefore will take some time to implement. It is important that good decisions are made rather than hurried decisions and the Assessment Team support continued, steady progress because this is part of a wider set of changes.</p>

				processes in place to close that gap. The Keeper's agreement will be conditional on receiving updates as the project progresses.	given to all records including our policy and procedures for hard copy files due for destruction.	
7. Archiving and Transfer	G	G	G	Update required on any change	Provision of archive offsite storage and scanning is managed under contract with Haven Products Ltd T/A Redrock. The contract is undertaken at Redrock's ISO9001 and ISO27001 accredited sites which also self-certify to BS10008 standards, all sites have robust QA protocols, contract delivered to 99% assurance levels.	Records of enduring value are to be deposited with NRS. The offsite storage and scanning is therefore assumed to be only for records with long-term business value and not records of enduring value. The Memorandum of Understanding is in place with NRS and the Assessment Team look forward to hearing if records of enduring value are being deposited in accordance with the MoU.
8. Information Security	G	G	G	The Keeper requests that he is sent a copy of the guidance being developed for security in "out-of-office" situations, when available.	In early 2018 with the help of our IT Managed Service Provider Microtech, we began working towards certification /implementation of Cyber Essentials, a Government backed scheme to help protect	The IT Policy along with the 2018 Cyber Essentials Plus certificate has been provided to the Assessment Team. The steps being taken to improve information

				<p>If a review and consolidation of information security procedures results in a new <i>Information Security Policy</i> the Keeper will need to be forwarded a copy.</p>	<p>organisations against the most common cyber threats. This certificate also allows us to demonstrate our commitment to cyber security and in September of 2018, following a two-day onsite audit of our IT systems by an external security consultant, we were awarded the more rigorous Cyber Essentials plus certification. We will continue to work with our IT service provider to ensure we not only comply with our certification but to also regularly review, audit and implement improvements to our IT security as and when enhancements become available or are required. Cyber Essentials annual reassessment scheduled for September 2019. A copy of our current certificate will be forwarded under separate cover.</p> <p>Additionally, 2 Factor Authentication is currently being rolled out for all staff as a further security measure.</p>	<p>security are welcome, building on previous good standards. It is notable that having achieved Green the authority is continuing to consider this element carefully and is alert to the importance of this work.</p>
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					<p>Two-step verification is a security process that forces the user to provide two different authentication factors to verify themselves to better protect both the user's credentials and the resources users can access. This will be implemented and complete for all staff in 2019.</p> <p>It Policy – Our IT policy was updated and circulated to staff in April 2019. The information and guidance set out in the policy is subject to continuous improvement to meet quality standards such as Cyber Essentials Plus and also to comply with data protection, GDPR and information governance guidelines. A copy of our current certificate will be forwarded under separate cover.</p>	
9. Data Protection	G	G	G	Update required on any change.	Two members of staff (Harbour Master and Quality, Governance and Data Officer) completed Certification in Managing Data Protection Compliance certificated by the	The commitment to data protection compliance is evident in the efforts to ensure that relevant staff have appropriate training for their roles.

					<p>SQA at SCQF 8, a further 9 employees also obtained the Certificate in Data Protection Compliance, also certificated by the SQA at SCQF level 6, in 2018. Further training/refresher to be undertaken in 2019 for all staff.</p> <p>The data protection policy has also been updated (copy to be forwarded under separate cover), as has the data processing agreement for those processing personal data on CMAL's behalf. CMAL has an outsourced DPO.</p>	<p>The updated data protection policy is comprehensive and commendably clear for use by staff.</p>
10. Business Continuity and Vital Records	A	G	A	<p>CMAL does not currently have a business continuity plan but has prioritised its development. The Keeper requires a copy of the <i>Continuity Plan</i> which is set for completion by May 2016.</p> <p>The Keeper agrees this element of CMAL's Plan under Improvement Model terms. This means that the authority has identified a gap in their records management</p>	<p>In April 2019 we developed a Business Continuity & Disaster Recovery Plan (draft) for CMAL, this will remain under annual review.</p> <p>Copy will be sent under separate cover.</p>	<p>The draft Disaster Plan has been provided. The Assessment Team would encourage the authority to consider vital records in more detail in the next iteration prior to formal approval. Records, whether hard copy or electronic could be damaged in any of the broad scenarios covered and mention of methods of protecting and</p>

				<p>provision (they will not have an approved <i>Business Continuity Plan</i> until later in the year) but have put processes in place to close that gap. The Keeper's agreement will be conditional on receiving updates as the project progresses.</p>		<p>recovering vital records in any format would be reassuring.</p> <p>This element remains Amber until a formal approved plan is submitted to the Keeper.</p>
11. Audit Trail	A	G	A	<p>The authority has identified the need to improve audit trail mechanisms and to assist in this they are expanding the functionality of the Sharepoint 2013 system they operate.</p> <p>The Keeper agrees this element of CMAL's Plan under Improvement Model terms. This means that CMAL have identified a gap in their records management provision (there is no business-wide system for tracking records), and have put processes in place to close that gap. The Keeper's agreement will be conditional on receiving</p>	<p>Please see section 5 with regards to where we are with our Sharepoint environment.</p>	<p>As also noted under elements 4, 5 and 6, progress in this element is dependent on the procurement and implementation of the authority's preferred option for an electronic document and records management system. These elements are necessarily linked and when the majority of the records are created electronically, it is sensible to concentrate efforts into finding a system that will provide all these elements. There is clearly good work in progress on this element</p>

				updates as the Sharepoint project progresses.		as in the other related elements.
12. Competency Framework	G	G	G	The Keeper welcomes updates on staff training activities such as the proposed Workshop Session and the inclusion of data protection training as part of the planned information governance training package.	Liz Taylor of TKM Consulting (Also our DPO) held GDPR & Records Management/Information Governance awareness training sessions for all staff on 12/03/18. Updates will be circulated to all staff by the Quality, Governance & Data Officer as and when necessary.	As noted under element 9, CMAL's commitment to supporting staff with training and development is commendable. Enabling staff to acquire formal qualifications as well as providing all staff with training shows that CMAL values its staff resources and understands the benefits to the authority of supporting professional development. This is best practice and a good example to other authorities.
13. Assessment and Review	G	G	G	The Keeper commends the authority's plans to undertake annual self-assessments and an audit of their Records Management Plan by the end of 2016. The Keeper requests that he is kept informed of these developments.	Now that the post of Quality, Governance & Data Officer has been created and filled there will be a dedicated annual review date of the PUR, this review will be submitted to the SMT for review/comment at the Annual Management Review for Quality	The Assessment Team welcome this PUR and the demonstrable on-going commitment to regular reviews of the Records Management Plan, as required by the Act.

					Management, PUR and updated as necessary.	
14. Shared Information	A	G	A	<p>Existing procedures will be reviewed and formalised through the implementation of a CMAL data sharing policy. The Keeper would like sight of the subsequent documentation.</p> <p>The Keeper agrees this element of CMAL's Plan under Improvement Model terms. This means that he acknowledges that the authority has identified a gap in their records management provision (they consider a single data sharing agreement would be a strong business tool) and have put processes in place to close that gap. The Keeper's agreement will be conditional on him being provided with updates as the project progresses.</p>	<p>Data Protection Agreements and privacy policies have been produced in 2018/19. Examples available on request.</p> <p>CMAL welcomed a new Procurement Manager in June 2019, we plan to review and purge existing files in the coming months. Recent internal audit (August 2019) audit has captured some opportunities for improvement, these will be shared with the Procurement Manager and reviewed and closed out in advance of our LRQA ISO 9001:2015 Quality Management Audit on 29 & 30 April 2020.</p> <p>Work continues to be undertaken with regards to information that is routinely shared (for example, with Calmac)</p>	<p>This update is noted with thanks. The main focus of this element is the management of data sharing with external organisations. The Keeper has requested documentation of the new policy once this is available and the Assessment Team would be pleased to have sight of this is due course.</p>

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 30 August 2019. The progress update was submitted by Victoria McAleese, Quality, Governance & Data Officer.

The progress update submission makes it clear that it is a submission for **Caledonian Maritime Assets Ltd.**

PRSA Assessment Team's Summary

The Assessment Team has reviewed **Caledonian Maritime Assets Ltd** '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

Caledonian Maritime Assets Ltd continues to take its records management obligations seriously and is working to bring all elements into full compliance. The appointment of the Quality, Governance and Data Officer is a very welcome step forward and the authority is to be commended for this decision which gives information governance a much higher profile and more appropriate resources within the organisation. This will enable CMAL to make good progress in every element in due course. The Assessment Team recognise that progress takes time and commend the commitment evident in the on-going work to identify and develop and appropriate EDRMS which will enable progress in elements 4, 5, 6 and 11.

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. At present, if this were a statutory submission it is likely that there would be no change to the status of the fourteen elements.

Where 'no change' has been recorded under the update on provision by the authority, the Assessment Team is happy to agree that these elements require no further action for the time being.

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

Based on the progress update assessment the Assessment Team considers that **Caledonian Maritime Assets Ltd** 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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Elspeth Reid
Public Records Officer