The Public Records (Scotland) Act 2011

Caledonian Maritime Assets Ltd (registered number SC001854)

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

11th January 2021

Contents

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 and the Clyde Estuary.

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.

Element	Status of elements under agreed Plan 02JUN16	Progress status 10DEC19	Progress status 21JAN21	Keeper's Report Comments on Authority's Plan 02JUN16	Self-assessment Update 06SEP19	Progress Review Comment 10DEC19	Self-assessment Update as submitted by the Authority since 10DEC19	Progress Review Comment 21JAN21
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.	**No change as of September 2020.**	No immediate action required. Update required on any future change.
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.	**No change as of September 2020.**	No immediate action required. Update required on any future change.
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.	**Our Records Management policy has been reviewed and updated. We will review on an annual basis going forward in line with submitting our PUR return. We would expect to see further updates to the policy as we progress the EDRMS project. Will be submitted under separate cover.**	In their original submission CMAL committed to keeping their information governance policies and guidance documents under review and the Assessment Team acknowledges that this is being done. The Assessment Team notes that new Records Management Policy is available and acknowledges that a copy has been supplied. They will store this in order that they may keep the CMAL submission up-to-date.

A31541635 - NRS - Public Records (Scotland) Act (PRSA) - Caledonian Maritime Assets - Progress Update Review (PUR) - 2020 Final Report - 11 January 2021

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	A	**A**	**A**				
4. Business Classification				The new *Business Classification Scheme* shall be used to inform the roll-out of the authority's EDM project. CMAL also intends to create an *Information Asset Register* (IAR). The Keeper requests updates on these developments and the receipt of copies of documents including the IAR itself once available. The Keeper agrees this element of the Plan under 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.	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.) The business classification has been used to map existing information stores (digital) to a new corporate filing structure.	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. This element remains at Amber until the electronic records management solution has been fully rolled out but there is good progress in this element.	**On 01 July 2020 our new IT Manager joined CMAL on a permanent basis. Previously working for our IT support company, he has been instrumental in helping us to assess the way forward for our EDRMS project, we have also engaged the consultancy services of Rob Bath and colleagues from Intelogy and experts from Open Text to drive the project forward. After many months of comparison & evaluation of products to provide a solution for Records Management, Asset Management and to upgrade, as well as move our SharePoint site to the cloud, we have a formal recommendation on the way forward. It was imperative that we combined the projects as any new system will need to comply with all elements of governance, the records management plan as well as enable CMAL to comply with data protection law and FOISA. The current proposal has been approved by our Senior Management Team, September 2020. The proposal will be brought to the CMAL Board for review/approval on 20/11/20. Technical review/IT proposal to follow under separate cover. This details how CMAL will progress each element of the plan including the business classification.** **To clarify, we continue to engage our IT support company Microtech under the existing contract. The new IT Manager role was created to enhance our in house services as opposed to replace the IT Managed Services contract with our current provider. The managed services contract with Microtech is currently being extended for a further 4 years.** **We have a number of IT initiatives currently underway for our Records, invoicing systems etc. all projects will be reviewed by the Data Protection Officer and the Quality Governance Officer to ensure compliance. The IT policy will be updated as these progress and will be scooped up in the EDRMS project where required.**	Although the formal approval from the CMAL Board has not yet been granted, the Assessment Team understand that CMAL are likely to be moving their records management provision to O365 and have engaged, firstly with an industry expert and secondly with a third-party supplier to manage that transition. The Keeper thanks CMAL for sharing their *SharePoint Assets and Records Comparison*. This is a very interesting document which we will keep for reference within the PRSA Team. We will not share this document and it will be kept within a restricted area of our eDRM. Generally a O365 solution is bound to be incremental and take some time to bed-in properly. The Assessment Team remind CMAL of the importance of appropriate polices, governance and staff training in making this major project a success. The Assessment Team looks forward to updates in subsequent PURs. This element remains at Amber while this work is ongoing.

| 5. Retention Schedule | A | A | A | The current *Retention Schedule* is being revised in line with legal requirements, best practice, and the authority's completion of the SharePoint development.

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 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. | 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 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.

Proposal summary, cloud roadmap and other supporting documentation will be made available under separate cover.

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, | 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 the review and implementation of the retention schedules in conjunction with these technical developments. | **As with the above a review of the retention schedules will be a part of the overall EDRMS project. The Quality Governance & Data Officer will review with Data Protection officer and IT Manager to ensure retention schedules are implemented as part of the ongoing project. Retention documentation assessment was carried out with Opentext & Intelogy.**

CMAL has developed some fairly comprehensive schedules, many of which are completely bespoke given the unique role it has as a public sector organisation. These will be reviewed prior to being integrated into any solution and work has started to look at ways to use labels within SharePoint for achieving retention/destruction. | **See element 4 above.**

The allocation of retention decisions to record types in O365 seems to have been well considered by the Council.

This is a very interesting area of development in the records managements sector at the moment and the PRSA Team would be interested to engage with the CMAL on this issue.

The PUR explains activities around retention that the authority will be undertaking in the next few months. This element remains at Amber while this work is pursued. The Assessment Team acknowledges that these activities are part of a larger improvement plan.

The Assessment Team looks forward to updates in subsequent PURs. |

					findings will also be communicated to our IT provider who are currently reviewing best way forward for our systems. Hard copy being destroyed in accordance with the schedules set out for each business unit.			
6. Destruction Arrangements	**A**	**A**	**A**	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. 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 processes in place to close that gap. The Keeper's agreement will be conditional on receiving updates as the project progresses.	Please see section 5 above, we are investigating SharePoint, Office 365 etc. with this purpose in mind. Copy of the IT proposal documents to follow under separate cover. 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. 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 given to all records including our policy and procedures for hard copy files due for destruction.	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.	**As part of the EDRMS project covered above our destruction arrangements will be reviewed.**	See elements 4 and 5 above for comments regarding O365. The ability to apply retention decisions and the recording of those actions is obviously of prime importance to the authority's records management provision. The Assessment Team looks forward to updates in subsequent PURs. This element remains at Amber while the transition to the new solution progresses.
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	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	**No change as of September 2020.**	No immediate action required. Update required on any future change.

					delivered to 99% assurance levels.	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. If a review and consolidation of information security procedures results in a new *Information Security Policy* the Keeper will need to be forwarded a copy.	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 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. Additionally, 2 Factor Authentication is currently being rolled out for all staff as a further	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 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.	**We are in the process of having our Cyber Essentials & Cyber Essentials Plus Certification audited for 2020-2021. Our IT Manager is currently working with the external auditor to progress. We take our commitment to information security very seriously, having a dedicated in-house IT Manager at CMAL can only help enhance our commitment to our IT Security and IT processes/policies as a whole.** **A copy of our updated IT policy will be forwarded under separate cover. A copy of the 20-21 Cyber Essentials Plus Certificate will be forwarded under separate cover (pls note this will be sent to the Assessment Team after 30/09).**	In their original submission CMAL committed to keeping their information governance policies and guidance documents under review and the Assessment Team acknowledges that this is being done under this element as well as elsewhere. Obviously, information security is an area of records management provision that needs constant review and it is good to learn that this appears to be taken very seriously in CMAL. The appointment of a dedicated staff member to this work is welcome. The Assessment Team notes that new IT User Policy is available (September 2020) and acknowledges that a copy has been supplied. They will store this in order that they may keep the CMAL submission up-to-date. CMAL have recently invested in a new automated door entry system to the main office. This was installed to improve security for the building, IT Systems and records.

					security measure. 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. 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.			
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 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. The data protection policy has also been updated (copy to be forwarded under separate cover), as has the data processing	The commitment to data protection compliance is evident in the efforts to ensure that relevant staff have appropriate training for their roles. The updated data protection policy is comprehensive and commendably clear for use by staff.	**On 11/03/20 our DPO Liz Taylor delivered a 1 day Certificate in Data Compliance. There were 12 CMAL staff in attendance. Unfortunately, due to the Covid pandemic we have not yet been able to have the staff sit the exam, we will schedule a refresher and the exam when things have returned to normal working practice (although all staff attended the full day and completed the course content.)** **We have scheduled a GDPR Compliance course via Microsoft Teams on 21 & 22 October 2020 for some staff who have missed previous sessions.** **The Quality Governance & Data Officer and DPO produce papers for each CMAL Board Meeting to provide an update on any outstanding issues or**	As with all other Scottish public authorities Caledonian Maritime Assets Ltd have been required to review and update their data protection procedures in light of the 2018 legislation. The Assessment Team acknowledges that the public facing Caledonian Maritime Assets website has been updated appropriately. For example at: https://www.cmassets.co.uk/wp-content/uploads/2019/09/Privacy-notice-stakeholder-engagement.pdf There is considerable evidence of relevant staff training here. As under element 12, Caledonian Maritime Assets seem to have engaged with an information governance training programme which was noted at the last PUR. It is welcome that this seems to have become a permanent feature of records management provision in the authority.

				agreement for those processing personal data on CMAL's behalf. CMAL has an outsourced DPO.		recommendations for data protection. **CMAL remain committed to compliance of General Data Protection Regulation 2016/279 (GDPR), Data Protection Act 2018 (DPA 2018), the Privacy and Electronic Communication Regulations 2003 (PECR), and any other associated legislation.** **There are recurring meetings with our DPO every 2 weeks, and we are regularly in touch via email and phone as required.**	
10. Business Continuity and Vital Records	A	A	A	CMAL does not currently have a business continuity plan but has prioritised its development. The Keeper requires a copy of the *Continuity Plan* which is set for completion by May 2016. 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 provision (they will not have an approved *Business Continuity Plan* 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.	In April 2019 we developed a Business Continuity & Disaster Recovery Plan (draft) for CMAL, this will remain under annual review. Copy will be sent under separate cover.	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 recovering vital records in any format would be reassuring. This element remains Amber until a formal approved plan is submitted to the Keeper.	**The CMAL Team have been working from home since 17/03/20 with the Health, Safety & Environmental Manager being instrumental in keeping staff updated and informed of any information and guidance being issued. Our IT Manager was working very hard to ensure our ability to work from home in advance of the office closing, we are happy to say our IT systems have proved resilient, all employees have been equipped to undertake their duties from home. We have relied heavily on Microsoft Teams to keep in touch with each other, to host meetings, conduct external audits, provide training etc. Our Sharepoint platform site has been key to hosting our Quality Management site, our Engineering Project sites, our Finance, invoicing, PO and Procurement sites. This site has also been used for employee communications, Health, Safety & Environmental communications and updates, risk assessments etc. Our Operational & Safety Management Site has continued to operate via sharepoint and all teams including our Vessels Department & Corporate Services Team rely heavily on the site for storage of records, drawings, reports, documents, photographs, PR and communications. The site is crucial for our work therefore it is hosted in an on premise tenancy within a datacentre in Dundee and setup in a failover cluster with our backup datacentre in Aberdeen. The servers themselves are backed up using**	The Assessment Team thanks CMAL for the very detailed description of their response to the Covid 19 emergency. Generally, across the public sector the ability to work from home has been fully supported by digital records systems. The CMAL information team might be interested to take part in an online survey lead by the PRSA Team where we are trying to determine the effect of the Covid crisis on record keeping. You will find it at: https://www.surveymonkey.co.uk/r/CovidImpactScotsRM The update on physical security has been noted under element 8 above. At the time of the last PUR (September 2019) CMAL provided a disaster plan in draft format. The adoption of this procedural document, coupled with the real-life testing of the emergency record access process this year might (if this was a formal re-submission) result in this element of the Plan turning from Amber to Green. If the Disaster Plan remains draft, this element remains Amber.

							barracuda appliance backups that are held at a third secure site and are accessible via a web portal if needed. CMAL have recently invested in a new automated door entry system to the main office post Covid. This was installed to improve security for the building, our IT Systems and our records and documents. We (SMT) plan to review and identify best practice/lessons learnt from working remotely and share with the wider CMAL team. Our Board have been regularly updated on all significant actions taken to allow staff to work from home.	
11. Audit Trail	A	A	A	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. 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 updates as the SharePoint project progresses.	Please see section 5 with regards to where we are with our SharePoint environment.	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 as in the other related elements.	As per above we are progressing our EDRMS project, technical recommendation will be presented at the next board meeting in November for approval. Significant budget being sought for approval. We have now rolled out a CMAL Change Control Policy and Change Record Form. The aim of this document is to put in place procedures that: • **Minimise the risk of damage to information systems, data and business operations that may come from changes to the organisation's computer systems;** • **Ensure the impact of any proposed information system change on all areas of the organisation is identified;** • **Ensure that all legal requirements including but not limited to those required by records management and data protection legislation are incorporated into the change.** It covers procedures to be adopted when any change is made to IT systems, whether it is the	See elements 4 and 5 above for comments regarding O365. 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. The O365 should provide automatic version control, but staff will still be required to name records in a consistent way so that the search functionality can be properly applied. The Assessment Team would expect to see a Naming Convention Policy imposed alongside the new structure. The Assessment Team thanks CMAL for the update regarding the change control procedures. This sort of oversight during a digital record keeping transition is commended. Obviously, the ability to track and retrieve records depends on the functionality of the systems in which these records are held. As CMAL is currently evolving its record keeping solution, this element remains at Amber.

							introduction of a new system or change to an existing system, in the following areas: • **Operating systems** • **Application systems** • **Hardware** **The policy was required to provide a clear audit trail of any changes/upgrades to our systems.** **A copy of the policy will be sent under separate cover.**	
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.	**CMAL remain committed to staff training and competency, there have been many staff undertaking a wide range of training throughout the year. There is a dedicated annual budget for training and CMAL honour payments for professional subscriptions, the undertaking of Continuing Professional Development, industry conferences, seminars, workshops, chartership fees etc.** **We have also renewed out Corporate membership of IRMS and our IT Manager has worked closely with Rob Bath, Digital Director at IRMS on our Sharepoint Asset and Records project.**	The Keeper expects staff creating, or otherwise processing records, to be appropriately trained and supported. As noted against element 9, staff training appears to be pursued appropriately in Caledonian Maritime Assets and has consistently updated the Keeper as he requested in his original 2016 agreement. The use of consultants (for example Rob Bath or Liz Taylor) to advise on particular aspects of information governance is noted. This represents a clear commitment to provide resource to the authority's information assets to the benefit of the whole business. This commitment would be strongly commended by the Keeper.
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 Management, PUR and updated as necessary.	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.	**CMAL remain committed to undertaking the annual PUR and have also had some data protection elements included in our internal/external audit programmes over the past 12 months.**	Section 1(5)(i)(a) of the Act says that an authority must keep its RMP under review. The authority's participation in the PUR process in 2019 and 2020 demonstrates a commitment to reviewing its RMP. The Assessment Team notes the particular review of data protection processes. This further supports the Keeper's opinion that CMAL has arrangements in place to properly review their RMP and other key records management policies.
	A	A	G	Existing procedures will be reviewed and formalised	Data Protection Agreements and privacy	This update is noted with thanks. The main	**Procedures for managing requests falling with the scope of FOI have**	It appears from the text of this PUR that a Data Sharing Agreement exists. This was an

| 14. Shared Information | | | | through the implementation of a CMAL data sharing policy. The Keeper would like sight of the subsequent documentation.

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. | policies have been produced in 2018/19. Examples available on request.

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.

Work continues to be undertaken with regards to information that is routinely shared (for example, with Calmac) | 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. | **been recently revised and all contracts have/are being reviewed to ensure they have appropriate clauses for data protection and FOI.**

A copy of our revised data processing agreement will be sent under separate cover.

We have undertaken recent work to establish what was being transferred out with the EEA with some working practices changed (CMAL newsletter platform) as a result of the Schrems II decision. | objective mentioned by CMAL in their original submission and noted by the Keeper.
If this is the case, and if it appropriately addresses information governance issues, it is likely that this element of the *Plan* would turn from Amber to Green in a formal re-submission. |

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 September 2020. 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**.

The Assessment Team has reviewed Caledonian Maritime Assets' 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

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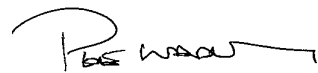
The Keeper cannot change the status of elements formally agreed under a voluntary submission, but he can use such submissions to indicate how he might now regard this status should the authority choose to resubmit its plan under section (5)(6) of the Act.

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

Based on the progress update assessment the Assessment Team considers that Caledonian Maritime Assets 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