

The Public Records (Scotland) Act 2011

Scottish Fire and Rescue Service

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

29 October 2019

Contents

1. The Public Records (Scotland) Act 2011.....	3
2. Progress Update Review (PUR) Mechanism.....	4
3. Executive Summary.....	5
4. Authority Background.....	5
5. Assessment Process.....	5-6
6. Records Management Plan Elements Checklist and PUR Assessment.....	7-39
7. The Public Records (Scotland) Act Assessment Team's Summary.....	39-40
8. The Public Records (Scotland) Act Assessment Team's Evaluation.....	41

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

4. Authority Background

The Scottish Fire and Rescue Service was established on 1st April 2013, bringing together Scotland's previous eight fire and rescue services and the Scottish Fire Services College. The main purpose of the Scottish Fire and Rescue Service is to work in partnership with communities, the public and private sectors and other agencies on fire safety, prevention, protection and emergency response to improve the safety and wellbeing of people throughout Scotland.

The Scottish Government appointed a Chair and 11 other members to serve as members of the SFRS Board. The Act allows for the appointment of up to a total of 15 members. The Board provides strategic direction, support and guidance to the SFRS ensuring that it operates effectively and that the Scottish Government's priorities are implemented. Board members are personally and corporately accountable for the Board's actions and decisions. They also scrutinise plans and proposals and hold the Chief Officer Martin Blunden and Strategic Leadership Team (SLT) to account.

Based in Cambuslang, the SFRS Strategic Leadership Team (SLT) is responsible for delivering the Scottish Fire and Rescue Service on behalf of the Board. The SLT is headed up by the Chief Officer.

<http://www.firescotland.gov.uk>

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.
---	---	---	---	---	--

Progress Update Review (PUR): Scottish Fire and Rescue Service

Element	Status of elements under agreed Plan 08DEC17	Status of evidence under agreed Plan 08DEC17	Progress assessment status 29OCT19	Keeper's Report Comments on Authority's Plan 08DEC17	Self-assessment Update as submitted by Authority since 08DEC17	Progress Review Comment 29OCT19
1. Senior Officer	G	G	G	Update required on any change	<p>Following agreement by the Keeper, the SFRS RMP was submitted to the Strategic Leadership Team (SLT) and approved on 15 January 2018 to be adopted and implemented throughout SFRS. It has been uploaded to the SFRS Intranet for staff reference and its issue announced to all staff. It has also been uploaded to the SFRS website for public reference.</p> <p>NEW EVIDENCE:</p> <p>E004 SLT covering report for approval of RMP, 15/01/2018 E005 SLT minutes showing approval of RMP, 15/01/2018 E157 Intranet News Item re Issue of RMP, 03/05/2018 E158 Intranet screenshot – RMP available to staff E162 SFRS website – RMP available to public</p>	<p>There has been no change to the Senior Officer for SFRS.</p> <p>The evidence submitted demonstrates that the Senior Officer, Mark MacAteer, (SIRO and Director of Strategic Planning, Performance and Communications) is taking the lead in ensuring that the agreed RMP is appropriately supported and implemented throughout SFRS. SFRS have published the RMP on their website which the Keeper encourages.</p>

2. Records Manager	G	G	G	Update required on any change	No change.	No immediate action required. Update required on any future change.
3. Policy	G	G	G	Update required on any change	<p>The SFRS Records Management Policy has recently been reviewed and updated by the Records Management Officer. The current version has been uploaded to the SFRS Intranet and also to the SFRS website. It will be reviewed again in 2 years' time.</p> <p>UPDATED EVIDENCE:</p> <p>E003 Records Management Policy</p>	SFRS are maintaining a regular review of their Records Management Policy, which is best practice. It is helpful to see that this policy is also made publicly available, alongside the RMP.
4. Business Classification	A	G	A	<p>Evidence has been shared with the Keeper to demonstrate commitment to pursue a single <i>Business Classification Scheme</i> for SFRS.</p> <p>However this is not yet ready for implementation and: "The scheme has not been imposed on [the] shared sites at this stage." (<i>Plan</i> page 17)</p> <p>Please see comments in element 5, below, for more about 'adding value' to the <i>Classification Scheme</i></p>	<p>SFRS is currently rolling out the Modern Desktop project, to upgrade all operating systems to Windows 10 and to introduce Office 365. The ICT department issue regular Updates on progress.</p> <p>SFRS commissioned a SharePoint consultant to analyse the existing environment and to make recommendations for the proposed environment. Information Governance have reminded ICT of the need to involve IG in the development and implementation of the new SharePoint environment.</p> <p>The File Classification Scheme will be reviewed and developed for implementation within the new SharePoint Online site environment, to enable staff to better manage their records.</p>	<p>The PRSA Team note that there are a number of changes in technology and formats in progress. The Business Classification Scheme should inform the use of this new technology. The input of records managers is essential to ensure that the use of technology supports efficient and effective management of information which underpins the operational and strategic aims of SFRS.</p> <p>The Sharepoint analysis documents indicate that the</p>

				<p>by, for example, combining with the <i>Retention Schedule</i>.</p> <p>N.B. The development of this element is tied in to the development of a central service-wide records management structure as explained above. This will also effect elements 5, 6 and 11 below.</p> <p>The Keeper is able to agree this element of Scottish Fire and Rescue's plan under 'improvement model' terms. This means that the authority has identified a gap in their records management provision (use of legacy drives and an eRDM not yet implemented) and have put processes in place to close that gap – see above. The Keeper's agreement is conditional on his being updated on the progress of this project when requested. SFRS have committed to doing this in the introduction to the <i>Plan</i> (page 8).</p>	<p>An Information Asset Register has also been created to ensure compliance with GDPR (see Element 9) – this may be combined or linked with the File Classification Scheme and/or Records Retention Schedule in future.</p> <p>NEW EVIDENCE:</p> <p>E183 SFRS ICT Update, Modern Desktop, February 2019 E184 SFRS SharePoint Analysis, supplied by ICT, 17/07/2018 E185 SFRS SharePoint Governance Plan, supplied by ICT, 17/07/2018 E186 SFRS SharePoint Delivery Estimates, supplied by ICT, 17/07/2018 E187 SFRS SharePoint Migration Plan, supplied by ICT, 17/07/2018 E188 SFRS SharePoint High Level Sites, supplied by ICT, 17/07/2018</p> <p>UPDATE SEPT 2019:</p> <p>The ICT Project Manager has recently provided Information Governance with an update regarding the SharePoint project – 'The current position is that SFRS ICT expect to go out to market next financial year for a Corporate Document Management Solution that would connect into Office 265 and SharePoint. The expectation is that Information Governance would feed into the requirements for the solution and the options appraisal.'</p> <p>When registration opens, the Records Management Officer will register to attend</p>	<p>hubs and sites are designed to reflect the organisational structure and geographic dispersal of SFRS staff. While this is a business decision, it does present a risk that similar record types could be treated differently by staff in different hubs or sites. Development of content types that reflect the File Classification Scheme will therefore assist staff to apply common retention and disposal policies and procedures across the whole organisation. The update provided in September 2019 provides reassurance that Information Governance will be involved in this implementation.</p> <p>It is appropriate and sensible to use the Information Asset Register to inform and develop the proposed File Classification Scheme and the Records Retention Schedule. The PRSA Assessment Team note that the Information Asset</p>
--	--	--	--	---	---	--

					the NRS SharePoint consultation event mentioned in the Team's comments, which she understands is now scheduled for October 2019.	Register has not been used to develop the SharePoint structure. It may therefore be helpful to use the Information Asset Register to inform the content type development. SFRS may find it beneficial to attend the NRS SharePoint consultation event in October 2019.
5. Retention Schedule	A	G	A	<p>N.B. The development of this element is tied in to the development of a central service-wide records management structure as explained above (see element 4). This will also effect elements 6 and 11 below.</p> <p>However, the <i>Interim Retention Schedule</i> under which SFRS is operating does not cover all record types in the business. The authority is currently developing a full version by providing business units with a template/feedback form to complete (this has been shared with the Keeper). The Keeper</p>	<p>Very little feedback was received from departments after the issue of the Interim Retention Schedule.</p> <p>Responses received for the Information Asset Register (see Element 9) will be used to further populate the Interim Schedule. Then, at a later date, staff will be reminded that feedback is still required.</p> <p>The Records Management Officer will ensure that any references within SFRS policies, procedures, etc. to record types and their retention periods will be captured in the Schedule.</p> <p>The RMO also deals with ad hoc retention queries, updating the Schedule as and when required. For example, she has recently dealt with enquiries regarding: Community Safety Engagement records (safeguarding adults, safeguarding children, firesetter intervention and re-education); water planning correspondence and hydrant inspection records; and absence e-forms.</p>	<p>This update, required by the Keeper, is noted, with thanks.</p> <p>The development and implementation of a retention schedule is on-going and the PRSA team would encourage continuing engagement with operational teams in order to identify the most appropriate retention periods for their records. This will help SFRS staff to find records when they need them and will protect the SFRS from the reputational and financial risks of destroying records too early and or retaining records for too long.</p>

				<p>commends the involvement of local business areas in the design of the <i>Retention Schedule</i> as liable to create a stronger business tool.</p> <p>He notes also that SFRS have recognised that a combined <i>Business Classification Scheme/Retention Schedule</i> would be a stronger business tool than two separate documents. The Keeper agrees and notes that if 'extra' information as mentioned above is added then the basics of an Information Asset Register could be created which might be a stronger tool yet...</p> <p>The Keeper is able to agree this element of Scottish Fire and Rescue's plan under 'improvement model' terms. This means that the authority has identified a gap in their records management provision (currently running on an incomplete 'interim'</p>	<p>NEW EVIDENCE:</p> <p>E213 Emails re Water Planning Records Retention, 08/03/2019</p>	<p>The structure of Sharepoint hubs and sites is high level and does not readily correspond to the functions or records identified in the retention schedule, or to the Information Asset Register. As noted in Element 4, the development of content types for SharePoint should reflect the information compiled in the Records Retention Schedule, the File Classification Scheme and the Information Asset Register.</p>
--	--	--	--	--	---	--

				retention schedule) and have put processes in place to close that gap – see above. The Keeper’s agreement is conditional on his being updated on the progress of this project when requested. SFRS have committed to doing this in the introduction to the <i>Plan</i> (page 8).		
6. Destruction Arrangements	A	G	A	<p>N.B. The development of this element is tied in to the development of a central service-wide records management structure as explained in element 4. This will also affect elements 5, and 11.</p> <p>The <i>Plan</i> states (page 31): “SFRS will investigate how to develop and implement records destruction arrangements for records in all formats, especially all electronic formats and locations, e.g. e-mail, recycle bins, folders/drives of employees who have left, etc.” The Keeper notes that, until the Service can be confident</p>	<p>SFRS have awarded their Soft Facilities Management contract to Sodexo, who sub-contract out confidential waste disposal to Shred-it. The contract went live on 1 March 2019.</p> <p>The Records Management Officer and Information Governance Manager have worked with the Soft FM team and Sodexo to ensure the arrangements put in place meet our needs and comply with PRSA requirements. They are working together to ensure that a robust internal process is put in place and the RMO will develop a Records Destruction Procedure to provide guidance to staff.</p> <p>The RMO and IGM have agreed that, for the time being, a simplified Records Destruction Form will be developed (i.e. for destruction only, not the previously drafted Records Disposal Form, including transfer/archiving details).</p>	<p>It is positive to see good progress being made in ensuring that there is appropriate confidential destruction of records in all formats. The methods of destruction appear appropriate. The decisions on what should be destroyed and when, however, must rely on the development of a retention schedule which covers all record types and which is routinely referred to before records are destroyed. The draft simplified Records Destruction Form acknowledges that not all records are covered by the Retention Schedule and sensibly reminds staff to</p>

				<p>that records are disposed of according to their retention decisions, this issue remains a 'risk'.</p> <p>The controlled and systematic deletion of records held on shared drives is a particular area of difficulty for many public authorities and the Keeper welcomes the acknowledgement of this. He agrees that the suggested improvements the Authority is considering are a reasonable response to these difficulties. Therefore, the Keeper may be able to accept these statements as grounds for agreeing this element under improvement model terms if other destruction issues can be settled, particularly regarding evidence around the retention of back-up copies (see below).</p> <p><i>The Records Management Policy</i></p>	<p>ICT confirmed the arrangements for destruction of electronic records to the Soft FM Manager. The RMO will include details for electronic records destruction in the Form and Procedure.</p> <p>NEW EVIDENCE:</p> <p>E029 Records Destruction Form (draft) E189 Intranet screenshot – Soft FM Services, 08/03/2019 E190 Intranet News Item – Changes to Soft FM Services, including confidential waste, 15/02/2019 E191 Emails re Electronic Waste Disposal, 18/01/2019</p>	<p>contact the Records Management Officer prior to disposal of these records. This should make it easier for the records to be discovered and included in the Schedule. It may also assist in ensuring that records of enduring value are discovered and transferred to an appropriate archives (see Element 7).</p> <p>The PRSA Team look forward to receiving information in the next PUR about the arrangements for secure destruction of electronic records including destruction of back-ups in accordance with the Records Retention Schedule.</p>
--	--	--	--	---	--	--

				<p>makes it clear that SFRS understand the importance of logging the destruction of records for future reference. The Keeper has seen a draft copy of the disposal form. The Keeper commends this. However, it is noted that “The Disposal Form will not be issued for staff to use until a national solution for records destruction is in place; until then, staff will continue to use local, legacy arrangements for records destruction.” (<i>Plan</i> page 28).</p> <p>The <i>Records Management Policy</i> (page 15) and the <i>Plan</i> (page 27) both refer to SFRS having a <i>Records Destruction Arrangements</i> procedure. The Keeper requires to be provided with this guidance document as soon as it is available.</p> <p>The Keeper is able to agree this element of Scottish Fire and Rescue’s plan under</p>		
--	--	--	--	--	--	--

				<p>'improvement model' terms. This means that the authority has identified a gap in their records management provision (formal destruction processes for electronic records are not yet fully embedded) and have put processes in place to close that gap – see above. The Keeper's agreement is conditional on his being updated on the progress of this project when requested.</p>		
7. Archiving and Transfer	A	G	A	<p>The <i>Records Management Policy</i> (page 15) and the <i>Plan</i> (page 35) both refer to SFRS having a <i>Records Transfer Arrangements</i> procedure in the future. The Keeper requires to be provided with this guidance document as soon as it is available.</p> <p>The Keeper is able to agree this element of Scottish Fire and Rescue's plan under 'improvement model' terms. This means that the authority has identified a gap in their</p>	<p>No progress made.</p> <p>As suggested by NRS staff, once the File Classification Scheme is implemented in the new SharePoint environment, the Records Management Officer will contact the NRS again to work to identify SFRS records suitable for transfer to NRS and to develop a mechanism for the transfer of these records in future.</p> <p>In time, a full Records Disposal Form and Register will have the facility to record transfers.</p> <p>UPDATE SEPT 2019:</p> <p>As per NRS suggestion, SFRS will add a general policy statement supporting the</p>	<p>It is important that mechanisms are put in place to ensure that records of enduring value are transferred to an appropriate archives. The development of robust mechanisms for the transfer of digital records to NRS should be addressed as soon as practicable. Digital records are vulnerable to bit-loss, obsolescence or corruption of hardware or software if they are not transferred into a secure digital preservation system within five years of creation.</p>

				<p>records management provision (no formal MOU with an appropriate archive) and have put processes in place to close that gap – see above. The Keeper’s agreement is conditional on his being updated on the progress of this project when requested. SFRS have committed to doing this in the introduction to the <i>Plan</i> (page 8) and to supply the MOU (page 37).</p>	<p>transfer of legacy services’ historical records to archives within Element 7 of the RMP.</p> <p>In the section, ‘Transfer to public archive’, we will add the statement, ‘Many of the paper records of the 8 legacy fire and rescue services have been transferred to appropriate local authority archives and work continues to ensure that any remaining records are identified and transferred, as appropriate.’</p>	<p>Many of the paper archival records of the predecessors of the SFRS are safely and appropriately deposited in the archives services of local Councils. The PRSA team commend this approach and welcome the intention to add the statement supporting these arrangements for the records of the former fire services before 2013, as explained in the September 2019 update.</p>
8. Information Security	G	G	G	<p>Update required on any change</p>	<p>Although this element was agreed as ‘green’, given the introduction of GDPR, a lot of progress has been made regarding Information Security, so it was felt appropriate to provide an update and new/amended evidence to indicate this.</p> <p>The Information Governance Manager has developed a business case to be presented to the SLT to seek additional secure email licences.</p> <p>The Information Security Officer has:</p> <ul style="list-style-type: none"> produced guidance on the secure email system which has been issued to staff; developed new ICO posters for distribution; 	<p>These updates and evidence are noted with thanks. It is clear that the SFRS takes the issue of information security very seriously and continues to develop useful tools to ensure that staff are aware of the risks and their responsibilities.</p> <p>The evidence provided overlaps with the requirements for Element 9 so comments here should be read in conjunction with the comments for Element 9.</p>

					<ul style="list-style-type: none"> • developed a presentation for inductions on GDPR, information sharing, etc.; • launched a mandatory Data Protection and Information Security e-learning package for all personnel within SFRS (see Element 14); • developed a draft Data Breach Policy to ensure a Service-wide response to any reported data breach incidents; • developed a draft Government Security Classifications Policy to ensure the appropriate level of protection is applied to all information. <p>NEW EVIDENCE:</p> <p>E196 Business Case to SLT re Additional Secure Email Licences, 19/12/2018 E197 GDPR Think Check Share poster E198 GDPR Share It Appropriately poster E199 GDPR Think Privacy poster E200 Information Governance Presentation for Rural Retained Personnel Induction E201 Data Breach Policy (draft) (superseded in Sep 2019) E202 Government Security Classifications Policy (draft) E216 Emails re Support Staff Induction Mandatory Learning, 26/02/2019</p> <p>UPDATED EVIDENCE:</p> <p>E057 Secure Email User Guide</p> <p>UPDATE SEPT 2019:</p>	<p>The draft Data Breach policy was seen by the Assessment Team and while it was very good, the Team commented that it relied on quite a lot of legal language which might not have been easily understood by all members of staff. The approved Personal Data Breach Procedure, supplied in September 2019, was clearer with less legal language. SFRS have also made use of ICO posters to make this clearer to staff. The forms in use should assist staff in following the procedures which support this policy.</p> <p>The PowerPoint presentation for rural retained personnel provided as evidence is thorough and clear, covering both information security and data protection issues. The use of the ICO posters within the PowerPoint and separately, should serve as useful reminders of the contents of the PowerPoint.</p>
--	--	--	--	--	---	--

					<p>The draft Data Breach Policy was renamed the Personal Data Breach Procedure, approved by the Corporate Assurance Board * on 18/04/2019 to go out for consultation, authorised by the Director of Strategic Planning, Performance and Communications and issued to staff on 29 July 2019. The Procedure, along with its accompanying forms, Personal Data Breach Incident Report Form and Timeline of Personal Data Breach Incident, were uploaded to the SFRS Intranet and their issue announced to staff.</p> <p>* see SFRS RMP, Element 13, 'Information Governance Group' section for an explanation of CAB</p> <p>NEW EVIDENCE:</p> <p>E201 Personal Data Breach Procedure E233 Personal Data Breach Incident Report Form E234 Timeline Personal Data Breach Incident E235 CAB covering report for approval of Personal Data Breach Procedure, 18/04/2019 E236 CAB minutes showing approval of Personal Data Breach Procedure, 18/04/2019 E237 Intranet screenshot – News Item re issue of Personal Data Breach Procedure E238 Intranet screenshot – Personal Data Breach Procedure and forms available to staff</p>	<p>It is very positive to see that there is considerable development and progress in this Element which was already assessed as being of a high standard.</p>
--	--	--	--	--	---	---

9. Data Protection	G	G	G	Update required on any change	<p>Although this element was agreed as 'green', given the introduction of GDPR, a lot of progress has been made regarding Data Protection, so it was felt appropriate to provide an update and new/amended evidence to indicate this.</p> <p>SFRS have been preparing for GDPR for some time and have been working with all departments to identify compliance gaps and support implementation of revised policies and procedures where necessary.</p> <p>Activities include:</p> <ul style="list-style-type: none"> • we have developed a register of all processing (Information Asset Register); • we have documented policies and procedures; • we have provided news items and guidance to staff on GDPR and DPIAs; • we have developed privacy impact assessments and breach management procedures (see Element 8); • we have added an 'Information Governance' section to the report template for Board/SLT/SMT meetings, directing staff to complete a DPIA; • we have produced general privacy notices for SFRS staff and for the public; • we have produced specific privacy notices and guidance for particular policies and projects, e.g. Home Fire Safety Visits; 	<p>This update is noted with thanks. The evidence provided clearly shows that the SFRS are taking their data protection obligations seriously and have made significant and appropriate changes and improvements to their policies and procedures in line with the requirements of the Data Protection Act 2018 and GDPR. They have duly appointed a Data Protection Officer.</p> <p>The evidence provided for Element 9 overlaps with the requirements for Element 8 so comments here should be read in conjunction with the comments for Element 8.</p> <p>It is clear that the SFRS has made considerable efforts to ensure that all personnel are aware of their obligations under GDPR and the Data Protection Act 2018. They have developed procedures and forms to enable personnel to implement the</p>
--------------------	---	---	---	-------------------------------	--	---

					<ul style="list-style-type: none"> • we have updated DP guidance on the SFRS website for the public; • we have appointed a Data Protection Officer; • we have provided face to face training to key roles and launched a mandatory Data Protection and Information Security e-learning package for all personnel within SFRS (see Element 14); • we have established a GDPR Working Group, with representation from all directorates, to act as a point of contact for GDPR and take responsibility for actions; • we have conducted a gap analysis of the Information Asset Register to identify secure email requirements and any other security issues; • we have produced guidance on the secure email system which has been issued to staff (see Element 8); • we have developed new privacy posters for notice boards on all stations (see Element 8); • we have developed a presentation for inductions on GDPR, information sharing, etc. (see Element 8); <p>All GDPR activities are monitored through a monthly Internal Audit meeting which feeds into our Audit and Risk Committee and ultimately our Corporate Assurance Board (CAB).</p> <p>NEW EVIDENCE:</p> <p>E169 GDPR Update 1, January 2018</p>	<p>policies when required and have made it as easy as possible for all personnel to understand what they have to do and when. SFRS are to be commended for this.</p> <p>The Information Asset Register is only required to cover those records which include personal data, but the same approach can be used to good effect with the development of the Business Classification Scheme and the application of retention schedules to all records.</p> <p>As with Element 8, SFRS are to be commended for continuing to invest resources into ensuring that they maintain a high standard in Element 9.</p>
--	--	--	--	--	---	---

				<p>E170 SLT report for approval of GDPR actions, 09/04/2018</p> <p>E171 SLT minutes showing approval of GDPR actions, 09/04/2018</p> <p>E172 GDPR Guidance</p> <p>E173 GDPR Leaflet</p> <p>E174 DPIA Guidance</p> <p>E175 Employee Privacy Notice</p> <p>E177 HFSV Privacy Notice</p> <p>E205 Information Asset Register (extract)</p> <p>E206 Terms of Reference for GDPR Working Group, 13/12/2018</p> <p>E207 Intranet screenshot – GDPR information available to staff</p> <p>E208 DPIA Template</p> <p>E209 Intranet News Item – Changes to DP Legislation, 23/01/2018</p> <p>E210 Intranet News Item – GDPR and DPA 2018 One Month In, 27/06/2018</p> <p>E211 GDPR FAQs</p> <p>E212 Intranet Screenshot – Privacy Notices available to staff</p> <p>E215 Awareness Briefing – HFSVs and Introduction of GDPR</p> <p>E217 GDPR Action Plan 2017-2020</p> <p>E218 GDPR Workshop Presentation</p> <p>E219 GDPR Project Plan</p> <p>E220 Guidance on Preparing Corporate Level Papers</p> <p>E222 Internal Audit Final Report GDPR, 30/08/2018</p> <p>E223 Internal Audit Follow Up Actions GDPR, 27/02/2019</p> <p>E226 CAB Agenda including GDPR Update, 12/12/2018</p> <p>E227 CAB Report re GDPR Update, 12/12/2018</p>	
--	--	--	--	---	--

					<p>E228 CAB Report Appendix re GDPR Risks, 12/12/2018 E229 Board Report re GDPR Update, 26/04/18 E230 Board Minutes showing approval of GDPR Update, 26/04/2018 E231 Internal Audit Report, Progress Update on GDPR, 09/10/2018 E232 ARAC Strategic Risk Register Update, including Spotlight Report on GDPR 17/01/2019</p> <p>UPDATED EVIDENCE:</p> <p>E091 SFRS website – DP information available to public E092 General Privacy Notice E094 Subject Access Request Form</p>	
10. Business Continuity and Vital Records	A	G	A	<p>It is the intention to support the <i>Business Continuity Plans</i> with an overarching <i>Business Continuity Policy</i>. This has been provided to the Keeper in its draft form...The Keeper requires a 'final' version of the <i>Policy</i> as soon as it is approved and operational.</p> <p>The Keeper is able to agree this element of Scottish Fire and Rescue's plan under 'improvement model' terms. This means that</p>	<p>The SFRS Business Continuity Strategy (renamed from 'Policy') was issued on 22 August 2018, along with a guidance note and BIA and completed example.</p> <p>However, the Records Management Officer noted that the reference to vital records (which was included in the draft Business Continuity Policy and Guidance Note supplied by the Risk and Audit Manager in November 2016 for the RMP evidence package) had been removed before the final Business Continuity Strategy was issued to staff. This was recently mentioned to Internal Audit and the Risk and Audit Manager contacted to make the necessary amendments.</p> <p>UPDATED EVIDENCE:</p>	<p>The removal of references to vital records from the Business Continuity Plan was unfortunate and the SFRS have rectified this error, as shown in the September 2019 update and the supporting evidence supplied to the PRSA team.</p> <p>The SFRS has provided an approved Business Continuity Policy which meets part of the Keeper's requirements. This is a very positive development and</p>

				<p>the authority has identified a gap in their records management provision (business continuity plans featuring vital records are not yet embedded in authority and proposed <i>Business Continuity Policy</i> is not available) and have put processes in place to close that gap – see above. The Keeper’s agreement is conditional on his being updated on the progress of this project when requested. SFRS have committed to doing this in the <i>Plan</i> (page 8 and evidence list for element 10).</p>	<p>E096 Business Continuity Strategy</p> <p>NEW EVIDENCE:</p> <p>E099 Intranet screenshot – Business Continuity Strategy available to staff E166 Business Continuity Plan Guidance Note and Business Impact Assessment superseded in September 2019 E167 Completed Business Continuity Plan Template Example E168 Intranet News Item re Business Continuity Strategy, 23/08/2018 E178 Intranet screenshot – Business Continuity Plan Guidance Note and Business Impact Assessment available to staff superseded in September 2019 E179 Intranet screenshot – Completed Business Continuity Plan Template Example available to staff E192 Emails re Business Continuity Strategy and Vital Records, 20/02/2019</p> <p>UPDATE SEPT 2019:</p> <p>The SFRS Risk and Audit Manager has recently amended the Business Continuity Plan Guidance Note and Business Information Assessment to include references to vital records. The new version has been uploaded to the SFRS Intranet to be available to staff.</p> <p>UPDATED EVIDENCE: E166 Business Continuity Plan Guidance Note and Business Impact Assessment</p>	<p>contributes towards improving the provision for vital records. Now that the policy is in place, the SFRS is better placed to work towards including vital records in the Business Continuity Plans. Identifying vital records in the Information Asset Register and the Records Retention Schedule would be a useful next step.</p>
--	--	--	--	---	---	--

					E178 Intranet screenshot – Business Continuity Plan Guidance Note and Business Impact Assessment available to staff	
11. Audit Trail	A	G	A	<p>N.B. The development of this element is tied in to the development of a central service-wide records management structure as explained in element 4. This will also effect elements 5, and 6.</p> <p>... SFRS have identified shared drives as an area with little or no audit trail provision: “Electronic systems used by the eight legacy services, prior to their merger into one national service on 1 April 2013, are still used, e.g. shared drives and intranets, although staff are discouraged from adding new material to them. Teams across Scotland now have Office 365 ‘shared sites’, where they can upload and share information with other team members, regardless of their locations. There is currently no standard audit trail mechanism in</p>	<p>SFRS is currently rolling out the Modern Desktop project and will be creating a new SharePoint environment (see Element 4).</p> <p>The implementation of a main ERMS, such as SharePoint, will greatly improve the audit trail functionality for electronic records.</p> <p>A draft Standard Abbreviations Guidance document has been created, once live this will aid the use of the existing File Naming Conventions Guidance.</p> <p>A draft Document Control Guidance document has been created, once live this will aid the use of version control.</p> <p>These 2 draft documents are currently awaiting progression to SLT for approval to go out for consultation to stakeholders within SFRS.</p> <p>A draft Corporate Documents Procedure has been started but is in the early stages and will need a lot more work as a task and finish group with members from all 5 directorates is going to be set up to look at the governance process for corporate documents.</p> <p>A separate draft Critical Documents Procedure for two types of document (Awareness Briefings and Urgent Instructions) has also been started but also has interdependencies which are delaying its progress.</p>	<p>There has been steady progress in developing the components required for an effective audit trail of records. It is important that SFRS know what records they hold, where they are and when they have been disposed of in accordance with the retention schedules. The use of SharePoint will undoubtedly provide some of the tools to enable this to be managed better.</p> <p>The new File Naming Conventions Guidance is commendably clear and easy to follow. The Naming Conventions themselves are a business decision but these appear very practical and sensible. The use of these conventions should help to avoid unnecessary duplication of records, and combined with version control, should make</p>

				<p>use across these systems and sites, with no control over records being added, deleted, moved, edited or renamed.” Options are currently being explored for solutions to this. It is anticipated that the development of the BCS and the possible implementation of a new EDRMS (see element 4) will remedy this. The Keeper agrees that the implementation of a service-wide electronic records solution should “greatly improve the audit trail functionality” (<i>Plan</i> page 53).</p> <p>SFRS have been candid in identifying that embedding a service wide records management platform is only one of many priorities demanding resources in the service. He agrees that, with an organisation the size of the SFRS, it is inevitable that progress will be made on an incremental basis. The Keeper requests that he is kept</p>	<p>These 2 Procedures will improve the audit trail mechanism for controlled documents.</p> <p>NEW EVIDENCE:</p> <p>E193 Standard Abbreviations Guidance (draft) E194 Document Control Guidance (draft)</p> <p>UPDATE SEPT 2019:</p> <p>The ICT Project Manager has recently provided Information Governance with an update regarding the SharePoint project – ‘The current position is that SFRS ICT expect to go out to market next financial year for a Corporate Document Management Solution that would connect into Office 265 and SharePoint. The expectation is that Information Governance would feed into the requirements for the solution and the options appraisal.’</p> <p>The SFRS File Naming Conventions Guidance has recently been reviewed by the Records Management Officer. The current version has been uploaded to the SFRS Intranet. It will be reviewed again in 2 years’ time.</p> <p>UPDATED EVIDENCE: E100 File Naming Conventions Guidance</p>	<p>managing the files more straightforward.</p> <p>There is clearly good progress in this Element and the PRSA team look forward to hearing more about this in future PURs.</p>
--	--	--	--	--	--	---

				<p>informed of this work as it progresses.</p> <p>The <i>Plan</i> states: “SFRS recognise that there is a need for better management of paper records and will investigate the best way to impose an audit trail mechanism on its paper records, so that the location of a record is known at all times. This may be through the use of tools such as markers left in place of a record or a logging out sheet held in each location.” The Keeper agrees a log-out or file registry system should be imposed on SFRS hard-copy records.</p> <p>The Keeper can agree this element on an ‘improvement model’ basis. This means that the authority has identified a gap in provision (lack of audit trail provision in shared drives and for paper records) and has identified solutions to close these gaps. This agreement is conditional</p>		
--	--	--	--	--	--	--

				upon the Keeper being kept informed of progress. SFRS have committed to doing this in the introduction to the <i>Plan</i> (page 8).		
12. Competency Framework	G	G	G	Update required on any change	<p>Action plans: The SFRS Annual Operating Plan 2018-2019 includes the action, 'Development of associated GDPR policies, procedures, guidance documentation to ensure legal compliance' and states that 'the exercise of proper control and management of personal data is fundamental to ensure, and be able to demonstrate, compliance with the GDPR. Taking a positive approach, and embracing the changes, will improve records management, customer trust and business opportunities'.</p> <p>The Strategic Planning, Performance and Communications Directorate Plan includes actions relating to implementing the recommendations from the RMP, as well as developing GDPR policies, procedures and training, in relation to the Information Asset Register, Breach Procedure, Information Sharing Protocols, e-learning package and Data Protection Impact Assessments.</p> <p>Appraisal process: The RMO's Appraisal Proforma for 2018/19 shows her objectives and development plan for the current year.</p> <p>Training for other staff:</p>	<p>The SFRS continue to ensure that their Records Management Officer has opportunities for professional development including attendance at relevant IRMS events and support for horizon scanning and peer learning activities. This type of support is essential to ensure that Records Managers maintain their expertise. The proposed training is certainly appropriate as it is being provided by an experienced and well-respected practitioner and the Assessment Team would encourage the use of this excellent opportunity for development if funding permits.</p> <p>The Data Protection training is an effective way of</p>

				<p>Following the introduction of GDPR, further DP training for staff was rolled out, including an e-learning package (see Element 14).</p> <p>NEW EVIDENCE:</p> <p>E176 Annual Operating Plan 2018-2019 E180 RMO Appraisal Proforma 2018-2019 E224 Annual Operating Plan 2018-19 Quarter 3 Progress Report SPPC E225 SPPC Directorate Plan Progress Report 2018-19 Quarter 3 Information Governance</p> <p>UPDATE SEPT 2019:</p> <p>The Information Governance Manager and Records Management Officer are waiting for approval (for funding, etc.) for the RMO to attend the new course, Practitioner Certificate in Scottish Public Sector Records Management, run by infogov.scot (Frank Rankin), tailored to the requirements of the PRSA. Although the first dates in Oct/Nov are now full, there are future dates in Jan/Feb now available.</p>	<p>ensuring that all personnel have access to the training they require. This contributes to compliance with the Data Protection Act 2018 and GDPR.</p> <p>SFRS are maintaining their existing good standard of support and development of all staff involved in record-keeping activities.</p>
13. Assessment and Review	G	G	G	<p>Update required on any change</p> <p>Review of policies, etc.: The draft Corporate Documents Procedure and Critical Documents Procedure will improve the review mechanism for controlled documents (see Element 11).</p> <p>Review of RMP: SFRS received our invitation to submit our Progress Update Review on 11/12/18 to be submitted by 15/03/2019.</p>	<p>The PRSA team welcome the use of this Progress Update Review is one way of ensuring compliance with the statutory requirement to keep the Records Management Plan under review.</p>

					<p>Internal Audit: The work of the Information Governance department was reviewed by Internal Audit in 2015; the Information Governance Manager provides regular updates to IA on progress and IA submit regular progress reports to the Board's Audit and Risk Assurance Committee.</p> <p>NEW EVIDENCE:</p> <p>E159 Internal Audit Progress Report, presented to ARAC, 05/10/2017 E160 Internal Audit Progress Report, presented to ARAC, 07/12/2017 E161 Internal Audit Progress Report, presented to ARAC, 28/03/2018 E181 Internal Audit Progress Report, presented to ARAC, 14/06/2018 E182 Internal Audit Progress Report, presented to ARAC, 09/10/2018 E195 Internal Audit Progress Report, presented to ARAC, 17/01/2019</p>	<p>It is positive to hear that the work of the Information Government department has been scrutinised by Internal Audit and that actions including records management actions are reported on regularly.</p>
14. Shared Information	A	G	A	<p>The authority intends to support information sharing practices in SFRS by introducing a service-wide <i>Information Sharing Policy</i>. The Keeper has been provided with a draft of this <i>Policy</i> and flowchart (version 0.3) and agrees that it properly considers information governance issues. He requires that the final version is</p>	<p>The Information Sharing Policy has been re-drafted to take into account GDPR and the Data Protection Act 2018. It will be presented to SLT in early 2019.</p> <p>An Information Asset Register has been developed (see Element 9), which will assist in establishing where an Information Sharing Protocol is in place or is required, with ongoing progress being made to close any gaps.</p> <p>The Data Protection and Information Security e-learning module, including</p>	<p>It is important to re-draft the Information Sharing Policy in the light of GDPR and the Data Protection Act 2018. Once this has been approved and submitted as per the Keeper's requirement, it is likely that this Element will move from Amber to Green status.</p>

				<p>forwarded when approved.</p> <p>The Keeper can agree this element on an 'improvement model' basis. This means that the authority has identified a gap in provision (the <i>Information Sharing Policy</i> is not yet approved) and has identified a solution to close this gap. This agreement is conditional upon the Keeper being kept informed of progress. SFRS have committed to doing this in the introduction to the <i>Plan</i> (page 8).</p>	<p>information sharing, was launched on 4 February 2019, with all staff receiving an email informing them it had to be completed by 15 March. A news item was also issued on the Intranet, with it being re-issued regularly to remind staff.</p> <p>The pass rate for the assessment is 80% and training will be monitored to ensure completion. While completing the module, staff must confirm that they have read and understood the Acceptable Use Policy and read the Acceptable use section in the Information Security Handbook.</p> <p>NEW EVIDENCE:</p> <p>E203 Comms Plan for GDPR Mandatory E-learning E204 Intranet News Item re Launch of E-learning Module, 04/03/2019 E214 Accessing E-learning Module Guidance E221 Email to Staff re Mandatory GDPR Training, 04/02/2019</p>	<p>It is good practice to include training on information sharing as part of data protection and information security training. As with Elements 8 and 9, it is clear that SFRS are ensuring that all personnel are aware of their responsibilities in this Element.</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 15 March 2019 and further updated on 24 September 2019. The progress update was submitted by Morag Allan, Records Management Officer.

The progress update submission makes it clear that it is a submission for **Scottish Fire and Rescue Service**.

PRSA Assessment Team's Summary

The Assessment Team has reviewed **Scottish Fire and Rescue 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

Scottish Fire and Rescue Service continues to take its records management obligations seriously and is working to bring all elements into full compliance. In particular it is evident that SFRS are ensuring that all personnel are made aware of their responsibilities in relation to data protection, information security and information sharing; and that relevant operational staff are involved in providing information about the records they create and the retention periods they need in order to do their work. Much of the development required for full compliance in Elements 4, 5, 6, 7 and 11 is currently predicated on the use of SharePoint. It is very encouraging that there is a clear commitment to include these records management needs in the design and test stages of SharePoint so that the resulting product enables compliance as intended. The support for training and professional development for the records management officer and for all staff is very positive.

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 it is likely that there would be no change to the status of any Element but it is clear that there is progress towards Green in Elements 10 and 14 and that the implementation of SharePoint will enable further progress in several elements.

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

Based on the progress update assessment the Assessment Team considers that **Scottish Fire and Rescue 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,



.....
Elsbeth Reid
Public Records Officer