

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

**Risk Management Authority  
Records Management Plan**

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

**29 June 2018**

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## 1. Public Records (Scotland) Act 2011

The Public Records (Scotland) Act 2011 (the Act) received Royal Assent on 20 April 2011. It is the first new public records legislation in Scotland since 1937 and came into force on 1 January 2013. Its primary aim is to promote efficient and accountable record keeping by named Scottish public authorities.

The Act has its origins in *The Historical Abuse Systemic Review: Residential Schools and Children's Homes in Scotland 1950-1995* (The Shaw Report) published in 2007. The Shaw Report recorded how its investigations were hampered by poor recordkeeping and found that thousands of records had been created, but were then lost due to an inadequate legislative framework and poor records management. Crucially, it demonstrated how former residents of children's homes were denied access to information about their formative years. The Shaw Report demonstrated that management of records in all formats (paper and electronic) is not just a bureaucratic process, but central to good governance and should not be ignored. A follow-up review of public records legislation by the Keeper of the Records of Scotland (the Keeper) found further evidence of poor records management across the public sector. This resulted in the passage of the Act by the Scottish Parliament in March 2011.

The Act requires a named authority to prepare and implement a records management plan (RMP) which must set out proper arrangements for the management of its records. A plan must clearly describe the way the authority cares for the records that it creates, in any format, whilst carrying out its business activities. The RMP must be agreed with the Keeper and regularly reviewed.

## 2. Progress Update Review (PUR) Mechanism

Under section 5(1) & (2) of the Act the Keeper may only require a review of an authority's agreed RMP to be undertaken not earlier than five years after the date on which the authority's RMP was last agreed. Regardless of whether an authority has successfully achieved its goals identified in its RMP or continues to work towards them, the minimum period of five years before the Keeper can require a review of a RMP does not allow for continuous progress to be captured and recognised.

The success of the Act to date is attributable to a large degree to meaningful communication between the Keeper, the Assessment Team, and named public authorities. Consultation with Key Contacts has highlighted the desirability of a mechanism to facilitate regular, constructive dialogue between stakeholders and the Assessment Team. Many authorities have themselves recognised that such regular communication is necessary to keep their agreed plans up to date following inevitable organisational change. Following meetings between authorities and the Assessment Team, a reporting mechanism through which progress and local initiatives can be acknowledged and reviewed by the Assessment Team was proposed. Key Contacts have expressed the hope that through submission of regular updates, the momentum generated by the Act can continue to be sustained at all levels within authorities.

The PUR self-assessment review mechanism was developed in collaboration with stakeholders and was formally announced in the Keeper's Annual Report published on 12 August 2016. The completion of the PUR process enables authorities to be credited for the progress they are effecting and to receive constructive advice concerning on-going developments. Engaging with this mechanism will not only maintain the spirit of the Act by encouraging senior management to recognise the need for good records management practices, but will also help authorities comply with their statutory obligation under section 5(1)(a) of the Act to keep their RMP under review.

### 3. Executive Summary

This Final Report sets out the findings of the Public Records (Scotland) Act 2011 (the Act) Assessment Team's consideration of the Progress Update template submitted for the **Risk Management Authority**. The outcome of the assessment and relevant feedback can be found under sections 6 – 8.

### 4. Authority Background

The RMA is a Non-Departmental Public Body (NDPB), established in 2005 by the Criminal Justice (Scotland) Act 2003. Its duties focus on protecting the public by ensuring that robust and effective risk assessment and risk management practices are in place to reduce the risk of serious harm posed by violent and sexual offenders. Within this remit, the RMA also has specific responsibility to administer and oversee the risk assessment and management processes supporting the Order for Lifelong Restriction (OLR) sentence, including the accreditation of risk assessors to carry out duties on behalf of the High Court, and the approval of Risk Management Plans for offenders subject to an OLR. The RMA accredits Assessors and Manners (methodologies) to ensure that appropriate standards are established and recognised.

### 5. Assessment Process

A PUR submission is evaluated by the Act's Assessment Team. The self-assessment process invites authorities to complete a template and send it to the Assessment Team one year after the date of agreement of its RMP and every year thereafter. The self-assessment template highlights where an authority's plan achieved agreement on an improvement basis and invites updates under those 'Amber' elements. However, it also provides an opportunity for authorities not simply to report on progress against improvements, but to comment on any new initiatives, highlight innovations, or record changes to existing arrangements under those elements that had attracted an initial 'Green' score in their original RMP submission.

The assessment report considers statements made by an authority under the elements of its agreed Plan that included improvement models. It reflects any changes and/or progress made towards achieving full compliance in those areas where agreement under improvement was made in the Keeper's Assessment Report of their RMP. The PUR assessment report also considers statements of further progress made in elements already compliant under the Act.

Engagement with the PUR mechanism for assessment cannot alter the Keeper's Assessment Report of an authority's agreed RMP or any RAG assessment within it. Instead the PUR Final Report records the Assessment Team's evaluation of the submission and

its opinion on the progress being made by the authority since agreeing its RMP. The team’s assessment provides an informal indication of what marking an authority could expect should it submit a revised RMP to the Keeper under the Act, although such assessment is made without prejudice to the Keeper’s right to adopt a different marking at that stage.

**Key:**

G	The Assessment Team agrees this element of an authority’s plan.		A	The Assessment Team agrees this element of an authority’s progress update submission as an ‘improvement model’. This means that they are convinced of the authority’s commitment to closing a gap in provision. They will request that they are updated as work on this element progresses.		R	There is a serious gap in provision for this element with no clear explanation of how this will be addressed. The Assessment Team may choose to notify the Keeper on this basis.
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**Progress Update Review (PUR) Template: Risk Management Authority**

Element	Status of elements under agreed Plan, February 2015	Status of evidence under agreed Plan, February 2015	Progress assessment status, 2018	Keeper's Report Comments on Authority's Plan, February 2015	Self-assessment Update as submitted by the Authority since February 2015	Progress Review Comment, 2018
1. Senior Officer	<b>G</b>	<b>G</b>	<b>G</b>	Update required on any change	No change to personnel, however job title has changed to Director of Corporate Services following recent job evaluation exercise.	The job description of Director of Corporate Services has been supplied to the Keeper. This post is now clearly identified as "acting as Chief Information Officer and Chief Records Management Officer" and this explicit responsibility is welcome.
2. Records Manager	<b>G</b>	<b>G</b>	<b>G</b>	Update required on any change	No change to personnel, however job title has changed to Governance & Communications Officer following recent job evaluation exercise.	The job description of the Governance and Communications Officer has been supplied to the Keeper. The post clearly continues to have operational responsibility for records management and this continues to meet the requirements for

						Element 2 of the RMP.
3. Policy	G	G	G	Update required on any change	No change	No immediate action required. Update required on any future change
4. Business Classification	A	A	A	<p>RMA are developing a Business Classification Scheme (BCS) as part of the rolling out of an eRDMS. The proposed BCS will be established upon the functions and activities of the authority and the Keeper has had sight of a draft version of the BCS covering the Corporate function. The Keeper recognises that adopting a functional approach is considered best practice. He would request sight of the BCS once signed off and authorised.</p> <p>RMA hopes to continue development work on the BCS till the summer of 2015 and will introduce staff training on the new system. The Keeper welcomes these initiatives and would like updates on this work.</p> <p>The Keeper can agree this</p>	<p>The RMA successfully moved to the Scottish Government's Objective system (eRDM). This was a big change from the previous g: drive structure, given that it is a topically based filing system, is based on the Government Category List (GCL), and has listed classifications built in along with recognised disposal and retention schedules for each file.</p> <p>During the development phase, it was agreed that the RMA would fully adopt Scottish Government's file type guidance, based on GCL, so that we did not need to create our own business classification system – in this development phase I set up the RMA's eRDM file plan by outlining each file to be</p>	<p>The decision to transfer electronic records management to the Scottish Government (SG) Objective system and the consequent pragmatic decision to use the GCL as the Business Classification scheme clearly involved a significant workload. The authority is to be commended for ensuring that all staff have appropriate training with sufficient staff for the size of the authority having additional advanced training.</p> <p>The Assessment Team look forward to further updates. If this were a statutory submission, evidence of the continued use of this system would be likely to enable the RAG status to be moved to Green.</p>

				<p>element of the Plan on an 'Improvement Model' basis, provided he is kept informed of the progress of this work. This means that the evidence submitted shows a commitment to closing the gaps in provision in this area.</p>	<p>created, the file type, a file description, file classification (protective markings) and file restrictions. It is the 'file type' that specifies the business classification data (and uses the eRDM Operations File Type Guidance). The guidance identifies the file topic, the type of information that can be stored and the records life cycle: Active, Reference and Disposal. e.g. the file could be <b>active</b> for 5 years and will then be closed. When a file is closed, it will have a <b>retention</b> period assigned to it, e.g. another 5 years. When a file is closed, its documents and/or records are still accessible. Once a file's retention period is reached, a file <b>destruction</b> review will be carried out. Either the file will be destroyed or it will be passed to National Records of Scotland for future generations to access.</p>	
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					<p>Once the file plan was in place, all RMA staff received comprehensive eRDM training. This training has also been incorporated into staff induction, so that all new staff are now eRDM trained within one month of starting.</p> <p>Two members of staff were IMSO trained – these staff manage general update actions for the RMA’s file plan, such as authorising new files, managing adhoc groups, assigning corporate value etc. IMSOs also provide a day to day support function to staff, giving advice and guidance on use of eRDM.</p> <p>Adhoc groups were created, to restrict access to certain files, such as HR files and Finance.</p> <p>Naming conventions were agreed, so that all records are saved in a set format to aid document searches.</p>	
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					Staff then undertook a data migration exercise to move documents from the G drive into eRDM. This exercise now means that all corporate records (records with assigned corporate value) are stored and managed within eRDM.	
5. Retention Schedule	A	A	A	<p>The implementation of a retention schedule is similarly tied in to the development of the eRDMS. The Keeper recognises the efforts being taken to establish a set of pre-determined file types with corresponding retention and disposal actions, and acknowledges the receipt of a copy of the eRDMS File Type Guidance. The Keeper would welcome updates on the progress being made in this element.</p> <p>The Keeper can agree this element of the Plan on an 'Improvement Model' basis, provided he is kept informed of</p>	As outlined above, the RMA fully implemented Scottish Government's Objective system (eRDM) as our records management system. The RMA's eRDM file plan identified each file to be created, with file type, a file description, file classification and file restrictions and utilises Scottish Government's eRDM Operations File Type Guidance. The guidance specifies the file topic, the type of information that can be stored and the records life cycle: Active, Reference and Disposal. e.g. the file could be <b>active</b>	<p>The implementation of the SG Objective system ensures that retention and disposal schedules are built into the management of electronic records. The authority is to be commended for this work and the application of retention and disposal schedules to the authority's records.</p> <p>The Assessment Team look forward to further updates. If this were a statutory submission, evidence of the continued use of this system would be likely to enable the</p>

				<p>the progress of this work. This means that the evidence submitted shows a commitment to closing the gaps in provision in this area.</p>	<p>for 5 years and will then be closed. When a file is closed, it will have a <b>retention</b> period assigned to it, e.g. another 5 years. When a file is closed, its documents and/or records are still accessible. Once a file's retention period is reached, a file <b>destruction</b> review will be carried out. Either the file will be destroyed or it will be passed to National Records of Scotland for future generations to access.</p>	<p>RAG status to be moved to Green.</p>
6. Destruction Arrangements	<b>G</b>	<b>G</b>	<b>G</b>	<p>RMA has provided a draft Memorandum of Understanding (MoU), which is currently being updated, with the Scottish Government's Information Services and Information Systems (ISIS) division. This MoU binds RMA to complying with the procedures of the Scottish Government, including the use of Objective eRDMS. The Keeper considers this</p>	<p>The MOU between the RMA and Scottish Government's Information Services and Information Systems (ISIS) division was agreed in March 2015. An extract is provided (please note the full pdf is 16mb hence why an extract only is provided; if further info is needed please let me know). A recent example of how this works would be that the RMA has</p>	<p>The Keeper thanks the RMA for the copy of the signed MoU with ISIS and welcomes the update that this is working well.</p>

				<p>arrangement for the destruction of hardware and the clarification of backup procedures appropriate and requests that he be provided with a copy of the signed-off MoU once ready for inclusion within the evidence package.</p>	<p>replaced all existing desktop pcs with new laptops – the old pcs then being sent to Scottish Government to be wiped clean of any data.</p>	
7. Archiving and Transfer	<b>G</b>	<b>A</b>	<b>A</b>	<p>The Keeper commends the RMA's commitment to using retention schedules to identify records suitable for archiving and their intention to develop guidelines for the transfer of records to an appropriate archive. This is evidenced by RMA's negotiations to establish a MoU with the National Records of Scotland (NRS).</p> <p>The Keeper agrees that progress is being made to identify and formalise the arrangements required for the transfer of records selected for permanent preservation. This will take the format of a MoU with NRS. The Keeper looks forward to receiving a copy of the finalised MoU as well as</p>	<p>Negotiations to establish a MoU with the National Records of Scotland (NRS) did not reach a conclusion, so this element remains outstanding. Work during this period concentrated on establishing the RMA's records management system eRDM. We can confirm that this element will be taken forward and contact re-established with NRS to complete a MoU.</p> <p>In adopting eRDM, the RMA has agreed to comply with its built in system for archiving – so while the MoU is not yet operational, the RMA fully intends to adhere to the following process via eRDM:</p>	<p>The Assessment Team would encourage the RMA to follow through their intended action to contact the NRS and complete the MoU.</p> <p>As a relatively young authority the quantity of records of enduring value will be small and that they are likely still to be in active or semi-active use by the authority. It is important that procedures for their long term preservation are put in place before there is a risk that they are lost or (if digital) become unusable. The steps being taken to address this are positive and augur well for the</p>

				<p>staff guidelines outlining the practical arrangements. transfer</p>	<p>After records are no longer needed for administrative or legal reasons they will be disposed of - either by scheduled, documented <b>destruction</b> or by <b>transfer</b> to the Scottish Government <b>archives</b> held by <b>National Records of Scotland (NRS)</b>, if they have been deemed to have historical and long-term value. When Records are stored within a virtual file in eRDM, the file type has a life cycle, e.g. the file could be <b>active</b> for 5 years and will then be closed. When a file is closed, it will have a <b>retention</b> period assigned to it, e.g. another 5 years. When a file is closed, its documents and/or records are still accessible. Once a file's retention period is reached, file <b>destruction</b> will be carried out. Either the file will be destroyed or it will be passed to National Records of Scotland for future generations to</p>	<p>future.</p>
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					access.  I have contacted Scottish Government and will discuss the archiving and transferring of records with the eRDM Manager, Craig Sclater in July 2018, to confirm the arrangements concerning RMA records stored in eRDM. This will then inform my subsequent discussions regarding a MOU with NRS.	
8. Information Security	<b>G</b>	<b>G</b>	<b>G</b>	Update required on any change	No change, however RMA policies and procedures are currently being reviewed as part of a project to ensure compliance with the GDPR, Law Enforcement Directive and Cyber Security strategy. These will result in updated and enhanced structures for information security, so there will be changes implemented in 2018.	The Assessment Team note that work is in progress to ensure compliance with new regulatory and legislative requirements and look forward to seeing further updates in future PURs.
9. Data Protection	<b>G</b>	<b>G</b>	<b>G</b>	Update required on any change	No change, however RMA policies and procedures are currently being reviewed as part of a project to ensure compliance with the GDPR,	The Assessment Team note that work is in progress to ensure compliance with new regulatory and legislative

					Law Enforcement Directive and Cyber Security strategy. These will result in updated and enhanced structures for data protection, so there will be changes implemented in 2018.	requirements and look forward to seeing further updates in future PURs.
10. Business Continuity and Vital Records	<b>G</b>	<b>G</b>	<b>G</b>	<p>The RMP states that vital records will be identified as part of the BCS and vital records will be considered in all subsequent iterations of the BCS. The Keeper welcomes this approach and would be pleased to receive updates on the work being done in this area.</p> <p>The Keeper also commends the annual testing of the Business Continuity Plan and would be interested to hear further news of any amendments to the Plan following such tests and reviews.</p>	<p>The RMA continues to operate a business continuity plan – this is reviewed annually and kept up to date. The plan was last reviewed by the RMA Board in June 2017.</p> <p>The RMA Board have instructed that a test of the continuity plan was carried out by 31 March 2018 – Due to “Red Alert” weather warnings the RMA invoked business continuity plan arrangements - the continuity arrangements resulted in the closure of the RMA office with staff working from home for a period of 3 days (28 February – 2 March).</p> <p>The business impact caused by the disruption was</p>	<p>The Assessment Team commend the Business Continuity Plan as an example of best practice. The active use of the Business Continuity plan for operational reasons will have established how workable and practical the plan is. The stability of the electronic records systems is very positive.</p>

					<p>classified as low as all staff remained operational over the period. The provision of laptops to all staff and stability of the Scottish Government IT systems supporting remote working were critical to mitigating business disruption.</p> <p>During the period of disruption the RMA was in the middle of delivering a three day risk practice course. This course had to be cancelled with 2 days remaining to be delivered.</p> <p>An update was provided to the RMA Board via Board Paper 687 - Business Continuity Plan – Live Implementation on the 19<sup>th</sup> of March 2018, with the report evidencing the robustness of processes to prevent the risk of business interruption due to business systems failures or natural event.</p>	
11. Audit Trail	<b>A</b>	<b>A</b>	<b>G</b>	Audit trail functionality will be greatly enhanced through the	The RMA has fully implemented the move to	The Assessment Team note the progress that has

				<p>proposed move to an eRDMS. There is also a longer term plan to move away from using the shared drive (G) and towards the eRDMS as the main method for electronic records storage/management. The Keeper commends these endeavours and would welcome updates of the progress of this work.</p> <p>The Keeper can agree this element of the RMP on an 'improvement model' basis, provided he is kept informed of the progress towards implementing the eRDMS across the organisation</p>	<p>eRDM as our primary records management system. The G drive has been retained for document types that are incompatible with eRDM (1 access database) and for storage of website files (it is not possible to upload documents from eRDM to our website). All records with corporate value are now stored on eRDM.</p> <p>eRDM has greatly enhanced our audit trail functionality - The eRDM Audit Trail captures all events over the last 3 months, with metadata stored - these events include who initiated the event, when the event was carried out and a comment. Staff have the capacity to run search queries that show metadata such as when documents were deleted. If audit actions are required for the previous six months, a help desk call can be raised.</p>	<p>been made in choosing a system which contains an appropriate audit mechanism. There is long term evidence of actions on documents held within this system, which will provide evidence when required for Freedom of Information requests and other regulatory compliance issues.</p> <p>If this were a statutory submission, evidence of the continued use of this system would be likely to enable the RAG status to be moved to Green.</p>
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12. Competency Framework	<b>G</b>	<b>A</b>	<b>A</b>	<p>RMA have submitted the job descriptions for the individuals named at elements 1 and 2 of the Plan which show that records management is a key recognisable part of their jobs. As these have not yet been approved by the Chief Executive at the point of submission, the Keeper requests copies of these once they are approved.</p> <p>The Keeper would also welcome updates on the proposed mandatory training programme for eRDMS.</p> <p>The Keeper can agree this element of the RMP on an 'improvement model' basis, provided he receives copies of updated job descriptions. The Keeper commends the commitment of RMA towards the training of staff.</p>	<p>New updated job descriptions were created for the RMA's Director of Business Performance (DBP) and Governance &amp; Communications Administrator (GCA). A job evaluation exercise was also very recently conducted in November for all RMA staff job descriptions, to ensure each is accurate and up to date. Please note the job titles have changed slightly. Copies of the Director's and Officer's job descriptions are attached.</p> <p>Once the file plan was in place, all RMA staff received comprehensive eRDM training. This training has also been incorporated into staff induction, so that all new staff are now eRDM trained within one month of starting.</p> <p>All staff also complete mandatory training on data protection (Scottish</p>	<p>The Keeper thanks the RMA for the job descriptions supplied.</p> <p>The Assessment Team commends the in-house training and notes that involving all staff is good practice. However, additional specialist training for the named individual under Element 2 ("Records Manager") is required if the RMA is to achieve a green rating for their competency framework under Element 12.</p> <p>The Assessment Team would expect that in an authority of this size the Records Manager would have access to more advanced training and to relevant professional development opportunities; and would look for a statement confirming this.</p>
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					Government e-learning) and managing information (Civil Service Learning).  Two members of staff were IMSO trained – these staff manage day to day actions for the RMA’s file plan, such as authorising new files, adhoc groups, assigning corporate value etc. IMSOs also provide a day to day support function to staff, giving advice and guidance on use of eRDM.	
13. Assessment and Review	<b>G</b>	<b>G</b>	<b>G</b>	RMA have outlined a strong commitment to annual review of their RMP, the Records Management Policy, and the Records Management Procedure. RMA also intend to review the progress of the implementation of the eRDMS. The Keeper commends this commitment to scheduled, regular self-assessment and would be interested to hear of the findings of these reviews, particularly if they have brought about changes to key	No change. The RMA continues to regularly review all governance and HR policies and procedures – Structures are in place for consideration of items at monthly senior management team meetings, with any significant changes to policy communicated to the RMA Board.	The Assessment Team notes continuing good practice with regular reviews.

				policies.		
14. Shared Information	G	G	G	Update required on any change	<p>No change, however RMA policies and procedures are currently being reviewed as part of a project to ensure compliance with the GDPR, Law Enforcement Directive and Cyber Security strategy, which will result in updated and enhanced structures for data protection.</p> <p>The RMA are also currently updating data sharing agreements we have with Scottish Government Justice Analytical Services to ensure these meet legislative requirements; and have plans to update agreements we have with local authorities and other public bodies on LS/CMI data and OLR data (offender management information).</p>	The Assessment Team notes continuing good practice in regard to data sharing agreements, and , as with Elements 8 and 9, that work is in progress to ensure compliance with the new regulatory framework.

## Version

The progress update submission which has been assessed is the one received by the Assessment Team on 22 December 2017. The author of the progress update submission is Paul Foy, Governance & Communications Officer.

The progress update submission makes it clear that it is a submission for the **Risk Management Authority**.

## 7. PRSA Assessment Team's Summary

The Assessment Team has reviewed the **Risk Management Authority** Progress Update submission and agrees that the proper record management arrangements outlined by the fourteen elements in the authority's plan continue to be properly considered. The Assessment Team commends this authority's efforts to keep its Records Management Plan under review.

## General Comments

The Risk Management Authority continues to take its records management obligations seriously and is working to bring all elements into full compliance. The change to the Senior Officer's job description to include explicit records management responsibilities is positive and to be commended. The Business Classification Scheme, Retention Schedules and the Audit trail are sensibly being addressed as an integrated task while the decision to use the existing Scottish Government subject-based classification scheme is pragmatic. New legislative and regulatory requirements are being identified and planned into the authority's future development. There is more work to be done but overall there is evidence of good practice and considerable effort to work towards improvement.

The Team commends these initiatives and would welcome updates on these projects in future PUR submissions.

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 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.

While this assessment cannot, therefore, lead to a change of a RAG status against the **Risk Management Authority's** agreed RMP, as evidenced in the Keeper's published report, this assessment indicates that the progress that has been made in Elements 4, 5 and 11 would be likely to enable a change from Amber to Green on provision of appropriate evidence.

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

#### 8. PRSA Assessment Team's Evaluation

Based on the progress update assessment the Assessment Team considers that the **Risk Management Authority** 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,



**Elspeth Reid**  
Public Records Officer