ARGYLL & BUTE COUNCIL

Internal Audit Section

INTERNAL AUDIT REPORT

CUSTOMER DEPARTMENT	CUSTOMER SERVICES
AUDIT DESCRIPTION	VERIFICATION AUDIT
AUDIT TITLE	REVIEW OF RECORDS MANAGEMENT PLAN AND INFORMATION SECURITY
AUDIT DATE	JANUARY 2015

2014/2015

1. BACKGROUND

This report has been prepared as a result of the Internal Audit review of Records Management Plan and Information Security within Customer Services Department as part of the 2014 - 15 Internal Audit programme.

Under the Public Records (Scotland) Act 2011 ("the Act") Scottish public authorities must produce and submit a records management plan ("RMP") setting out proper arrangements for the management of an authority's public records to the Keeper of the Records of Scotland ("the Keeper") for his agreement under section 1 of the Act.

Section 1 of the act states that:

(1) Every authority to which this Part applies must—
  (a) prepare a plan (a "records management plan") setting out proper arrangements for the management of the authority's public records,
  (b) submit the plan to the Keeper for agreement, and
  (c) ensure that its public records are managed in accordance with the plan as agreed with the Keeper.

(2) An authority's records management plan must—
  (a) identify—
      (i) the individual who is responsible for management of the authority's public records, and
      (ii) (if different) the individual who is responsible for ensuring compliance with the plan, and
  (b) include, in particular, provision about—
      (i) the procedures to be followed in managing the authority's public records,
      (ii) maintaining the security of information contained in the authority's public records, and
      (iii) the archiving and destruction or other disposal of the authority's public records.

Final record management plan has to be submitted to the Keeper of Record of Scotland by June 2016.

There are 14 elements Scottish public authorities should consider when creating its RMP. These are:

1. Senior management responsibility
2. Records manager responsibility
3. Records management policy statement
4. Business classification
5. Retention schedules
6. Destruction arrangements
7. Archiving and transfer arrangements
8. Information security
9. Data protection
10. Business continuity and vital records
11. Audit trail
12. Competency framework for records management staff
13. Assessment and review
14. Shared information

Information security is governed by the Data Protection Act which controls how your personal information is used by organisations, businesses or the government.

The central governance team in Kilmory oversee, and provide guidance on dealing with Data Protection and subject access requests. Each service has a nominated contact, who will deal with queries of this nature.

All staff responsible for using data have to follow eight strict rules called 'data protection principles', these rules exist to make sure that information is:

- Used fairly and lawfully
- Used for limited, specifically stated purposes
- Used in a way that is adequate, relevant and not excessive
- Accurate
- Kept for no longer than is absolutely necessary

- Handled according to people's data protection rights
- Kept safe and secure
- Not transferred outside the UK without adequate protection

There is stronger legal protection for more sensitive information, such as:

- Ethnic background
- Political opinions
- Religious beliefs
- Health
- Sexual health
- Criminal records

2. AUDIT SCOPE AND OBJECTIVES

The scope and objectives of the audit are limited to:

- Assessment of compliance with the Data Protection Act.
- Assessment of compliance with the Public Records (Scotland) Act 2011.

3. RISKS CONSIDERED

Audit Risk: Non-compliance with Data Protection Act.
Audit Risk: Failure to comply with the Public Records (Scotland) Act 2011
Audit Risk: Reputational risk and negative scrutiny arising from compliance failure

4. AUDIT OPINION

The level of assurance given for this report is substantial.

Level of Assurance	Reason for the level of Assurance given
High	Internal Control, Governance and the Management of Risk are at a high standard with only marginal elements of residual risk, which are either being accepted or dealt with.
Substantial	Internal Control, Governance and the Management of Risk have displayed a mixture of little residual risk, but other elements of residual risk that are slightly above an acceptable level and need to be addressed within a reasonable timescale.
Limited	Internal Control, Governance and the Management of Risk are displaying a general trend of unacceptable residual risk and weaknesses must be addressed within a reasonable timescale, with management allocating appropriate resource to the issues.
Very Limited	Internal Control, Governance and the Management of Risk are displaying key weaknesses and extensive residual risk above an acceptable level which must be addressed urgently, with management allocating appropriate resource to the issues.

This framework for internal audit ratings has been developed and agreed with Council management for prioritising internal audit findings according to their relative significance depending on their impact to the process. The individual internal audit findings contained in this report have been discussed and rated with management.

A system of grading audit findings, which have resulted in an action, has been adopted in order that the significance of the findings can be ascertained. Each finding is classified as High, Medium or Low. The definitions of each classification are set out below:-

High - major observations on high level controls and other important internal controls. Significant matters relating to factors critical to the success of the objectives of the system. The weakness may therefore give rise to loss or error;

Medium - observations on less important internal controls, improvements to the efficiency and effectiveness of controls which will assist in meeting the objectives of the system and items which could be significant in the future. The weakness is not necessarily great, but the risk of error would be significantly reduced if it were rectified;

Low - minor recommendations to improve the efficiency and effectiveness of controls, one-off items subsequently corrected. The weakness does not appear to affect the ability of the system to meet its objectives in any significant way.

5. FINDINGS

The following findings were generated by the audit:

Element 1 – Senior Management Responsibility
Senior Management Responsibility has been identified as the Executive Director of Customer Services who has overall strategic accountability for records management and also acts at the Council's monitoring officer.

Element 2 – Records Manager Responsibility
Records Manager Responsibility has been identified as the Governance Manager who reports to senior management and has day-to-day operational responsibility for records management.

Element 3 – Records Management Policy Statement
A Records Management Policy Statement describing how we create and manage authentic, reliable and useable records, capable of supporting business activities for as long as they are required is a stipulation of the Act. A draft Records Management Policy has been prepared covering the requirements and is currently shown as a live task (on track) within the project plan with a scheduled completion date of 31 May 2015.

Element 4 – Business Classification
In terms of Business classification, Argyll and Bute Council has detailed in the register of entries with the Information Commissioner's office, the type/classes of information processed along with the reasons/purposes for processing that information, who the information is about and with whom it is shared. A software solution has been put in place to classify emails through the Council network as "Not protectively marked", "official" or "official – sensitive", a solution has not yet been implemented for other council documentation. This has yet to be completed however it was evidenced that preparations are on-going and is currently shown as a live task (on track) within the project plan with a scheduled completion date of 31 May 2015.

Element 5 – Retention Schedules
Argyll and Bute Council currently refers to and intends adopting the retention schedules as published on the website of the Scottish Council on Archives, departmental representatives have been contacted to advise if this content is comprehensive, and if not, to identify documentation held that requires to be recorded on an additional localised retention schedule. This has yet to be completed

however it was evidenced that preparations are on-going and is currently shown as a live task (on track) within the project plan with a scheduled completion date of 31 May 2015.

Element 6 – Destruction Arrangements

Destruction Arrangements are in place with an external provider to clear and destroy the hard-drives of obsolete PCs. Hard copy files are placed into orange "confidential waste" bags to be shredded by council officers. The business classification scheme to be implemented will determine how long documentation should be retained and their subsequent arrangements for disposal. This has yet to be completed however it was evidenced that preparations are on-going and is currently shown as a live task (on track) within the project plan with a scheduled completion date of 31 May 2015.

Element 7 – Archiving and Transfer Arrangements

Archiving and transfer arrangements will be determined by the exercise to establish what records are held and for how long they are required to be retained. This has yet to be completed however it was evidenced that preparations are on-going and is currently shown as a live task (on track) within the project plan with a scheduled completion date of 31 May 2015.

Element 8 – Information Security

- An Information Security Forum is in place; this group comprises of a representative from each Council Service and meets regularly to raise and discuss issues and developments both departmentally and Council-wide along with agreed actions to be taken forward.
- An Information Security Handbook dated 2003 is available on the Public Folders within the Council's email system; this is a comprehensive document and is currently being updated. An early draft of this, now entitled Information Security and Data Protection Handbook was provided for review and found to be progressing well. Delivery of this document is also within the records management project plan and is scheduled for completion 31 May 2015.
- The Council's Acceptable Use Policy" was updated in April 2014 and must be signed by all staff prior to being permitted access to the Council's networks; this document provides users with guidance on access and use of Council systems (including password configuration) and treatment of information.
- Each Council service has nominated a member of staff or provided a generic contact address regarding freedom of information (FOI) requests. Guidance on progressing FOI requests is available within the public folders of the Council's email system and through regular dialogue with the Council's Governance team. During 2013 – 14 the Council received 1,103 FOI requests of which 1,048 (95%) were responded to within the required timescale.

Element 9 – Data Protection

- Argyll and Bute Council is registered with the Information Commissioner's Office (ICO) under the Data Protection Act, this is renewed annually with a current expiry date of 21 February 2016.
- To date there have been no notifications nor penalties invoked by the ICO in terms of breaches under the Act.
- A corporate Data Protection awareness training event was recently held at Council Headquarters with trainers attending from the ICO; this was attended by 80 members of staff with the training materials available on the Hub for all staff to view.
- A Data Protection Handbook has been in place since 2002 and a Policy since 2005 with the last update recorded in 2009. The policy is currently under review but not yet complete, however, it was evidenced that preparations are on-going and is currently shown as a live task (on track) within the project plan with a scheduled completion date of 31 May 2015 and will thereafter be available for all staff to review on the Hub.
- The Subject Access Requests Policy has been recently updated and is available to all staff on the Hub.
- The Council's Acceptable Use Policy further supports Data Protection elements.
- A Fair Processing Notice is published on the Council's website alerting members of the public that it may share information provided with other bodies responsible for auditing or administering public funds in order to prevent and detect fraud.

Element 10 – Business Continuity and Vital Records

To ensure business continuity and availability of vital records, Argyll and Bute Council has Critical Activity Recovery Plans (CARPs) in place for essential services, these include availability of business information and a grab bag with equipment with which to access it.

Element 11 – Audit Trail

An audit trail documenting the movement or editing of a record for as long as that record exists is required by the Keeper. This audit trail may be an integral part of the record or be held separately; it may be automatically generated or created manually. Electronic audit trails are currently system specific due to the varying requirements of nature of information held.

Element 12 – Competency Framework for Records Management Staff

A competency framework for records management staff is being researched by the Archive Officer, relevant qualifications are being reviewed and contact has been established with other local authorities to find out what they do in compliance with this element. This has yet to be completed however it was evidenced that preparations are on-going and is currently shown as a live task (on track) within the project plan with a scheduled completion date of 31 May 2015.

Element 13 – Assessment and Review

Assessment and review will be carried out upon implementation of the Records Management Plan and on a regular basis thereafter through appointment of a review group.

Element 14 – Shared Information

The Records Management Plan will state measures to be taken to ensure information will be shared lawfully and securely e.g. with other local authorities. This will be in line with the "Data sharing code of practice" as outlined by the Information Commissioner's Office. This has yet to be completed however it was evidenced that preparations are on-going and is currently shown as a live task (on track) within the project plan with a scheduled completion date of 31 May 2015.

6. CONCLUSION

This audit has provided a substantial level of assurance that plans are in place to address requirements of the Keeper of the Records of Scotland by submission date June 2016.

Thanks are due to the Customer Services staff and management for their co-operation and assistance during the Audit and the preparation of the report.

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