

<b>Report to:</b>	QSMTM Q1 2024-25
<b>Report by:</b>	Kim Berry, Corporate Services Manager
<b>Meeting Date:</b>	6 September 2024
<b>Subject/ Title:</b> (and VC no)	Information and Records Management – Information and Records Management Report 2023-24 and Assurance VC214224
<b>Attached Papers</b> (title and VC no)	None

## Purpose of report

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1. To provide the Information and Records Management Report 2023-24 (set out in the Appendix) (IRM Report 2023-24) and the assurance report as required by the Key Document C1 Governance Reporting Arrangements (GRA).

## Recommendation and actions

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2. The following is recommended
  - (i) the Senior Management Team (SMT) note this Committee Report (CR), the IRM Report 2023-24 and the assurance provided.
  - (ii) the CR and the IRM Report 2023-24 are published in accordance with the details set out in paragraph 18.

## Executive summary

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3. The IRM Report 2023-24 considers the following:
  - are records held for the appropriate time?
  - are records destroyed in accordance with our procedures?
  - is information held securely?
  - is personal data being lawfully processed?
  - are appropriate back-up arrangements in place?
  - are key documents being managed in line with the C5 Key Documents Handbook?

### Records Management Plan (RMP)

4. The Keeper of the Records of Scotland (the Keeper) invited the Commissioner to submit an updated RMP in 2020-21 and this was submitted on 30 June 2021.
5. The process of updating the RMP resulted in the review of the Information and Records Management Policy, the Information and Records Management Handbook and other related procedures and updated documentation was submitted with the updated RMP. In addition, the approved Data Protection Policy and Handbook and the Employee Handbook were also submitted with the updated RMP.

6. On 28 July 2023, the Keeper agreed the Commissioner's Records Management Plan, confirming that "they combine to set our proper arrangements for the management of the Scottish Information Commissioners public records."
7. The Keepers [Assessment and Approval Report](#) is published on the National Records of Scotland website.

#### IRM Report 2023-24

8. The IRM Report 2023-24 identifies a good level of compliance with our Information and Records Management Policy and the procedures set out in the Information and Records Management Handbook.
9. The IRM Report 2023-24 also identifies two areas where further work is required
  - the development and implementation of revised retention and destruction processes in VC – this work will continue in 2024-25 as part of the work related to the Records Management Plan
  - a project to consider and recommend a way forward for the management of Key Documents and reviews

#### **Assurance**

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10. Taking account of the IRM Report 2023-24, I am able to provide assurance that, as far as I am aware, the Commissioner's information and records are being managed in accordance with the Commissioner's policies and procedures and that:
  - records are held for the appropriate time
  - records are destroyed in accordance with our procedures
  - information is held securely
  - personal data is being lawfully processed
  - appropriate back-up arrangements are in place
  - key documents are being managed in line with the Key Document Handbook.

#### **Risk impact**

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11. This assurance report and our information management processes and procedures contribute to the control measures aimed at reducing the likelihood and impact of risk of the information we hold not being managed properly and held securely.

#### **Equalities impact**

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12. No equality issues arise from this committee report.

#### **Resources impact**

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13. The two actions to be carried referred to paragraph 9 above will require additional staff resource and it is anticipated that this can be met from existing staff resources.

## **Privacy impact**

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14. There are no privacy impact issues arising from this assurance report.

## **Operational/ strategic plan impact**

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15. None identified.

## **Records management impact (including any key documents actions)**

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16. None identified.

## **Consultation and Communication**

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17. QSMTM Q1 minute and the publication of this CR.

## **Publication**

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18. I recommend that this CR is published in full.

## Appendix

### Information and Records Management Report 2023-24

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Provide assurance that the Commissioner's information and records are being managed in accordance with published policies and procedures, in particular that:

- records are held for the appropriate time
- records are destroyed in accordance with our procedures
- information is held securely
- personal data is being lawfully processed
- appropriate back-up arrangements are in place
- key documents are being managed in line with the Handbook

### Are records being held for the appropriate time?

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File Plan and Retention Schedule (VC72711) (the Schedule)

1. The Schedule contains detailed rules for the retention of our records. The content reflects statutory and business requirements but is being updated as part of our work on UK GDPR implementation and records management review - the relevant retention periods relating to personal information are set out in our Privacy Notice which can be viewed here:

[Privacy notice | Scottish Information Commissioner \(foi.scot\)](#)

2. The Schedule has been applied to the extent described above.

### Are records being destroyed in accordance with our procedures?

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3. There are procedures in place for the archiving/deletion of information held in Workpro generally, these work well with information being archived and deleted in accordance with these procedures.
4. Processes for the management of Outlook, P and Z drives and paper records are also implemented routinely. Guidance on remote working records management has been updated and issued to all staff.
5. The project to revise the retention periods for records held in Virtual Cabinet (VC) will be carried forward into 2024-25. It is hoped that we will be able to create some automated processes and tasks to support the records review processes subject to our duties and responsibilities as regards data protection and personal information.
6. Once revised retention periods have been agreed, further work will be required to configure VC to perform any new automated processes in line with the agreed retention periods.

### Is information held securely?

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7. An internal audit relating to cyber resilience was undertaken in 2022-23, the purpose of which was to help us to identify, prioritise and remediate cyber risk through a detailed

assessment of our IT systems. A report on the assessment was submitted to the SMT on 29 March 2023 (VC184331).

8. For 2023-24, there were a range of security procedures and processes in place which included
  - controls over access to the Commissioner's network for maintenance purposes
  - external penetration testing (as part of the Cyber Essentials reaccreditation)
  - firewall monitoring and enhanced provision
  - server access controls
  - Cyber Essentials and Cyber Essentials Plus re-accreditation requirements
  - Cyber warning systems – updates and messages to staff regarding any current threats
  - use of VPN's when remote working
9. We received Cyber Essentials in March 2023 and Cyber Essentials Plus reaccreditation in May 2023.
10. We have in place appropriate security measures to prevent personal information from being accidentally lost, used or accessed in an unauthorised way, altered or disclosed and these were followed in 2023-24.
11. Staff who are working remotely are required to adopt the same measures that they would take when working in the office premises which are:
  - lock devices when unattended
  - only manage and share information using the Commissioner approved systems
  - ensure telephone conversations cannot be overheard
  - ensure information is not accessible to family members or others in the place where they are remote working.
12. When working remotely, all members of staff are still bound by our requirements regarding the security of information and have been advised to comply with the key document C5 Information and Records Management Handbook.
13. As far as I am aware, all members of staff have complied with the above as far as possible.
14. Access to personal information has also been limited to only those employees, agents, contractors and other third parties who are permitted to access this information.

### **Data incidents**

15. We have in place procedures to manage and report any data incidents and notify and seek advice from the DPO when a data incident takes place. We have a data incident log and, also, have in place procedures for notifying the ICO of a data breach where we are legally required to do so. These procedures were followed in 2023-24.
16. In 2023-24 there were a total of 5 data incidents and none of these required reporting to the ICO. The DPO has been consulted on all data incidents and the SMT has approved the recommended actions.

17. The table below provides a summary, for each quarter, of the number of data incidents and the action taken.

Data Incidents 2022-23			
	Number	DPO consulted	Reported to ICO
Q1	2	Yes	No
Q2	1	Yes	No
Q3	1	Yes	No
Q4	1	Yes	No
<b>Total</b>	<b>5</b>		

18. In 2023-24, we also recorded near misses so that we can learn from these too.
19. Taking account of the above, I am satisfied that there were sufficient processes were in place in 2023-24 to ensure that information was being held securely.

### **Is Personal data being lawfully processed?**

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20. The Commissioner's Privacy Notice, which is regularly reviewed and updated, provides comprehensive information regarding the personal data processing undertaken by the SIC and can be viewed here:

[Privacy notice | Scottish Information Commissioner \(foi.scot\)](#)

21. As far as I am aware, personal data is being lawfully processed in a way that is lawful and correct in accordance with the DPA 2018 and UK GDPR principles and, also, in accordance with our published policies and procedures.

### **Are appropriate back-up arrangements in place?**

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22. Backups ran on a daily basis, Monday to Friday and were stored off site by a member of the Corporate Services Team on a weekly basis.
23. The backup arrangements were monitored by our IT services supplier who identified and reported any issues.

### **Are Key Documents being managed in line with the Handbook?**

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33. Key documents have been reviewed and there is a streamlined process for non-substantive planned reviews to assist progress.
34. To assist with reviews, the Review Schedule is considered every two months by the SMT and this was done in 2023-24.
35. The project to consider and recommend a way forward for the management of key documents will be carried forward to 2024-25.
36. I am satisfied that there are appropriate processes in place for the management of key documents and that, generally, key documents have been created and managed in line with the Key Documents Handbook.