

## Records Management - Department of Health

**Summary** This policy statement and protocol sets out the requirements, roles and responsibilities for ensuring compliance with the legislation and benefits of good recordkeeping practices. Compliance enables the Department to meet its business needs, accountability and governance requirements and protects the interests of the Department and Government and the rights of employees and the community.

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**Distributed to** Ministry of Health

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## **RECORDS MANAGEMENT POLICY – DEPARTMENT OF HEALTH**

### **PURPOSE**

The State Records Act 1998 requires full and accurate records of the activities and decisions of the Department of Health to be created, managed, retained and disposed of appropriately.

This policy statement and protocol sets out the requirements, roles and responsibilities for ensuring compliance with the legislation and benefits of good recordkeeping practices. Compliance enables the Department to meet its business needs, accountability and governance requirements and protects the interests of the Department and Government and the rights of employees and the community.

All staff are required to comply with this policy in the conduct of official business.

The policy applies to records in all formats, including digital (electronic) records.

### **MANDATORY REQUIREMENTS**

- All staff at Department of Health have responsibilities for recordkeeping and records management. The extent of those responsibilities will vary according to individual roles. Specific responsibilities are defined in the Records Management Protocol.
- Records created, received and maintained by Department of Health staff in the course of departmental operations and activities are official records and are owned by Department of Health.
- All staff should ensure that they create official records of decisions and actions made in the course of their business. For example, if business is transacted by telephone, file notes of the key points in the conversation should be documented; official meetings should include the taking of minutes. Further examples are outlined in the Records Management Protocol. (Section 2.2)
- All official records should be captured into the Department's recordkeeping system or approved business information system, so they can be managed appropriately.
- No Department of Health records can be disposed of unless in accordance with retention and disposal authorities authorised by State Records NSW or normal administrative practice (NAP) as defined in the Records Management Protocol. (Section 2.7) Any sentencing of records must be supervised by the Manager, Records Unit and must be authorised by senior management before any disposal takes place.
- Department of Health has established a number of authorised sites for the storage of hardcopy records. No records must be stored in unauthorised areas.
- Vital records are to be identified and managed in accordance with relevant legislation to ensure Department of Health business continuity.
- Departmental records are subject to an annual census.
- State Records NSW has the right to audit departmental recordkeeping practices at any time.

## IMPLEMENTATION

A Records Management Program (RMP) has been established within the Department of Health in accordance with s.12(2) of the State Records Act 1998 and in line with Whole of Government policy on managing information.

This policy supports and provides a framework for this program. See the Records Management Protocol for more information about the Department of Health RMP.

Implementation of the Program is the responsibility of the Corporate Records Manager, assisted by records management staff.

The RMP must be implemented in all branches within the Department to support the requirements of this policy. This responsibility lies with Branch Directors.

Responsibilities of all staff, including senior management include but are not limited to:

- Routinely creating accurate records of activities and decisions
- Making sure records are captured in the recordkeeping system or approved business information system
- Ensuring the integrity and safety of Department of Health records
- Ensuring that Department of Health records are not removed from departmental premises without the prior consent of the Corporate Records Manager (Records Management Protocol, Section 2.9)
- Protecting sensitive records from unauthorised access
- Ensuring Department of Health records are not destroyed without appropriate authority

Branch records management activities are subject to monitoring and audit activities to ensure ongoing compliance and sustainability.

## REVISION HISTORY

Date issued (Doc no.)	Approved by	Amendment notes
January-2005 (PD2005_231)	Director General	Specified the responsibilities within the Central Administration with respect to maintenance of an effective records management system
September-2009 (PD2009_057)	Deputy Director-General Health System Support	<p>Rescinds PD2005_231. Updates requirements and responsibilities for creation, capture, maintenance, and disposal of digital records and their metadata in any business or information management system.</p> <p>Incorporates content from the following rescinded polices:</p> <ul style="list-style-type: none"> <li>▪ PD2005_230 <i>Records Management of Electronic Messages (Email) Policy and Guidelines</i></li> <li>▪ PD2005_254 <i>Health Records Physical Storage of NSW Department (Policy and Guidelines for the)</i></li> <li>▪ PD2005_285 <i>Records-Transfer of Departmental Records from Central Office to Areas/Districts/Other Organisations</i></li> </ul>

## ASSOCIATED DOCUMENTS

1. Records Management Protocol (includes Definitions and References)
2. Implementation Checklist

## Records Management Protocol

**NSW**  **HEALTH**  
PROTOCOL

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**Issue date: September 2009**

PD2009\_057

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## 1. BACKGROUND

### 1.1 About this document

The purpose of the Records Management Policy Statement and Protocol is to ensure that full and accurate records of all activities and decisions of the Department of Health are created, managed and disposed of appropriately, in accordance with relevant legislation. This will enable the Department to achieve effective information accessibility, efficient delivery of service and business enhancement whilst maintaining a recorded history of the Department's activity. Good recordkeeping protects the interest of the Department, the Government and the rights of employees as well as the community.

This Protocol has been authorised by the Director-General and is available to all staff. It has been developed in consultation with staff and will be updated when required.

### 1.2 Key definitions

#### **Capture**

A deliberate action which results in a record being placed on a registered file or the registration of a document into a recordkeeping system. For certain business activities, this action may be designed into digital systems so that the capture of records is concurrent with the creation of records.

#### **Digital records**

Digital information, captured at a specific point in time that is kept as evidence of business activity. The term 'digital records' covers 'born digital' records such as emails, web pages, digital photographs, digital audio files and database records as well as scanned versions of paper records that have been digitised in business processes.

#### **Disposal**

A range of processes associated with implementing appraisal decisions that are in accord with approved retention and disposal authorities. These include the retention, deletion or destruction of records. They may also include the migration or transmission of records between recordkeeping systems, and the transfer of custody or ownership of records.

#### **Disposal Authority**

A policy for the retention and disposal of records approved by the State Records NSW Advisory Committee

#### **Document Table**

A reference guide providing step-by-step instructions for managing files and documents using TRIM, specific to branch business processes. It outlines the kinds of records typically used (eg. brief, meeting file) and indicates the action required for managing them, specifies titling and records protocols and notes the access and security associated with the records.

#### **Electronic records**

Refer to 'Digital records'

### **Metadata**

Data describing data and data systems. Recordkeeping metadata is data that describes the context, content and structure of records and their management through time. It refers to the record title, its current, home and owner locations, date registered and the applicable retention schedule.

### **Official record**

Recorded information in any form, including data in computer systems, created or received and maintained by an organisation or person in the transaction of business or the conduct of affairs and kept as evidence of such activity.

### **Records management program**

A planned and coordinated set of policies, procedures, people, systems and activities that are required to manage records

### **Recordkeeping system**

Any compliant business information system that captures, maintains and provides access to records over time as defined by State Records NSW.

### **Registration**

The act of giving a record a unique identifier upon entry into a system. The primary purpose of registration is to provide evidence that a record has been created or captured in a recordkeeping system, with the benefit of facilitating retrieval and access.

### **Staff**

Includes permanent, casual, contractors or consultants, working in full-time or part-time capacity, at all levels of the Department.

### **Tracking**

Creating, capturing and maintaining information about the movement and use of records

### **Vital Records**

Refers to records required to ensure Department of Health business continuity



## 2 ELEMENTS OF A RECORDS MANAGEMENT PROGRAM

Under section 12(2) of the State Records Act 1998, the Department of Health Records Management Program (RMP) ensures planned, coordinated sets of policies, procedures, people, systems and activities exist to manage departmental records.

The rationale underlying the Department of Health RMP identifies and combines five principal requirements:

- Compliance with statutory and regulatory records management principles and standards
- Support for corporate action and governance
- Facilitation of current and improved business
- Business continuity and the appropriate management of risk
- The satisfying of community expectations

### 2.1 Recordkeeping System

The Department of Health uses TRIM as its principal recordkeeping system. The system is used to register, capture and track hardcopy or digital files and documents whether received, generated or acted upon by the Department.

Access to TRIM and user training is available to all staff. Training can be arranged through Workplace Relations & Management.

Branches are not to maintain individual or separate recordkeeping systems (such as spreadsheets, documents, databases, manual indexes etc) which duplicate or replace those records which are held or should be held in TRIM or official business information systems.

Users of the recordkeeping system are responsible for:

- Capturing official records
- Recording the movement of records in TRIM to maintain the current location
- Ensuring the accuracy of information entered in TRIM

### 2.2 Creation and capture

A record is information (including data in computer systems), that is created or received while carrying out business transactions and kept as evidence.

Records can fall into two main categories:

- **Records of continuing value:** Any record that has administrative, business, financial, legal, evidential or historic value to the Department.

Examples are:

- Health strategies and policies
- minutes of meetings, approvals, briefs
- financial and accounting records
- agreements, contracts, insurance claims

- personnel records relating to occupational health and safety, staff development, salaries, payroll, compensation, industrial relations
- complaints, special reports.
- **Facilitative and ephemeral records:** Records of a routine or instructional nature that have no continuing value to the Department and are needed for a limited period of time. They do not need to be captured within TRIM.

Examples are:

- **Messages** that organise meetings or deliveries, fragments of email discussion on a matter, minor queries, minor service calls, or matters that do not relate to the business functions of the Department.
- **Rough drafts** of reports, or correspondence and routine or rough calculations not circulated to other staff for comment where a final draft has been captured on the appropriate subject file. **Note:** Versions of drafts that contain significant changes to content must be captured.
- **Duplicate (or extract) copies** of records, documents, policy directives, forms, etc where no meaningful annotations have been made.
- **Information material** produced or published by other organisations (eg external organisation's annual reports, price lists, catalogues, advertising material, brochures, flyers, journal articles, reports).
- **Reference sets** of manuals, directories, addresses and contact lists kept for information only.

The following questions may also provide guidance on what records should be captured:

- Does it approve or authorise actions?
- Is it formal communication between staff relating to work?
- Does it signify a policy change or development?
- Does it commit the Department of Health to an arrangement or business deal?
- Does it contain advice, provide guidance or constitute internal/external formal communication?
- Would this information be required for business continuity?
- Is this the final draft?

Records in any format created, received or maintained by staff in the course of carrying out a departmental function or activity must be captured. This includes paper records and digital formats such as emails, Word documents, spreadsheets, databases, web pages, digital photographs, scanned versions of paper documents and incoming mail.

Records must be captured in compliant recordkeeping or business systems to ensure they are locatable, that access and movement can be tracked and that the Department is able to account for all records. Departmental records should not be stored on local or network drives, floppy disks or USB keys.

Digital records must be captured in TRIM or compliant business systems to secure them against unauthorised access, alteration or deletion, to preserve their authenticity and to ensure that appropriate staff have access to them for as long as the records are required.

Metadata captured within compliant recordkeeping or business systems must meet minimum standards issued by State Records NSW to ensure the continued usability and integrity of records over time. Refer to the State Records NSW *Standard on Digital Recordkeeping (2008)* issued under the State Records Act 1998 ([www.records.nsw.gov.au](http://www.records.nsw.gov.au))

Guidelines for titling records should be outlined in the respective branch *Document Table* and ensure records that are of a highly sensitive or confidential nature are appropriately titled, for example Allegations, Grievances or Misconduct.

Guidelines for managing versions and revisions of a document is outlined in the Basic TRIM and EDM Guide (<http://internal.health.nsw.gov.au/ecsd/ssc/trimfaq.html>)

## 2.3 Document Table

Workshops are held to assist Branches incorporate TRIM into business processes. Workshops aim to map business processes in order to create a file folder navigation tool suitable to the Branch, known as the Branch super-folder structure. Additionally, it will focus on the Branch's typical records and identifies how these are to be managed using TRIM. The workshop provides an opportunity for the Branch to begin developing its respective Document Table.

The Document Table is a reference guide providing step-by-step instructions for managing files and documents using TRIM. It shows the records typically used (eg. Brief, meeting file) and indicates the action required for managing them, specifying titling, records protocols, access and security associated with the records

It is the responsibility of the Branch to maintain its Document Table.

## 2.4 Vital Records

**Vital records** include records needed to:

- ensure the Department of Health can operate during a disaster
- re-establish Department of Health functions after a disaster, and
- establish and protect the rights and interest of the Department of Health and its employees, customers and stakeholders.

In effect, they are records that are essential to the Department of Health. Without them the Department cannot establish, conduct or continue business effectively.

State Records NSW has released a *Standard on Counter Disaster Strategies for Records and Recordkeeping Systems* which is mandatory for the NSW public sector ([www.records.nsw.gov.au](http://www.records.nsw.gov.au)). For the purposes of that standard only, vital records are also seen to include:

- manuscript records of outstanding historical, cultural or symbolic importance
- records that have been identified in authorised disposal authorities as 'State archives'
- indexes and catalogues to these.

### 2.5 Storage

Records must be captured in compliant recordkeeping or business systems to ensure they are locatable, that access and movement can be tracked and that the Department is able to account for all records. TRIM and departmental files provide the official recordkeeping system. No Department records should be stored on local or network drives, floppy disks or USB keys.

All confidential documents and files in hardcopy should be locked in a secure area at the end of the day. Documents of a sensitive nature should not be left on desks at any time if the officer is not in attendance.

When not in use, it is preferable for hardcopy files to be kept in a lockable central storage area within the unit. This means the records are being kept securely, but allows access by co-workers.

Refer to the State Records NSW *Standard for Physical Storage of State Records (2000)* issued under the State Records Act 1998. ([www.records.nsw.gov.au](http://www.records.nsw.gov.au))

Records no longer in active use may be sent to Records Unit for storage. To avoid potential OH&S hazards of high volume of records being returned at once, please liaise with Records Unit staff to make suitable arrangements.

### 2.6 Maintenance and monitoring

Records must be appropriately maintained, stored and preserved for as long as the record is required.

The location of physical records needs to be recorded and updated with each movement of the record. This ensures that records, as assets, can be accounted for in the same way as the other assets of the Department. Staff should update TRIM when passing records on to another officer.

Maintenance of digital records can also entail the migration of data. Migration must be authorised by Associate Director, Technical Services Centre and must produce authentic, complete, accessible and useable records.

### 2.7 Disposal

Records must be retained for as long as they are needed to meet business needs and legislative requirements.

The Department of Health has two authorised functional retention and disposal authorities covering records relating to its core functions and activities. These are Disposal Authority: DA25 covering records documenting the function of managing the state's public health system as a whole and setting the standard of health care in NSW, authorised October 1999, Disposal Authority: DA57 covering records documenting aspects of the activity of data collection, authorised June 2000.

The Records Unit is responsible for coordinating and managing the disposal of departmental records.

The disposal of records must be documented and approved at a senior level. Records will not be disposed of without approval by the appropriate director or manager and in accordance with State Records NSW disposal authorities.

Certain ephemeral and facilitative records, such as brochures or pamphlets, may be disposed of under the provisions of normal administrative practice (NAP) as outlined in s22 of the State Records Act. This provision is intended to enable public offices to carry out a number of everyday, common sense procedures and practices.

If you are considering disposing of records, contact the Manager, Records Unit to ensure that you comply with requirements.

### 2.8 Access

Regardless of format, records must be accessible over time.

Records are available to all authorised staff that require access to them for business purposes.

Reasons for restricting access should be outlined in the respective branch Document Table to ensure appropriate security controls are applied to records of a highly sensitive or confidential nature.

### 2.9 Transfer

Confidential records must be transported securely and stored in secure locations with access limited to authorised users.

#### 2.9.1 Secondary storage

The Department of Health has an off-site secondary storage facility at the Government Records Repository (GRR) for the storage of physical records that are infrequently used for business purposes but still need to be retained in accordance with relevant retention and disposal authority.

The Records Unit is responsible for transferring these records to and retrieving them from GRR.

#### 2.9.2 Transfer to external agencies

All files being transferred or forwarded to other government departments or agencies, including other bodies within the Health portfolio, must be coordinated through the Records Unit.

Records should not be routinely transferred to other organisations, and only in extenuating circumstances would approval be given for their transfer.

All requests for transfer of records should be forwarded to the Corporate Records Manager and explain the reasons for transfer. A complete listing of the records is required showing:

- Record number
- Record title
- Name, position and organisation of officer accepting responsibility of records at receiving organisation

The request should be supported in writing by the respective Branch Director.

### 2.9.3 State Archives

Custody of records identified as State Archives may be transferred to State Records NSW or may remain with the Department according to a managed agreement with State Records NSW. Custody and control of all other records of continuing value are retained by the Department. Departmental records that are over 30 years old are eligible to be accessed by the general public under the State Records Act 1998, unless limited by access directions.

## 2.10 Responsibilities

### Director-General

The Director-General has a duty to ensure that the Department complies with the requirements of the State Records Act 1998 and with the regulations and requirements defined by State Records NSW. This includes the requirement for Department of Health to ensure that any records requiring technology to be read and understood remain accessible and available for as long as they are required.

### Corporate Records Manager

The senior manager nominated as Corporate Records Manager for the Department is the Chief Procurement Officer at the issuing of this protocol.

The Corporate Records Manager is responsible for ensuring the Department's compliance with recordkeeping standards and codes of best practice through the records management program and arranging for the program to be monitored by State Records NSW.

### Records Manager

The Records Manager is responsible for managing the records management program. This includes developing a recordkeeping framework with policies, procedures and guidelines and providing advice, support and training to enable departmental staff to meet their responsibilities under records management legislation.

### Directors and Managers

Directors and Managers are responsible for supporting the creation, capture, storage and monitoring of records by staff as part of normal business practice. This includes ensuring staff are adequately trained and aware of their responsibilities.

### All Staff

Staff are responsible for routinely creating accurate records of activities and decisions.

Staff must ensure that all records registered in the official recordkeeping system, or compliant business information systems, comply with departmental guidelines and procedures.

Staff must protect records from accidental damage or loss and protect sensitive records in their custody from unauthorised access.

Staff must not destroy Department of Health records.

Staff must not remove or take records off site without the approval of their respective Branch Director.

### **Contractors and consultants**

Contractors are subject to the same requirements as all staff.

### **Technical Services Centre**

Technical Services Centre staff work with Records Unit staff to ensure that infrastructure, systems, policies and procedures are in place to support the capture, maintenance, authenticity, access and disposal of digital records and their metadata for as long as required.

### **2.11 Records Unit**

The NSW Health Records Unit provides the following services in relation to records management:

- Provide advice on recordkeeping practices
- Provide support for the capture and maintenance of records
- Store, manage, maintain and provide access to records
- Monitor and conduct audits about the performance of Branches against procedures and standards, such as conducting an annual file census.
- Maintain and develop the departmental recordkeeping system (TRIM) and explore integration potential with other business information systems
- Provide training and assistance in records management and TRIM
- Develop and maintain records management procedures
- Manage the departmental business classification scheme
- Manage the departmental functional disposal authorities
- Coordinate disaster recovery planning and operations for records, which includes identifying and managing vital records for the Department of Health
- Manage secondary storage holdings
- Coordinate requests for file retrievals and returns to secondary storage
- Coordinate the cull, appraisal and disposal of departmental records
- Coordinate transfer of records between government departments and agencies including NSW Health entities
- Coordinate the process of identifying records that are state archives and arranging their transfer to State Records NSW
- Monitor compliance with policy, protocol and related policies

### 3. REFERENCES

- State Records Act 1998
- Freedom of Information Act 1989
- Evidence Act 1995
- Privacy and Personal Information Protection Act 1998
- Health Records and Information Privacy Act 2002
- Premier's Memorandum No. 2009-11 NSW Standard on Digital Recordkeeping
- PD2005\_626 Code of Conduct – NSW Health
- PD2005\_554 Privacy Management Plan – NSW Health
- PD2005\_289 Records Disposal Authority (DA 25) (Use of Functional) by NSW Department of Health
- IB2009\_027 NSW Standard on Digital Recordkeeping
- State Records NSW website: [www.records.nsw.gov.au](http://www.records.nsw.gov.au)
  - Standard - Physical Storage of State Records (2000)
  - Standard – Counter disaster strategies for records and recordkeeping systems (2002)
  - Standard – Full and accurate records (2004)
  - Standard – Managing a records management program (2004)
  - Standard – Appraisal and Disposal of State Records (2007)
  - Standard – Digital Recordkeeping (2008)



**Implementation checklist for Department of Health branches**

Assessed by:		Date of Assessment:	
IMPLEMENTATION REQUIREMENTS	Not commenced	Partial compliance	Full compliance
1. Branch staff have undertaken records management training including TRIM for Document Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<u>Notes:</u>		
2. Document Table developed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<u>Notes:</u>		
3. Document Table maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<u>Notes:</u>		
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<u>Notes:</u>		
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<u>Notes:</u>		
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<u>Notes:</u>		