

A red and gold pen is positioned diagonally across the center of the page, resting on a document. The document features a bar chart with red and yellow bars, and a line graph with various colored lines. The text "Information Governance Framework 2015-2017" is overlaid on the image in a bold, black, sans-serif font. The background is a blurred view of the document and the pen.

Information Governance Framework 2015-2017

1.0 Background 2013-2015

- 1.1 Over the past two years our Information Governance (IG) Framework has evolved from a simple framework covering Data Protection and Freedom of Information to a wider structure covering all six areas of Information Governance, including Information/Cyber Security, Information Sharing, Records Management and Data Quality.
- 1.2 Our existing Information Governance framework can be found at the following link: <http://www.wolverhampton.gov.uk/igov> along with our current suite of IG policies and procedures which are also detailed below:
- Quick Guide to Information Governance Policies
 - Data Protection Policy
 - Information Security Policy
 - Data Quality Policy
 - Transparency Policy
 - Confidentiality Audit Procedure
 - Information Governance Policy
 - Freedom of Information Policy
 - Records Management Policy
 - Information Protective Marking and Handling Policy
 - Information Risk Policy
 - Confidential Information Disposal Policy
- 1.3 We now have an established IG management structure; having in place key roles such as a Senior Information Risk Owner (SIRO), two Caldicott Guardians, the IG Board and a centralised IG Team, and as such covers the management of information governance at corporate, managerial and operational levels across the Council. Information Governance sits under the Cabinet Member for Governance.
- 1.4 Members of the IG Board have all received SIRO training which is compliant with the Information Governance toolkit. Both Caldicott Guardians are similarly trained to undertake their role and the training is also compliant with the standards required within the Information Governance toolkit.
- 1.5 The Information Governance Team itself has recently completed its restructure, and has made additional appointments to enhance the service and make the team robust enough to meet on-going demand. The new appointments include an Information Governance Manager, Records Manager, an IG Assistant and a temporary data protection/SAR officer – all of whom will have a positive impact on the team, specifically in relation to the processing of Subject Access Requests and Freedom of Information Requests. In turn, this will ensure that we have the necessary resources in place to enable us to continue to meet our legal requirements and performance targets in both functions for the next two years.

- 1.6 Performance in responding to Freedom of Information requests has also greatly improved during this period. In 2012/13 performance in responding to FOI requests was 56% and 2014/15 was 95%.
- 1.7 In 2015 we achieved level two in the Local Government Information Governance toolkit.
- 1.8 The approach and objectives below and in Appendix A outline the key areas of focus for IG over the next two years that will build on the Council's existing IG framework whilst supporting the delivery of the Corporate Plan and the Council's Confident, Capable Council agenda.

2.0 Implementing the information governance framework for 2015-17

2.1 Policy

To ensure that all Information Governance (IG) policies and procedures are regularly reviewed and updated to meet statutory requirements and be aligned with industry specific best practice.

This will be achieved by scheduling policy and procedure reviews throughout the year, in line with the IG work programme and the delivery of other key IG objectives for the year (as discussed later in this paper).

In detail:

- Review the existing IG policy and procedure repository to identify policies that are due to be updated.
- Schedule individual policy reviews throughout the year in accordance with the IG work programme.
- Undertake a gap analysis against the Council's IG framework to identify any gaps in policy and procedure.
- Document new policies and procedures for IG functions identified as part of the above gap analysis; once approved, support the rollout and implementation of the policies – linking in with the IG Communication plan and IG Training requirements.

2.2 Freedom of Information (FOI)/ Environmental Information Regulations (EIR):

To enhance the current process for dealing with Freedom of Information and Environmental Information Regulations requests so that information is easier to access; duplication of information is reduced; time and cost savings are made through efficiencies in process and the quality and timeliness of information provided by the business is improved through wider staff awareness of both regimes.

This will be achieved through increased training and awareness of employees both internal and external to the Information Governance (IG) team; through the development

of procedural documents that meet best practice and legislative requirements; through a slicker more efficient request handling administration process and through a robust monitoring and review process which includes analysis of the publication scheme, disclosure log and internal reviews to identify trends and capacity for improvements.

In detail:

Training and Awareness: to ensure that employees internal and external to the IG team are appropriately trained to support the information request function:

- All IG team members will be formally trained in FOI & EIR to the level of qualification applicable for their role. This will ensure that requests are dealt with in line with legal requirements and best practice – thus making the process and responses more robust to scrutiny.
- Introduce the concept of “FOI champions” across the business to raise awareness of both regimes and to increase stakeholder engagement and buy-in.
- A FOI mentor or lead to be assigned who the team and the business can approach for support and guidance.

Policy and Procedure: to ensure that policy and procedures for dealing with FOI/EIR requests are documented, are up to date and fit for purpose:

- The current FOI/EIR policy to be reviewed and updated with any legislative changes as applicable.
- Map the current FOI/EIR request handling process against best practice guidelines and develop a FOI/EIR procedure document that outlines the process and covers business rules, decision trees for authorisation/approval/Public Interest Tests etc.

Administration: to introduce a slicker administration process to support the FOI/EIR request function:

- Develop a ‘request triage’ which will be facilitated by the IG Assistant whereby simple requests will be dealt with at first touch point into the team (such as where information is on data-share, disclosure log etc.) and more complex requests to be dealt with by IG Officers.
- FOI/EIR repository to be developed to store letter templates, example exemption responses, FOI contact/champion list once developed.
- FOI/EIR request log and interim spreadsheet to be reviewed and updated to ensure it is fit for purpose both operationally and for management information reporting purposes.

Monitoring and review:

- The publication scheme to be monitored annually to see how it is operating and what improvements can be made.
- The disclosure log to be monitored annually to identify key trends, eliminate duplication and to assess how it is being utilised and the benefits it is delivering.
- Internal reviews are to be recorded and monitored to identify trends or gaps in process and to support the quality assurance process.
- Introduce a quality assurance/control framework within the team for request handling.
- Review the reporting mechanism to ensure that it meets stakeholder requirements and provides analysis on each area of the business.

2.3 Data Protection

To ensure that the Council is meeting the key legislative requirements of the Data Protection Act – in particular to review and enhance the current Subject Access Request process to ensure that all requests are responded to correctly and on time; to ensure that the collection and use of information is fair and transparent and that the privacy rights of the public are not adversely affected through the procurement/upgrade of any system or any change in business or service delivery.

This will be achieved through increased training and awareness of staff both internal and external to the IG team to support the information request function; to champion the use of Privacy Impact Assessments to ensure that projects such as Future Spaces and CRM are supported and that privacy risks are identified, managed and mitigated; through the development of procedural documents that meet best practice and legislative requirements – including a review of the proposed EU Data Protection Regulation and the impact the changes could impose on the Council when the regulation is passed in 2015 and comes into force in 2017; through a more efficient request handling administration process and through a robust monitoring and review process which includes analysis of the request types, their size and complexity to identify peaks and troughs throughout the year and to enable capacity planning so that all requests can be dealt with, within the statutory timeframes.

In detail:

Training and awareness: to ensure that staff internal and external to the team are appropriately trained on Data Protection to support the information request function and to champion the use of Privacy Impact Assessments (PIAs):

- IG team members will be trained in dealing with Subject Access Requests (SAR) and other information disclosure requests.
- To further develop and champion the use of the use of PIAs across the business to highlight privacy risks and issues at the earliest stage of any new project, process or system. This will include working closely with the Council's Programme Office.

- Review access points for SAR requests – including the data protection web-pages, use of e-forms, literature etc. and ensure that all access points are up to date and easily accessible.
- A Data Protection mentor or lead to be assigned who the team and the business can approach for support and guidance on Data Protection related matters – including privacy notices, PIAs and wider information disclosure requests.

Policy and procedures: To ensure that policy and procedures for dealing with data protection requests are documented, are up to date and fit for purpose. To develop a corporate PIA template with supporting guidance documentation:

- The current data protection policy to be reviewed and updated with any legislative changes as applicable. Horizon-scan the document in line with the proposed EU Data protection regulation.
- Map the current SAR request handling process against best practice guidelines and develop a SAR procedure document that describes the process in detail - from acknowledgement and validation, the use of exemptions and the methods of supplying information to the requester.
- Develop a user friendly PIA template with supporting guidance documentation that covers both initial screening and full assessment and includes business specific examples.
- Review the current PIA process within the Programme Office Toolkit and update in line with any enhancements made to the PIA process.

Administration: to introduce a slicker administration process to support the SAR function and improve current turnaround times for completion of requests.

- Develop a “request triage” which will be facilitated by the IG Assitant whereby simple validation can be carried out, requests acknowledged and information/files requested.
- Data Protection repository to be developed to store letter templates, example exemption responses, and Data Protection contact/champion list, once developed.
- Data Protection request log and interim spreadsheet to be reviewed and updated to ensure it is fit for purpose both operationally and for management information reporting purposes. All information and disclosure requests to be differentiated and recorded separately to enhance the reporting requirements.

Monitoring and review: to ensure that requests are handled correctly and within the statutory timeframes; identify peaks and troughs throughout the year to allow for capacity planning; to review the effectiveness of PIAs.

- Introduce Quality assurance/control framework within the team for request handling.
- Timescales for completing requests – analysis against size and complexity of each request and where it originates from (social care, HR etc.)
- Regularly review and monitor the payment handling procedure to identify improvements to the process.
- SAR backlog – RAG progress reporting to be developed within the team to highlight requests that are about to breach timescales and to incorporate contingencies.
- Complaints/Internal reviews are to be recorded and monitored to identify trends or gaps in process and to support the quality assurance process.
- Enhance the current reporting mechanism for the business to ensure that it meets stakeholder requirements and provides analysis on each area of the business.

2.4 Information Sharing:

The focus this year will be to champion the use of Wolverhampton Information Sharing framework and the newly revised supporting documentation both internally within the Council and externally in the multi-agency environment to ensure that the framework is embedded and a clear, consistent approach to information sharing is being adopted. Specifically within the Council, a key objective is to target those teams within Place and Corporate directorates where the information sharing needs are yet to be scoped and to raise the profile of information sharing through a targeted communication mechanism. Similarly, from an external multi-agency aspect, the key driver for the this period is for partner agencies across the City to work together to analyse one another's level of confidence in information sharing, to share best practice, and to develop and implement a City-wide training and awareness portfolio which meet the needs identified. This in turn will support multi-agency initiatives such as the Wolverhampton MASH, Safeguarding Trigger Trees, phase two of the Families in Focus project, the Better Care Fund and other Health and Social Care integration projects.

In detail:

Internal to the Council:

- To develop an ISP amnesty to identify what information sharing agreements are in existence across the Council and in what format to identify how closely teams and departments are working to the Wolverhampton framework and to identify gaps in knowledge and understanding.
- To raise the profile of information sharing by running a targeted communication campaign through the year; this will be supported by a series of workshops, drop-in sessions and surgeries for staff to participate in.
- To develop a repository for information sharing agreements that is accessible to all.

Multi-agency environment:

- Though the Wolverhampton Information Sharing Group, develop and roll out a targeted information sharing awareness campaign which includes drop-in sessions and surgeries that are run and hosted by each agency throughout the year.
- To support the above with the development of a multi-agency e-learning training module.

2.5 Information Security:

To ensure that the Council is meeting the key legislative requirements of principle seven of the Data Protection Act and in particular, to review how we are meeting and sustaining requirements around information security and that our processes are fit for purpose. The key focus for this year is to undertake pattern and trend analysis, identify areas for improvement through action plans and the lessons learnt from information incidents and near misses. In addition, IG will work closely with HR and Audit to ensure that duplication of work is eliminated where both functions interact with IG investigations and that a clear, consistent approach is adopted.

In detail:

- Review the current information incident reporting tool to ensure that we have a process for recording and managing information incidents that are aligned with both the SIRI reporting tool and IG toolkit requirements.
- To link analysis on trends and patterns of IG incidents to inform training and communication requirements; working closely with Workforce Development and Communications when doing so.
- Document a procedure for investigating breaches where Audit and HR are involved which includes a decision gateway for progressing to disciplinary proceedings.
- To review the Cyber Essentials requirements against current policy and procedures and update as necessary.

2.6 Data Quality:

To develop a strategy linked to the IG toolkit that ensures that we have the quality of data in place to meet statutory requirements for data protection and freedom of information and to encourage and facilitate multi-agency information sharing initiatives that require data extract, matching and analysis, such as the Better Care Fund and SEND projects.

In detail:

- Process map data flows within the council, specifically to identify what systems are being used and where data is being inputted or imported. Link this to the Information Asset Register.
- Document a Data Quality strategy which includes
- The production and rollout of any supporting policy and procedure documentation
- The development and delivery of training and awareness raising around data quality and the impact it has on operational functions.
- Audit and monitoring of data quality – engaging with stakeholders and securing team ownership through data quality champions across the business.
- Undertake a gap analysis for a baseline position statement on Data Quality.

2.7 Training

To ensure that all staff – new and existing – are aware of the IG framework and all of the functions underpinning it and that we can evidence compliance with the IG Toolkit requirements for the training and development of staff.

We will achieve this by working with workforce development to review the IG framework training modules to identify and fill gaps in current training, such as information sharing and data quality. The current e-learning mandatory training modules will be reviewed and updated and a robust and efficient mechanism for reporting on training take-up will be incorporated. In addition, IG awareness raising will be undertaken throughout the year through briefings, workshops and surgeries and where required, adhoc training will be delivered to support various areas of the business who are at risk of non-compliance. Training delivery will be monitored and reviewed so that there is evidence of learning, which can be linked to individual's PDPs and appraisals – this will in turn help support and develop the Council's IG maturity level and move us towards meeting level three of the IG Toolkit.

2.8 Records Management

To review all existing Records Management policies and procedures and ensure these comply with the Lord Chancellor's Code of Practice on the management of records, best practice across Local Government, National Archives' recommendations, appropriate standards and statutory requirements. The project will include introducing new policies and procedures, where appropriate, to ensure legal compliance and meet business requirements. To provide Records Management knowledge and expertise to the Future Space and Civic Centre Storage Projects in order to reduce and better manage any on-site storage of paper records and free up office space. To ensure any recommendations around the future strategy for storing and maintaining the Council's records take into account the aims of the Future Space and storage projects.

Throughout the course of the project support will be given to those areas of the Council which hold large number of sensitive records such as Children's Social Care, Adults Social Care, Legal Services and Human Resources.

In detail

This project will be achieved by the implementation of a Programme across the Council's records including the following elements:

- A review of the current published Records Management policy
- An Information Survey to identify the records created and held by the Council
- The identification of Records Management risks and the recommendation of mitigating actions
- The implementation of agreed procedures for tracking, safeguarding and disposing of records throughout their lifecycle
- Legally compliant Disposal Schedules agreed with business areas
- Stakeholder engagement and staff training to promote a culture of excellence in Records Management across the Council
- The development of a business case for back scanning of document
- Recommendations for future strategy on storage and maintenance

	High Level Statement & Measurement	Key Deliverables & Milestones				
		Q1 2015/16	Q2 2015/16	Q3 2015/16	Q4 2015/16	Q1 – Q4 2016/2017
Policy	<p>To ensure that all Information Governance (IG) policies and procedures are regularly reviewed and updated to meet statutory requirements and be aligned with industry specific best practice.</p> <p>Measurement:</p> <ul style="list-style-type: none"> ➤ All policies have been reviewed and updated accordingly by Q4 2015/16. 	<p>Individual reviews for existing IG policies scheduled for the year.</p>	<ul style="list-style-type: none"> • Policy gap analysis started. • Gaps in policy and procedure identified. 			<p>Individual reviews for existing IG policies scheduled for the year.</p>
			<ul style="list-style-type: none"> • New policies documented, approved and implemented • Existing policies updated and approved • Policy procedure and supporting documents documented, approved and implemented. 			
Freedom of Information	<p>To enhance the current process for dealing with Freedom of Information and Environmental Information Regulations requests so that information is easier to access; duplication of information is reduced; time and cost savings are made through efficiencies in process and the quality and timeliness of information provided by the business is improved through wider staff awareness of both regimes.</p> <p>Measurement:</p> <ul style="list-style-type: none"> ➤ FOIA/EIR requests handled within 95% (5% Tolerance). ➤ IG team are trained in FOIA/EIR (BCS certification achieved, as applicable) by Q4 2015/2016. ➤ Request handling process and procedure documented and fully operational. ➤ ⁱⁱ% Decrease in the time spent chasing and collating information. 	<ul style="list-style-type: none"> • BCS training in FOIA for IG. officers started. • FOI business champions identified. • Disclosure log base-lined. • Revised FOI/EIR request log and interim spreadsheet in place. • FOI/EIR response rate for Q1 reviewed & analysed. 	<ul style="list-style-type: none"> • IG Officers BCS qualified in FOIA. • IG Assistant trained in FOI basics. • FOI/EIR process mapped and baselined. • FOI/EIR procedures documented. • FOI/EIR Response triage started. • FOI/EIR response rate for Q2 reviewed & analysed. 	<ul style="list-style-type: none"> • Trend analysis undertaken on Internal Reviews. • FOI/EIR response rate for Q3 reviewed & analysed. 	<ul style="list-style-type: none"> • Publication Scheme reviewed and updated, as applicable. • Disclosure log reviewed, findings documented and recommendations made. • FOI/EIR response rate for Year End reviewed & analysed. 	<ul style="list-style-type: none"> • Disclosure log base-lined.
			<p>Awareness raising sessions in place with teams across the business/ FOI Champions.</p>			

	High Level Statement & Measurement	Key Deliverables & Milestones					
		Q1 2015/16	Q2 2015/16	Q3 2015/16	Q4 2015/16	Q1 – Q4 2016/2017	
Data Protection	<p>To ensure that the Council is meeting the key legislative requirements of the Data Protection Act – in particular to review and enhance the current Subject Access Request process to ensure that all requests are responded to correctly and on time; to ensure that the collection and use of information is fair and transparent and that the privacy rights of the public are not adversely affected through the procurement/upgrade of any system or any change in business or service delivery.</p> <p>Measurement:</p> <ul style="list-style-type: none"> ➤ SAR requests handled within 80% (20% Tolerance) ➤ All IG team are trained in handling SAR requests. ➤ Request handling process and procedure documented and fully operational. ➤ Upward trend in PIA take-up evidenced by Q4 2016/17 (cross referenced with Programme Office and base-line) 	<ul style="list-style-type: none"> • IG Officers are SAR trained. • PIA templates and supporting documentation drafted. • ⁱⁱⁱPIA base-lined. • Revised SAR request log and interim spreadsheet in place. • SAR response rate for Q1 reviewed & analysed. 	<ul style="list-style-type: none"> • PIA templates approved and implemented. • Relevant IG Officers are trained in PIA facilitation. • SAR process mapped. • SAR procedures documented • SAR Response triage started. • SAR response rate for Q2 reviewed & analysed. 	<ul style="list-style-type: none"> • Privacy Notices reviewed and updated. • SAR template repository completed. • SAR response rate for Q3 reviewed & analysed. 			
		PIA awareness raising sessions undertaken across the business.					
		PIAs undertaken by the business.					
Information Sharing	<p>To champion the use of Wolverhampton Information Sharing framework and the newly revised supporting documentation both internally within the Council and externally in the multi-agency environment to ensure that the framework is embedded and a clear,</p>	<ul style="list-style-type: none"> • Approach to multi-agency training and awareness campaign agreed. 	<ul style="list-style-type: none"> • Tier 1 Over Arching Agreement approved by Cabinet. • Internal ISP amnesty initiated. 	<ul style="list-style-type: none"> • Multi-agency IS e-learning modules developed. 	<ul style="list-style-type: none"> • Multi-agency e-learning modules launched. • Post multi-agency awareness campaign review undertaken. 	<ul style="list-style-type: none"> • Tier 2 & 3 IS agreements reviewed. • Tier 2 & 3 agreement reviews scheduled for the year (as applicable) 	

	High Level Statement & Measurement	Key Deliverables & Milestones				
		Q1 2015/16	Q2 2015/16	Q3 2015/16	Q4 2015/16	Q1 – Q4 2016/2017
	<p>consistent approach to information sharing is being adopted.</p> <p>Measurement:</p> <ul style="list-style-type: none"> ➤ Information sharing e-learning module implemented by end of Q4 2015/16. ➤ Upward trend in Multi-agency confidence levels evidenced by ^{iv}xxx Q4 2015/16 ➤ The use of Tier 2 & 3 Information Sharing agreements has increased by XX%^v at the end of Q4 2015/16 		<ul style="list-style-type: none"> • Approach to internal awareness raising campaign agreed. • Repository of Tier 2 & 3 IS agreements developed and live. • IS confidence levels base-lined (Multi-agency). • Multi-agency training and awareness campaign agreed. 		<ul style="list-style-type: none"> • Multi-agency IS confidence levels base-lined and analysis conducted. 	<ul style="list-style-type: none"> • Multi-agency Information Sharing objectives agreed for the year.
		Information Sharing agreements developed (on-going)				
Information Security	<p>To ensure that the Council is meeting the key legislative requirements of principle seven of the Data Protection Act – in particular to review how we are meeting and sustaining requirements around information security and that our processes are fit for purpose.</p> <p>Measurement:</p> <ul style="list-style-type: none"> ➤ Key trends on data incidents identified and reduction targets set for 2016/17 ➤ Reportable incidents are reported within set SIRI and ICO reporting timeframes. ➤ Improved incident reporting process and procedure in place. 	<p>Base-line trend analysis on previous reported data incidents collated and published.</p>	<ul style="list-style-type: none"> • Information Incident reporting mechanism reviewed and improvements identified. • Trend analysis on data incidents undertaken for Q2 • Consultation with Audit, HR and Legal initiated. • Consultation with Workforce Development and Communications initiated. 	<ul style="list-style-type: none"> • Process defined and supporting procedure documents approved and rolled out. • Training and communication mechanism defined, approved and in place. • Trend analysis on data incidents undertaken for Q3 	<p>Trend analysis on data incidents undertaken for Q4 and Year end.</p>	<p>Reduction targets agreed for 2016/17 (for each data incident type/theme)</p>

	High Level Statement & Measurement	Key Deliverables & Milestones				
		Q1 2015/16	Q2 2015/16	Q3 2015/16	Q4 2015/16	Q1 – Q4 2016/2017
Page 288	<p>Data Quality</p> <p>To develop a strategy linked to the IG toolkit that ensures that we have the quality of data in place to meet statutory requirements for data protection and freedom of information and to encourage and facilitate multi-agency information sharing initiatives that require data extract, matching and analysis, such as the Better Care Fund and SEND projects.</p> <p>Measurement:</p> <ul style="list-style-type: none"> ➤ NHS numbers being utilised within core systems (Carefirst/One/Tribal etc.) by Q4 2015/16. ➤ Data flows process mapped by end of Q4 2016/17. 	<ul style="list-style-type: none"> • N3 connection expanded for Social Care 	<ul style="list-style-type: none"> • Data flow mapping strategy documented and agreed. • NHS number Batch Trace Facility with HSCIC in place. 	<ul style="list-style-type: none"> • Data Quality strategy drafted • Data flow process mapping initiated. 	<ul style="list-style-type: none"> • Data Quality Champions identified across the business • Data Quality gap analysis initiated. 	<ul style="list-style-type: none"> • Data quality work packets defined and initiated (training, monitoring and assurance, etc.) • Data flow processing mapping completed and linked to Information Asset Register.
	<p>Training</p> <p>To ensure that all staff – new and existing – are aware of the IG framework and all of the functions underpinning it and that we can evidence compliance with the IG Toolkit requirements for the training and development of staff.</p> <p>Measurement:</p> <ul style="list-style-type: none"> ➤ Continued 100% take up of IG e-learning modules for new starters. ➤ E-learning modules in place for all 6 elements of IG framework by Q4 2015/16. 	<ul style="list-style-type: none"> • IG E-learning modules reviewed in line with IG Framework & Toolkit • Gaps in training modules identified. 	<ul style="list-style-type: none"> • Existing IG e-learning modules updated • New IG modules developed. 	<ul style="list-style-type: none"> • Mandatory training modules linked to Personal Development Plans and Annual Appraisals. • New IG e-learning modules are live. 	<p>IG Awareness raising and adhoc departmental training, workshops and surgeries delivered.</p> <p>On-going new starter training and existing refresher training delivered (e-learning modules).</p>	

	High Level Statement & Measurement	Key Deliverables & Milestones				
		Q1 2015/16	Q2 2015/16	Q3 2015/16	Q4 2015/16	Q1 – Q4 2016/2017
Records Management	<p>*To implement a Records Management Programme across all records created as a result of the Council's business activities.</p> <p>Measurement:</p> <ul style="list-style-type: none"> ➤ Scoping of programme and the production of a Project Initiation Document ➤ Review of current Records Management policy ➤ Completion of an Information Survey ➤ Creation of a Risk Register and identification of mitigating actions ➤ Review of procedures for tracking, safeguarding and disposing of records ➤ Production of Disposal Schedules ➤ Production of Stakeholder guidance and staff training materials ➤ Recommendations for future Records Management strategy ➤ The development of a business case for back scanning of document <p>*(Caveat – This project has just started and is currently being scoped. Some of the deliverables and milestones may be subject to change)</p>	Project documentation created	Records Management Survey completed	Risks and mitigating actions identified	Review of Records management policies and procedures	<p>Publication of Disposal Schedules</p> <p>Commencement of work on staff training materials and recommendations report.</p>

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- ⁱ Measurements for some objectives to be determined following a baseline process being undertaken.
 - ⁱⁱ Current process to be base-lined to identified time spent chasing information.
 - ⁱⁱⁱ Base-line to be carried out on the number of PIAs currently in progress or completed at the end of Q1 2015/2016.
 - ^{iv} Measurement to be agreed
 - ^v Base-line to be carried out on the number of ISAs currently in place or completed at the end of Q1 2015/2016.