

**ACT Health Administrative**

 **Recordkeeping**

**Procedures Manual**

**Records ensure**

**Accountability Integrity Knowledge**

**Version 3.0**

**Updated March 2017**

**Section 1**

**Administrative Records**

**ACT Health - Records Management**

**Building 3, 9 Sandford Street, MITCHELL**

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**Amendment history - Section 1**

| **Version** | **Issue date** | **Amendment details** | **Author** |
| --- | --- | --- | --- |
| 1.0 | November 2012 | Initial release ACT Health | Shar Wyer |
| 2.0 | November 2015 | Revision  | Shar Wyer |
| 3.0 | March 2017 | Revision for inclusion of Digital Records, Aboriginal and Torres Strait Islanders and Management of Clinical Trials Records | Jeanne McLauchlanAnne Folger-Pleuger |

**Section 2**

**Personnel Records**

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**Amendment history - Section 2**

|  |  |  |  |
| --- | --- | --- | --- |
| 2.0 | November 2015 | Revision  | Debbie Arsego  |
| 3.0 | March 2017 | Revision | Debbie Arsego Stella Barnes |

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**Section 1**

**Administrative Records**

**ACT Health - Records Management**

**Building 3, 9 Sandford Street, MITCHELL**

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# Section 1. Administrative Records

# 1.1 Administrative Records Management

## 1.1.1 **Introduction**

Good recordkeeping management practices applied throughout ACT Health support efficiency and accountability through the creation, management and retention of accurate, reliable and accessible evidence of government activities and decisions.

The retention and preservation of our corporate memory, in the form of records, ensures that all staff meet their functional and legislative obligations for maintaining proper and complete records. This reduces the possibility of error, fraud, manipulation or destruction of relevant information to ensure an accurate audit trail exists for all decisions, actions and operations.

Failure to capture all relevant documents in a recordkeeping system can expose ACT Health to significant risk, especially when business disputes arise, in litigation or in cases involving public accountability. This risk arises when records cannot be found or are destroyed inadvertently.

When controlled effectively, responsible management of an organisation’s business processes improves efficiency. This is supported by ensuring that the organisation’s vital information is captured and maintained as evidence of business activities, and is accessible throughout a record’s determined lifespan.

## 1.1.2 **Scope**

This procedures manual is designed to provide guidance to ACT Health staff (including students, volunteers, consultants, contractors and / or service providers) in relation to the appropriate management of administrative records.

## 1.1.3 **Out of Scope**

This procedures manual excludes ACT Health clinical records which are addressed under the Clinical Records Management Policy, in conjunction with associated procedures and supported by the Clinical Records Management Manual. Any inquiries in relation to clinical/patient records should be referred to the Clinical Records Service at Canberra Hospital and Health Services (CHHS).

## 1.1.4 **The Purpose**

All ACT Health staff are responsible for the creation and management of records, and this procedures manual will assist staff to meet their responsibilities and requirements of the *Territory Records Act 2002*. This document forms part of the records framework, and is designed to complement the Administrative Records Management Policy and is to promote consistent and coherent processes and practices, and form part of the organisation’s Normal Administrative Practices (NAP).

# 1.2 Legislative obligations

## 1.2.1 **The Territory Records Office and Territory Records Act**

The Territory Records Office (TRO) assists Directorates across the Australian Capital Territory (ACT) to meet records management requirements as set out in the [***Territory Records Act 2002***](http://www.legislation.act.gov.au/a/2002-18/default.asp) (“the Act”).

The TRO is responsible for the implementation of the *Act*. The main purpose is to:

1. Encourage open and accountable government by ensuring that Territory records are made, managed and, if appropriate, preserved in accessible form;
2. Preserve Territory records for the benefit of present and future generations; and
3. Ensure that public access to records is consistent with the principles of the [***Freedom of Information Act 1989***](http://www.legislation.act.gov.au/a/alt_a1989-46co/default.asp).

The Standard and Guidelines for Records Management, which have been developed by the TRO, are used by all ACT Directorates in the development of their respective Records Management Programs.

The Act establishes that each Directorate / Agency is required to develop and maintain a Records Management Program which includes requirements for the creation, management, access, protection, preservation, storage and disposal of the records of the Directorate/Agency.

Agencies are required to develop a Records Management Program that is appropriate and relevant to their functional requirements utilising the Standard and Guidelines approved by the Director of the TRO.

**Pathway to TRO internet site**: HealthHub / Shared Services ICT / Records and Mail Services - Helpful Resources Contact details: TRO Internet site

## 1.2.2 **The ACT Health Records Management Program**

ACT Health captures and maintains official administrative records to support its business needs (including legal obligation, regulatory obligations and broader community expectations etc). An analysis of the records management requirements, and an outline of the types of records that ACT Health must capture and maintain, are addressed under the Records Management Program. This involves:

* An implementation and promulgation strategy to all ACT Health staff so that everyone understands their recordkeeping management responsibilities;
* An Administrative Records Management Policy and supporting Administrative Recordkeeping Procedures Manual and resource for other records management procedures;
* A review of the Records Management Program on a regular basis (at least every five years).

## 1.2.3 **Managing Aboriginal and Torres Strait Islander Records**

ACT Health must conservatively manage any records that contain information that may allow people to establish links with their Aboriginal or Torres Strait Islander heritage. The legal source for this approach is the *Territory Records Act 2002* and this includes any subordinate legislation, Notifiable Instrument or Disallowable instrument - [**Refer to TRO Records Advice No 60**](http://www.territoryrecords.act.gov.au/recordsadvice)**.**

## 1.2.4 **What is a Record?**

AS ISO 15489 is the Australian and international standard for information and records management and defines a record as follows:

“Information created, received, and maintained as evidence and information by an agency or person, in pursuance of legal obligations or in the transaction of business.”

The *Act* requires an agency to make and keep full and accurate records of its activities:

* To provide evidence
* For ongoing use
* To allow public access to them consistent with the principles of the Freedom of Information Act 1989
* For the benefit of future generations

Records must be maintained in a manner that allows for accountability of the processes and decisions of government.

They must also be a complete record, have content, context and structure, and accurately reflect what was communicated, decided or done - [**Refer to TRO Advice No 1**](http://www.territoryrecords.act.gov.au/recordsadvice)**.**

Records may be in any form:

* Paper, microfilm, digital;
* Documents or files, maps, plans, drawings, photographs etc.;
* Data from business systems, word-processed documents, e-mail, digital images;
* Audio or video; and
* Handwritten documents.

Principles of full and accurate records

* **Complete** – in order to be understood
* **Adequate** – for the purposes for which they are kept
* **Accurate** – with description and control mechanisms
* **Authentic** – to show the business transactions they purport to represent
* **Usable** – by being identifiable, retrievable, accessible and available
* **Inviolate** – with appropriate security requirements

## 1.2.5 **What is Record Keeping?**

Record keeping is the process of making and maintaining complete, accurate and reliable evidence of business activities in the form of recorded information.

Records are an essential part of transparent and accountable Government. Records provide evidence, explain actions, justify decisions and demonstrate the process undertaken. In addition, the record:

* contributes to business efficiency and accountability;
* builds corporate memory;
* complies with best practice;
* supports improved productivity (through ease of access to information for real time decision making);
* enables re-use of past work instead of re-inventing the wheel;
* provides evidence when decisions or actions are challenged;
* documents the rights and entitlements of individual and organisations;
* preserves information assets in order to meet legal requirements; and
* ensures that records of corporate / historical significance and/or value are retained and preserved.

## 1.2.6 **Management of Clinical Trials Records**

Records pertaining to research / clinical trials are also included in administrative recordkeeping for business purposes. These records include clinical data, clinical information and personal details.

Clinical Trials records are paper-based, registered on HP Records Manager and can only be accessed by the specific business areas.

The storage of these paper-based records is managed by Records Management as per TRO requirements. Records Management and the Clinical Trials Unit have guidelines and procedures in place for the management of these particular records.

Any inquiries in relation to clinical trials records should be referred to the Clinical Trials Unit at Canberra Hospital and Health Services (CHHS).

# 1.3 Function and Content of ACT Health Records Management

## 1.3.1 **Records and Information Lifecycle**

Records and Information management is the discipline and organisational function of managing records and information to meet operational business needs, accountability requirements and community expectations. The records lifecycle outlines each phase of a document life including record creation (file creation), record keeping, protection, preservation, storage, access and disposal. It helps agencies plan for storage, protection, retrieval, and destruction of information at different stages.

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**Permanent Disposal**

**Storage**

**Use and Maintenance**

**Creation or Receipt**

**ARCHIVE**

## C:\Users\Wendy Hare\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\7FZF2R36\MC900012878[1].wmf1.3.2 **Business Activity Correspondence / Documents (Records)**

The following correspondence / documents that should be placed on an official hardcopy file is the responsibility of, and produced by a Business Unit:

* Letters, submissions, ministerial, reports, briefs, enquiries and responses
* Agreements/contracts, joint ventures and Memorandum of Understanding (MOU’s)
* Statistical data e.g. Key Performance Indicators (KPIs) / scorecards
* Investigation cases, complaints
* Business plans / cases
* Work Place Safety records
* Accreditation, quality assurance and risk management documentation/evidence
* Financial transactions, such as receipts, invoices, salary reports, budget, spreadsheets procurement and tender documents
* Personnel employment records
* Committees/working groups and / or task force etc. agenda and minutes
* Policies and procedures

## C:\Users\Wendy Hare\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\APN1C3OS\MC900048272[1].wmf1.3.3 **Post-It notes**

Post-It notes are convenient mechanisms to flag items or communicate requirements but are difficult to file, as are working notes. These should be included only when significant e.g. reflecting key decisions or directives and when not otherwise captured in a record such as meeting minutes.

## C:\Users\Wendy Hare\Pictures\Microsoft Clip Organizer\00297631.wmf1.3.4 **Maps, transcripts, plans, schedules and published material**

Master hard copy plans, drawings and maps produced or received by ACT Health as part of their normal business activities should be managed and maintained in a way that facilitates their retrieval and protects them from damage for the length of time they are required to be retained - [**Refer to TRO Records Advice No 51**.](http://www.territoryrecords.act.gov.au/recordsadvice)

These documents are stored specific to requirement (i.e. may not store readily within a file) and are required to be retained when significant. Published material is stored separately and when of original material generated by ACT Health.

Agencies can produce numerous digital photographs which may need to be retained for varying periods of time. In some instances, there could be multiple photographs associated with one file (e.g. new ACT Health Buildings). It may not be convenient or cost effective to print large numbers of photographs and place them all on a hard copy file. It may be more appropriate to store digital photographs. Contact Records Management for further information in regards to the digitisation and capture of hardcopy plans, maps etc. via HP RM.

## 1.3.5 **CD’s, DVD’s, Audio Files, Digital Photographs and Images**

Formats such as, disks, CD’s, DVD’s, are other record formats that also need to be kept as evidence of business transactions where appropriate hard copy has not been generated to the official paper based file. CDs and DVDs are not suitable for long term archival use.

These record formats inevitably become obsolete over time, therefore continuous upgrading/re-formatting needs to be undertaken to ensure that any information is accessible and able to be used whilst still legally required. Ideally such record formats are converted to official paper based files and the storage media destroyed appropriately, or if preferred, the CD / disc can be retained and attached to the inside file cover. Where hardcopy generation is precluded, arrangements may be made for the appropriate storage of the device with Records Management.

## RECALL BOX.JPG

## 1.3.6 **Other non-standard items**

Due to size and/or format of items, non-standard records are better contained and registered as box file records rather than as standard files. For example, non-standard paper-based items/records needing to be kept as evidence and used for future administrative purposes or kept due to being of historical or social interest. Further advice can be sought from Records Management.

## 1.3.7 **Non-Compliant Applications, Business Systems and / or Electronic Devices**

**  **

## 1.3.8 **Applications**

SharePoint, Shared Drives and Email (Outlook) software applications although used for producing and disseminating information are not compliant in regards to being used as a single source of capture, maintenance and retention. Documents / business transactions therefore need to be produced in hardcopy, where significant, and then placed on a relevant hardcopy file.

It is also important that staff consider any significant drafts, consultation documents as well as any email attachments that provide context in regards to a particular subject matter and / or process e.g. how a decision was reached or a report or policy formalised.

Electronic directories in Shared Drives are usually set up in a hierarchy with top-level folders and agency branches having their own secure folder containing a series of subject-based folders. These folders typically are relatively unstructured and tend to reflect the organisational structure of an agency.

Shared Drives do not provide for a central point of contact like that of HP RM with holistic access in order to be able to search and locate information if or when required outside of general owner area and / or portfolio hierarchy only access. This means that vital information is not known to staff let alone able to be sourced by staff across the directorate if or when required.

Records must be authentic, reliable, complete, unaltered and useable and the systems that support them must be able to protect their integrity over time. Records must be reliable in that it must be possible to trust the content of a record as an accurate representation of the transaction to which it attests.

With no central point responsible for administering information contained within Shared Drives means that there is no way of protecting against any deliberate and / or inadvertent deletion, alteration, use or concealment of information (records).

The same constraints and / or risks associated with Shared Drives also applying to email.

Please note that business areas are still able to retain, use and disseminate information electronically via Shared Drives in addition to the hardcopy paper version for quick access, re use and dissemination purposes.



1.3.9 **Portable Flash Memory Electronic Data Storage Devices**

Portable flash memory electronic storage devices should only be used for transferring data (e.g. configuration information, software used for system maintenance, etc.) or work in progress documents which are also backed up on a shared drive.

Flash memory devices are the most common portable storage device in use today and create many issues surrounding their use, including security and privacy and should not be used as a solution for the storage of records.

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1.3.10 **Laptops**

The use of personal laptops for business use represents a risk to ACT Health / ACT Government unless in the case of a laptop having been approved for remote usage e.g. for working from home. In such circumstances a laptop and / or home PC assessment will have been undertaken, the laptop or PC has been routed / connected through ACT Government IT infrastructure and a remote access token issued.

Laptops or home PCs should therefore only be used for working on documents deemed as non sensitive unless otherwise having been approved and set up for external use.

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1.3.11 **Operating Systems / Business Systems**

The same requirement as that for email, shared drives etc. also applies to numerous business systems. However, due to such systems being configured and used for the purpose of managing specific information / data as well as often being of high volume, it is accepted that it is not feasible for such system content to be produced in hardcopy. Context is also often lost unless the information is being accessed via the operating system.

Business units, however, using operating systems that contain vital information / data of long term value should, where possible, also produce key data in hardcopy format. This may be in a much broader sense and therefore consist of less detail and volume rather than in its entirety, yet still provide key information that may be required in the event of any inadvertent loss of data and / or system failure. A hardcopy record, therefore, provides a back-up record and in doing so, better ensures that business continuity is not affected and ACT Health is accountable through ACT Health’s ability to provide information if or when required in the future.

Further information in regards to business system compliance is available from the TRO and following links:

Advice No 4 – What is a Recordkeeping System?

<http://www.territoryrecords.act.gov.au/__data/assets/pdf_file/0005/435443/Records-Advice-No-04-What-is-a-recordkeeping-system-January-2011.pdf>

Advice No 5 – Electronically Created Records

<http://www.territoryrecords.act.gov.au/__data/assets/pdf_file/0006/435444/Records-Advice-No-05-Electronically-created-records-January-2011.pdf>

Hardcopy files as the official method of capture for ACT Health administrative / corporate records must be used for capturing and retaining all official business activity (transaction) records of significance. This is until such time as a HP RM Electronic Document Records Management System (EDRMS) is available and able to be utilised by a broader audience to that of HP RMs current electronic record types and limited users and business processes e.g. Government Business Correspondence (GBC), and Ministerial Correspondence (MIN) record types.

Please note, however, that GBC, DGC, MIN and CORO record types, although registered in to HP RM, also need to be printed out and placed on file. This is to ensure that a complete record of all relevant information pertaining to a particular subject is accessible via one or more activity based files. This also ensures that all documents are available and therefore considered at the time of a file being sentenced by Records Management staff, including any HP RM electronic registered documents.

HP RM registered documents will only be considered as a single source of capture and retention once a compliant HP RM EDRMS electronic file folder record type is available.

HP RM hardcopy files as well as future EDRMS file folders and documents are effectively managed through the application of key metadata elements. The use of HP RM and key metadata ensures the longevity of our official business transactions records through disposal schedules and strict controls in regards to the destruction of HP RM records holdings. Availability of records is also better assured based on HP RM records holdings being able to be searched holistically should a particular record outside of a user’s general access permissions and / or associations be required.

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1.3.12 **HP Records Manager (Aka TRIM) – Digital Records**

HP Records Manager (HP RM) is the official Electronic Document and Records Management System (EDRMS) used widely across ACT Government, including ACT Health. Until EDRMs is in place, ACT Health remains paper based.

HP RM is a recognised and proven electronic workspace able to be utilised for the management of our information resources. HP RM EDRMS brings records to desktops, therefore the majority of our business transactions able to be registered directly from Outlook, drives and other systems as well as accessed in real time.

The HP RM system has been configured to provide a full audit log of access to records and processes performed e.g. who accessed a particular record and the date and time a file or document was registered, accessed or edited etc.

Any detected unauthorised access to the system and record holdings is able to be reported to Shared Services ICT Security in accordance with the ICT Security Plan for HP RM.

Other functionality or features that will be able to be utilised as ACT Health transitions from primarily paper-based to electronic records are as follows:

* Action tracking / workflow allowing for various users across ACT Health to perform actions within a structured workflow hierarchy;
* Workgroups are able to be created and used for collaboration across various business units within the Directorate and outside of general HP RM security and access protocols;
* Allows for various alternative versions (renditions) of an initial document to be produced by various areas based on varying perspectives and / or points of view up until a final version having been produced. All of which are version controlled. HP RM also allowing for the editing of document content;
* Real time access to information;
* Numerous search and reporting options / features;
* Greater character space allowing for better description of file folder and document content resulting in improved search and retrieval capability;
* HP RM is able to be accessed from any ACT Health PC asset where HP RM has been deployed therefore providing greater flexibility to staff in regards to working from other ACT Health facilities;
* HP RM applies Standard Metadata sets to manage records effectively throughout their lifespan in accordance with the Act and therefore a compliant and recognised recordkeeping system able to be utilised across ACT Government.

Staff members who require access to the system need to complete the Application for Access to

HP RM form which is available on the Records Management intranet page:

<http://acthealth/c/HealthIntranet?a=da&did=5152108&pid=1343968914>

A HP RM Basic User Guide is also available from the Records Management Intranet:

<http://acthealth/c/HealthIntranet?a=da&did=5105028&pid=1192432387>

Refer to the Digital Recordkeeping Policy for the ACTPS:

[http://sharedservices/territoryrecords/Forms%20and%20Manuals/TRO15%20000638%20%20Digital%20Recordkeeping%20Policy%20for%20the%20(ACTPS)%20approved%20by%20Strategic%20Board%2005082015.pdf](http://sharedservices/territoryrecords/Forms%20and%20Manuals/TRO15%20000638%20%20Digital%20Recordkeeping%20Policy%20for%20the%20%28ACTPS%29%20approved%20by%20Strategic%20Board%2005082015.pdf)

# 1.4 Record Management

## 1.4.1 **Files**

Files are a collection of records / documents relating to a specific aspect of ACT Health’s business.

A file may be a physical or electronic form and may contain records in several formats. Files are created when there is a need to be accountable and provide evidence of decisions and actions.

All files must be created to capture:

* Key decisions and activities
* Who made the decision or performed the activity and the basis of their authority
* When the decision was made or an action performed

**Titling files:**

Each file must have a title that distinguishes it from other files (i.e. unique), and should consist of the following elements:

* Function
* Activity
* Subject descriptor (if applicable)
* Free Text Title

## 1.4.2 **Creating a New File (Key Metadata Elements)**

Some of the key metadata elements applied to files in order to be managed effectively are as follows:

## 1.4.3 **The Functional Thesaurus**

The functional thesaurus is a consistent, structured and uniform vocabulary classification system, used to classify all of ACT Health’s administrative records.

The functional thesaurus works in conjunction with the Whole of Government Records Disposal Schedules covering both general administrative (common) functions, as well as functions more applicable to the core business of ACT Health and other Directorates.

It is important to note that each file based on the function and activity it refers to will vary with regards to how long by law it needs to be kept. It is therefore important to ensure that the most appropriate function and activity is applied to files and subject matter.

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The functional thesaurus used by Health consists of the following functions:

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| --- |
| **Whole of Government Common Functions** |
| **Finance and Treasury Management**  |
| **Strategy and Governance**  |
| **Government and Stakeholder Relations**  |
| **Human Resources**  |
| **Information and Communications Technologies**  |
| **Property, Equipment and Fleet**  |
| **Records and Information Management**  |
| **Solicitor and Legal Services**  |
| **Whole of Government Core Functions**  |
| **Student Management**  |
| **Training and Tertiary Student Management**  |
| **ACT Health Core Functions** |
| **Public Health Protection**  |
| **Patient Services Administration**  |
| **Health Treatment and Care**  |
| **Population Health Care Management and Control**  |

Functions (both common and core) are subject to periodic review. This can result in the variation of terms applied across Directorate files created in the past, present day and in to the future. The Whole of Government Common Function Thesaurus can be accessed on the TRO webpage.

## 1.4.4 **Free Text Titling**

Free text titling should be clear and concise and not require interpretation. Free text titling should be used to better describe a file and its content such as describing the nature of an action or judgement being carried out.

The recording of key words to describe a file’s content is an essential component used in order to search and locate files in a timely manner if or when required and to differentiate a particular file from other Directorate files that may also exist for the same function, activity and subject and therefore vital to ACT Health’s operational efficiency.

## 1.4.5 **Security Markings / Dissemination Limiting Markers (DLMs)**

Where a business record requires confidential or secure treatment, it is to be marked appropriately and treated in accordance with the security classification.

The current classifications reflect the Australian Government Protective Security Policy Framework (PSPF) Classification Scheme articulated within ICT Security Standards.

The new protective markings, Dissemination Limiting Markers (DLMs) replace the current security markings of IN-CONFIDENCE, PROTECTED and HIGHLY PROTECTED (Note: UNCLASSIFIED remains unchanged). This is to align information security practices with the Australian Government’s DLM system and in accordance with Information Security (INFOSEC) protocols aligned to the ACT Government Protective Security Policy Framework.

The new DLMs approved for use by the ACT Government are:

* UNCLASSIFIED
* FOR OFFICAL USE ONLY (FOUO)
* SENSITIVE
* SENSITIVE: LEGAL
* SENSITIVE: PERSONAL
* SENSITIVE: CABINET
* SENSITIVE: AUDITOR-GENERAL

Security Markings / DLMs are used to clearly indicate the level of sensitivity / confidentiality surrounding a file and its content, both in hardcopy or digital format, and in doing so, provide a clear indication of the level of protection that should be afforded to the information in question, such as:

* Locking up hardcopy files and or loose documents in secure cabinets when they are not in use.
* Not leaving sensitive information around unattended during office hours. The same consideration also applies to leaving PC’s logged on and unattended during office hours and therefore allowing for the potential of information being able to be viewed by others e.g. staff, contractors or clients.
* Being mindful of who is present and therefore able to hear a conversation surrounding highly sensitive and / or confidential matters both within the workplace as well as outside of the workplace and in earshot of the general public.

A general DLM guide covering a proportion of ACT Health activities and the recommended DLM to be applied as well as other relevant information are available on the [Records Management intranet site](http://acthealth/c/HealthIntranet?a=da&did=5105028&pid=1192432387) Location: Home / Business Support / Business Support Services / Records Management

Further information regarding these key metadata elements are available via the **Instructions for Completing the Electronic File Request Form** available on the [Records Management intranet site](http://acthealth/c/HealthIntranet?a=da&did=5105028&pid=1192432387)

Paper-based records are requested via the Health **Electronic File Request Form**. This form can be accessed from the Records Management intranet page: requesting files link: [Electronic File Request Form](http://intact/apps/recordservices/request/Health.asp) or the Shared Service Customer Portal, Records and Mail Services tab, Forms link: [New File Request Form (Health Directorate)](http://intact/apps/recordservices/request/Health.asp)

Once the Electronic File Request form has been submitted to Record Management via the e-mail link on the form, a copy will be emailed to the requestor. Normally within 5-10 working days the file(s) will be created and forwarded to the physical location identified in an envelope via the internal mail service.

## 1.4.6 **Records Disposal and / or Destruction**

No official records registered on HP RM should be destroyed by the Business Unit. **Only Records Management staff can destroy official / registered records.** This process is conducted in accordance with the official Sentencing and Disposal Schedules.

|  |
| --- |
| Records Management is responsible for the disposal and/or destruction of administrative records.Records in the possession of business areas, including records that may be going back several years and never captured officially on to HP RM and therefore not held within an official file or box record may still be required to be kept as a record.  |

Records Management should be contacted to appraise any old unofficial / in-house records prior to destruction. This is in order to determine whether any of your Business Unit records still need to be registered and kept, or at a minimum registered prior to destruction.

Note: Even business activities (transactions) that have met their retention, if significant, may still require registration in HP RM in some shape or form prior to destruction. This is in order to ensure that evidence exists within HP RM to show that ACT Health had retained the information as required in accordance with legislation.

The following questions will help in determining whether or not your records are considered official business activity records that need to be captured and then either maintained, or else subsequently destroyed in accordance with the Act and ACT Health’s Administrative Records Management Policy and Program:



The only exception where in-house destruction is able to be undertaken and where no prior notification or registration is required, are records that come under destruction under NAP allowances.

ACT Health generates a significant amount of material in daily operations including some of which is of little value to the organisation, today or in the future.

When deciding on what records are able to be destroyed, it is necessary to do so with an understanding of the business context and the risks associated with the business through the consideration of NAP allowances based on the Australian Standard **ISO 15489 – Records Management** - [**Refer to TRO Records Advice No 23**](http://www.territoryrecords.act.gov.au/__data/assets/pdf_file/0008/435527/Records-Advice-No-23-Australian-Standard-for-Records-Management-January-2011.pdf)**.**

Materials that do not require official capture and may be destroyed by the Business Unit using the NAP provision are as follows:

* **Appointment diaries, calendars** - unless used to record important matters or belonging to people holding high level positions, for example Director General, Deputy Director Generals and Executive Directors.
* **Informal communications** which do not support or contribute to the business of ACT Health such as personal emails.
* **Circulation copies** of ACT Health instructions, circulars, internal newsletters, other than master copies.
* **Emails sent to multiple recipients** where another recipient has responsibility for capturing the message into a records management system / official record.
* **Emails capturing continuing discussion** where the final email has been captured into a records management system / official record.
* **Drafts in either paper or electronic form** such as reports, correspondence, addresses, speeches, planning documents etc., that have minor edits for grammar, spelling etc., that do not contain significant or substantial changes or annotations or have been assessed and deemed as not being required to document business activities.
* **Copies of records** made for reference purposes, or to support the development of other documents, including summaries or extracts of records held in the ACT Health’s Records Management system / kept on official records.
* **Duplicates** of ACT Health’s procedures, manuals, guidelines or plans etc., other than master or authorised copies.
* **Unsolicited letters** offering goods and services.
* **Promotional or advertising material** received by ACT Health.
* **External publications**

It is important to consider the **nature and sensitivity** of a record deemed as able to be destroyed under NAP. Please consider any privacy implications and **shred** records (or place in a secure waste bin) prior to disposal - [**Refer to TRO Records Advice No 2.**](http://www.territoryrecords.act.gov.au/recordsadvice)

**Note**: General appointment diaries whether associated with patients or other types of patrons and consisting of minimal information e.g. name, date and time of appointment, URN if applicable, and type of appointment e.g. treatment / consultation only have a short term retention value. Such diaries are therefore not managed by Records Management and the responsibility of the business unit itself to use and then retain for a minimum of 2 years from the final action date recorded. These diaries however, can be stored and retained in-house for as long as an area believes necessary. Planning / handover and roster diaries are however accepted and managed by Records Management once they are no longer required by the business area.

Appointment diaries used by practitioners for patients that consist of patient notes, for example, general observations / state of health such as blood pressure, or medication administered and / or prescribed etc. need to have such information transferred in to a patient information system and patient’s electronic record or hardcopy file. Otherwise the appointment diaries (considered the medical record and single source of information) needs to be retained as long as legally required.

Practitioner diaries are outside of Records Managements scope of responsibility and therefore any arrangements for the storage and retention of such practitioner appointment diaries containing clinical notes should be directed to the Clinical Records Services.

## 1.4.7 **Requesting a Record Search on HP Records Manager (HP RM) through Record Management**

Business Units may have staff with HP RM access in order to conduct searches. If not, and assistance is required from Record Management to search and locate a record. The record number and free text title should be sent to the generic Record Management email account: **RecordsManagementCentre@act.gov.au**

If details are not known – then some key words believed to be in the record title or associated to the record should be provided. For example, the name of an individual or the name or nature of an agreement or those parties the agreement was made between etc.

Record Management will conduct a search and inform the requestor of any results.

Only urgent records needing to be searched and located should be requested by phone.

**Please note that the basic HP RM record search component can be deployed to Business Units and staff to enable staff to conduct record searches.**

To request HP RM access, go to the Health Intranet Records Management page – Hewlett-Packard HP Record Manager – Gaining access to HP Records Manager [**http://acthealth/c/HealthIntranet?a=da&did=5152108&pid=1343968914**](http://acthealth/c/HealthIntranet?a=da&did=5152108&pid=1343968914)

## 1.4.8 **Storage and Custody of Files**

Records Management has endorsed locations for the storage of registered records. Appropriate storage and security measures to protect records are required at all times to ensure that any sensitive records are not able to be accessed by those not privy to such information.

|  |  |
| --- | --- |
| http://images.wikia.com/theologia/images/1/1f/Redx.pngRMC PHOTOS 004.JPG | http://www.panhosting.com.au/images/Tick-red%5B1%5D.pnghttp://s1.hubimg.com/u/1752564_f260.jpg |

There will be occasions where ACT Health records may need to be taken outside of ACT Health. This staff member in possession of the record(s) is the responsible party.

Staff members must ensure that the records are protected whilst in their possession.
The staff member must retain records in their physical possession and should ensure that the records are secured from general / unauthorised view, and should ensure that copies made are appropriately authorised.

If permission to take records home has been given to a staff member by their Manager, appropriate security measures should be taken to protect any records held as per the ACT Health Home Based Work Procedure.

Staff must therefore take all necessary measures in order to protect all forms of records and content whilst in their possession and when taken outside of ACT Health.

**Staff are required to adhere to the Protective Security Policy Framework which stipulates adhering to the ACT Government Clear Desk Guidelines where records not in use are stored appropriately and records are secured at the end of the work day or when the staff member is away from the desk for an extended period.**

## 1.4.9 **Attaching Papers to a Record**

An important element of the ACT Health Records Management Program is ensuring documents are attached to an appropriate subject record as soon as possible after receipt or creation.

When a file reaches 2.5cm to 3.0cm thickness and action is ongoing, either a new file or a new part can be created to hold the ongoing correspondence.

## 1.4.10 **Folio Numbering**

Although not mandatory, folio numbering is the practice of placing a number sequentially on the top right hand corner of each page, starting from the bottom of the file to the top, so that folios within the records are easily identifiable from each other.

**Note**: The **File Request Form is always Folio #1** of the file so that the **first piece of correspondence** beingplaced on file is **Folio #2.**

If pieces of correspondence are double sided, **both sides** should be individually numbered. It is less time consuming and easier to folio number each piece of correspondence as it is added to the record.

**Folio Numbering is used as an essential control and audit measure to establish the completeness of a file. It also provides an administrative aid that facilitates specific folio identification and cross referencing within a subject.**

This process is of particular importance where ACT administrative paper based files become the subject of court or tribunal actions or are the subject of parliamentary inquiry. There may also be the need to identify each page of a document for legal or tendering requirements.

As a general rule folios shall appear in date order within a file. Exceptions may be permitted, however, where sound reasons exist. For example, a group of folios, which together represent a “compound document” referencing a single event or action (e.g. the minutes of meeting with attachments tabled at the meeting) may be grouped together out of date order. These folios should

remain together at one point in the file even though individually they may have different dates. This arrangement is termed **‘action order’**. For further information, refer to [**TRO Records Advice No 66**](http://www.territoryrecords.act.gov.au/recordsadvice).

# 1.5 Requests for Access to Information, Record Movements and Transfers Advice

It is important to ensure that ACT Health, ACT Government, business partners, stakeholders, individuals and other entities are protected from any inappropriate use of records that presents risk to ACT Health or staff in that use.  ACT Health must prevent such unauthorised access, exposure or damage from occurring and therefore any requests for information / records must be handled appropriately.

Any requests for access to information / records received by Business Units, Branches or Divisions that are not covered under any existing and approved internal procedures or processes should be directed to Business Unit Managers or, if applicable, delegated to the Information Officers or Branch / Division Directors prior to such access being granted.

Continuous reviewing and updating of such internal procedures should be undertaken in order to ensure that these are relevant and cover any changes and additional requirements due to, for example, changes to existing policies as well as changes to any other related legislation.

**Important – Please note that any request for information / records received by the media must not be handled by the Business Unit itself and must be directed to Media and Strategic Communications. Any requests for information / records pertaining to ministerial or cabinet matters should also not be handled by the Business Unit, Branch or Division themselves and must be directed to Ministerial and Government prior to release.**

**Health Administrative records should never be provided to clients / health consumers that the records refer to and only copies of the relevant and authorised file content provided.**

Records should only ever be made available to other ACT Government Directorates, Agencies, Institutions or Taskforces, private contractors and non-government organisations representing or contracted out by ACT Government or ACT Health such as legal firms, auditors.

Requests for information should be handled by the Business Unit ensuring that release or disclosure of information is undertaken with appropriate authorisation and approval assessments. Care should be used in assessing requests do not breach confidentiality or pose risk or liability to the organisation.

It is important to note that such requests for information when outside of the usual types of requests received by Business Units may be due to issues surrounding a particular subject, action or *judgement which may only be known to senior ACT Health staff privy to such information and the* issues surrounding them. Delegated Information Officers, Senior Managers and Directors should be made aware of such requests outside of the norm.

**Note**: The following eLearning courses are available on Capabiliti: **Records Management** (el-RM-2016); ***Privacy and Confidentiality*** *(el-PC-2016).*

## 1.5.1 **Handling Requests for Access to Information from the Public**

Business Units and staff should not handle requests for access to information from the Public or at least not until such time as being requested through the ACT Health Freedom of Information (FOI) Officer.

FOI requests from the general public should be referred to the Archives ACT Reference Archivist. The Archivist will then direct the request to the relevant Directorate FOI Officer for further actioning if records are available. Where the records are deemed to have reached the 20-year open access period and are available with no exemptions evident, these will be handled by Archives ACT in consultation with the ACT Health FOI Officer, and Records Management.

**Please note this advice is only applicable to administrative records under the responsibility of Records Management and not Clinical/Patient records.**

Any staff handling requests for information from administrative records that contain
Patient / Health Consumer information should refer to relevant advice available from the
Clinical Records Branch prior to their release.

**1.5.2 Records Movements, Transfers and Records Copies Process**

**File Movement and Transfer Definition**

**A record movement** is the passing-on of files from one person to another within ACT Health (including within the same business unit), or passed between ACT Health and other ACT Government Directorates, Commonwealth Agencies, Legal Authorities, Government Taskforces or contractors on a temporary basis.

A **record transfer** refers to the transfer of custody and ownership of files either within ACT Health or between Health and other Directorates, Agencies or Institutions etc. on a permanent basis.

Records Management must be notified via email (RecordsManagementCentre@act.gov.au) of all file movements and transfers taking place either within the Health Directorate or between ACT Health and other Directorates, task forces or contactors etc.

This is to ensure that the location of hardcopy files within HP RM are accurate at all times and therefore the whereabouts of any particular file is able to be determined and information retrieved in a timely manner, if or when required in the future. The only exception being files received from another Directorate on a temporary basis and where the files do not need to be registered in to ACT Health’s HP RM.

**File Movements (Temporary)**

Files owned by another Directorate and being provided to ACT Health on a temporary basis are not registered in to ACT Health’s HP RM system and therefore are not the responsibility of ACT Health Records Management. Directorates that own the files are responsible for arranging for the file(s) eventual return and updating in the Directorates own recording system.

Health business units if providing files to another Directorate on a temporary basis are responsible for co-ordinating a files return and informing ACT Health Records Management both when a file is being provided as well as upon a file’s return to ACT Health and the business unit.

**Staff ceasing employment with ACT Health or changing positions and / or business units** should request a report from Records Management in relation to any files assigned to them. This is in order to either have files re-assigned to another staff member upon e.g. reallocation of workload, retained or otherwise returned to Records Management file storage prior to either transferring to another business unit or if ceasing employment with ACT Health. The staff member and business unit said to be taking possession of any file should also be carbon copied (Cc’d) upon notifying Records Management of a record movement taking place.

It is also important that Records Management is notified of any changes in the business environment, such as new areas of business or restructures taking place. For example, involving a change of business name or the separation or amalgamation of business units where a re-allocation of files and their ownership is required.

**File Transfers (Permanent)**

Records Management must be notified of any file(s) being transferred on a permanent basis prior to any physical transfer taking place. This is due to file ownership needing to be updated, the consignment of files being transferred needing to be confirmed, and if applicable, electronic file metadata for system export / import and registration between both Directorates and recordkeeping systems needing to take place. Therefore ACT Records Management needs to ensure that file consignments either provided by or received by ACT Health are accurate and documented within ACT Health’s HP RM recordkeeping system.

Records Management staff may also need to physically sight the records in question in order to determine the best method for registering records being received by other Directorates.

The permanent transfers of records and ownership between Directorates or Agencies is usually due to functional responsibilities of Directorates or Agencies within ACT Government changing and therefore records needing transferred when such structural or functional changes take place.

## 1.5.3 **Safe Handling of Information (Physical)**

The preferred methods in regards to the safe delivery of physical records outside of ACT Health is for Health staff to hand deliver a record, for arrangements to be made with the receiving Directorate and an officer to collect in person or arrangements made with Health Records Management to undertake the delivery and / or collection of records. ACT Records Mail Service is the only other option able to be used and where a record is not deemed as highly sensitive / confidential. This is with the exception of records needing to be provided interstate. A reputable courier service provider is able to be used in such circumstances where records need to be delivered interstate.

**Note: A record should never be sent via Australia Post**

These records should be securely packaged and correctly addressed to the intended recipient as well as a return address and contact name provided in case of any issues with delivery.

## 1.5.4 **Records Copies**

**Please note, however, that ACT Health prefers that when possible only copies of the relevant records/documents contained on files are made available upon request, and especially when being requested by external Directorates, Agencies and Authorities. This is in order for original records to remain with ACT Health where possible and therefore limit potential loss of ACT Health information assets.**

This is unless it is absolutely necessary for the records to be provided such as:

* When records are being requested under subpoena;
* For legal / verification requirements, where only original documentation is accepted;
* Due to the transfer of responsibility and ownership of records from ACT Health to another Directorate or Agency taking place; or
* Due to other Directorates, Agencies or Authorities being responsible for carrying out an investigation or inquiry on behalf of ACT Government and where original records are required.

It is important to consider what else is contained on a record, its potential sensitivity / confidentiality as well as its relevance to the requestor in order to determine whether any access should even be granted, whether the whole record and content can be provided, or whether only copies of the relevant documents should be made available. Specific content may also need to be masked if only allowing a supervised viewing of a record or some of the record content blacked out prior to releasing copies. **Original records must never be blacked out (redacted).**

**Please contact Records Management if a file’s content as a whole is not able to be provided to a requestor but where certain original documents contained within a file are required.**

Each document copied from records should indicate ‘copy only’ and include the file number the record copy was acquired from recorded in the top right hand corner of each document being provided.

These copies can be provided in either paper or electronic format, and can be kept on other ACT Health and / or Directorate files or otherwise safely destroyed once they are no longer required by the requestor.

## 1.5.5 **Providing information (copies) via email**

It is essential however that strict care is taken in regards to ensuring that information sent electronically is delivered to the recipients correct email address. Consideration of what the content in question entails, what level of sensitivity the information contains and the consequences should the information be accessed by people other than the intended recipient should assist in regards to determining whether the information should be produced in hardcopy and hand delivered or provided electronically through email.

**Records Management notification is not required if only copies are being made available.**

**General Responsibilities Summary**

The Business Unit and owner of the records is responsible for determining whether ACT Health records are to be provided, how the information should be provided as well as what information should be made available if requested by other Directorates, Agencies, Clients, Contractors or ACT Health staff. The legitimacy of the request and requestor should also be ascertained prior to providing any original ACT Health records or copies.

Records provide evidence of decisions and are critical in demonstrating ACT Health’s position legally and therefore may be required in future. It is also difficult to keep track as well as guarantee the safe handling and return of records once they leave ACT Health and hence the providing of copies is the preferred method in sharing records external to ACT Health.

When a record is to being moved internally or transferred externally, the record cover must be endorsed within the ACTION RECORD section (refer to 1.5.8) prior to any record movement or transfer being initiated. This procedure ensures that ACT Health is able to identify who has had possession or access to a record and when such access occurred. This is particularly important in cases of litigation, sensitive inquiries, or incidents where folios may have been removed, tampered with or where the source of unauthorised release of information needs to be established. It also provides complete historical information on who may have been involved in a particular action or decision making process. (See diagram below)

This also helps staff with finding particular documents that need referred to in the future.

## 1.5.6 **Diagram of the File Cover Endorsement / Sign off Advice**

The following diagram is an example for endorsing record covers created from 1/1/2016. Instructions are also available inside the record file cover.

**Action Record**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| **Last Folio on File** | **Folio Reference If Applicable** | **Referred to** | **Date of Referral** | **Clearing Officer** |
| **Date** | **Initials** |
| **1** | **/** | **Joe Blogg** | **1/1/16** | **1/2/16** | **JB** |
| **47** | **/** | **John Smith** | **1/2/16** | **1/3/16** | **JS** |
| **102** | **/** | **Joe Blogg** | **1/3/16** | **1/4/16** | **JB** |
| **102** | **/** | **Fiona Jones**  | **1/4/16** | **7/4/16** | **FJ** |
| **108** | **/** | **PA** | **7/4/16** |  |  |

##

## 1.5.7 **Record Cover Endorsement / Sign Off**

Prior to transfer, ensure that the record cover endorsement is up to date. The following steps should be undertaken by the officer upon transferring a record:

* **Step 1 -** The current holder transferring a record should **record the date** of the intended transfer as well as their initials in **Column (5) Clearing Officer** and on the same line next to the current holders name and date of referral.
* **Step 2** - The **latest folio number** at the time of the record’s transfer is to be recorded in **Column (1) Latest Folio on Record** and on the line directly below.
* **Step 3 - Column (2)** **Folio Reference, if applicable,** should be used to indicate any significant folio(s) placed on record that may need to be referred to in future.
* **Step 4 - Column (3) Referred to.** The name of the staff member / recipient the record is now being transferred to should be recorded in column 3, and if the record is being returned to the Record Management **for** storage**, PA (for Put Away)** should be recorded.
* **Step 5 -** The date of this record transferis taking placeshould again being repeated in **Column (4) Date of referral**.

This process will then be repeated by the new mark out officer / assignee at the time they are transferring the record.

# 1.6. Returning or Recalling of Administrative Records to/from Records Management

The following process should be referred to when Business Units either want to return records to or request records from Records Management, Mitchell.

##

## photo 1.JPG1.6.1 **Return Records to Records Management in Mitchell**

Either a single record or several records can be returned to Records Management by placing in a C3 sized envelope addressed to Record Management at the following address and sending them via the internal ACT Government mail service.

Up to two boxes at a time / per mail collection from a Business Unit’s mail collection and drop off point can also be sent via this internal mail service.

**Address: Records Management, Building 3, 9 Sandford Street, Mitchell 2911**

**Attention: the relevant Records Management staff member if applicable**

Records Management can be contacted via email in order to arrange for the collection of any large quantities of records and boxes that need to be returned to Record Management storage, or for records that are deemed highly valuable or sensitive and therefore requiring collection via the Records Management courier service.

When emailing Records Management, please ensure that the following is provided:

* A contact person;
* Work area /Business Unit name and physical location details;
* Contact phone number; and
* An indication of the number of boxes requiring collection.

**Email -** **Records Management – ACT Health**

Records Management will then contact the Business Unit in order to arrange a day and time for collection.

**Please note that only registered records captured via HPRM can be returned to Records Management for storage. Any unregistered records, not in HPRM, must first be discussed with Records Management prior to being accepted.**

## 1.6.2 **Recall/Retrieve Records from Records Management**

Any official records returned to Records Management if required by a Business Unit in the future, can be retrieved at any time up to a records eventual destruction.

The following information should be provided via email if a Business Unit wants to retrieve records from Record Management storage:

* The record number(s) as well as a few key words indicated within the record’s title.
* The requesting staff member’s name or if requesting on behalf of another staff member, the name of this staff member who will be in possession of the record and therefore will be responsible for the record.
* The name of the requesting Business Unit/area and physical address details.

Request for urgent records will be actioned within 1 working day. Non urgent records will be actioned within 5 working days.

Any requests to Records Management for records shown as being in the possession of another business area will be directed to that business area and current holder.

Please refer to **the Requesting a File Search** **advice** if you do not know the number or title of the record(s) you require or if simply wanting to see if any relevant records / files exist.

## 1.6.3 **Records delivered by Records Management**

Single records or up to 2 boxeswill be sent via the ACT Government internal mail service
(ACT Shared Services Records Services) to the local distribution / collection point or mailroom for your area. For CHHS, the Mailroom will deliver the records to your Business Unit on campus once they are received from Records Management.

Large numbers of records, records if deemed highly sensitive or records required urgently, will otherwise be delivered directly to a Business Unit via the Records Management courier.

## 1.6.4 **Ordering Boxes**

It is the responsibility of the Business Unit transferring records (record return) to ensure records are transferred in appropriate storage. The preferred box type to be used for record returns can be ordered through Health’s current stationary supplier **OfficeMax**.

# 1.7 Definitions

**Health record**means any record, or any part of a record —

(a) Held by a health service provider and containing personal information or,

(b) Containing personal health information. Health Records (Privacy and Access) Act 1997

**Record**

Information created and kept, or received and kept, as evidence and information by a person in accordance with a legal obligation or in the course of conducting business, including information in written, electronic or any other form (*Territory Records Act 2002*).

**Digital records** are records created, communicated and maintained by means of computer technology. They may be 'born digital' (created using computer technology) or they may have been converted into digital form from their original format (e.g. scans of paper documents) (National Archives of Australia). [http://sharedservices/territoryrecords/Forms%20and%20Manuals/TRO15%20000638%20%20Digital%20Recordkeeping%20Policy%20for%20the%20(ACTPS)%20approved%20by%20Strategic%20Board%2005082015.pdf](http://sharedservices/territoryrecords/Forms%20and%20Manuals/TRO15%20000638%20%20Digital%20Recordkeeping%20Policy%20for%20the%20%28ACTPS%29%20approved%20by%20Strategic%20Board%2005082015.pdf)

# 1.8 Reference Page

Australian Standard (AS) ISO 15489 – Records Management <http://infostore.saiglobal.com/store/details.aspx?ProductID=1853360>

*ACT Health Records (Privacy and Access) Act 1997*

[*http://www.legislation.act.gov.au/a/1997-125/current/pdf/1997-125.pdf*](http://www.legislation.act.gov.au/a/1997-125/current/pdf/1997-125.pdf)

The Territory Records Office site (Records Advice)

<http://www.territoryrecords.act.gov.au/recordsadvice>

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**Section 2**

**Personnel Records**

**ACT Health - People & Culture**

**Level 2, 6 Bowes Street, Phillip ACT 2606**

**HealthEmployeeRelations@act.gov.au**

**People & Culture is responsible for implementing Section 2 of the Procedures Manual and advising -**

**Managers / Delegates of the management of the Procedures Manual, and**

**Employees of the details of the Procedures Manual as it relates to them.**

# Section 2. Personnel Records

## 2.1 **Managing Health Personnel Employment Records Procedures and Guidelines**

ACT Health, as part of the ACT Government Public Service, is required to capture and maintain employment records in order to ensure an accurate and complete employee record is maintained and to provide evidence of an employee’s conditions of employment and entitlements. Through discussions with Shared Services Records Services, agreement has been reached about what information is to be held on ACT Health employment record files and what is to be sent to Shared Services Records Management. Refer to **Personnel Records** **Schedule 2 ⎯ Shared Services Centre.**

All ACT Health directors and managers are responsible for employee records. As part of their duties, they are responsible for ensuring that general employment records of employees under their responsibility are kept and maintained in accordance with the Public Sector Management Act 1994, ACTPS Code of Conduct, the Territory Records Act 2002, and the ACT Health Administrative Records Management Policy.

ACT Health employees, being both administrative and clinical staff, are to have their employment records captured and maintained in the format of an official paper-based file registered into HP Records Manager Recordkeeping System. This includes permanent, part time, full time, temporary, casual or contract staff working for and paid by ACT Health. It excludes volunteer workers’ records which are captured, maintained and under the responsibility of the Volunteer Management Office. Any enquiries associated with volunteers should be directed to the Volunteer Manager on 6174 5272.

Shared Services personnel files and records are separate to ACT Health owned employment records and document the consolidated employment history of all ACT Health staffthroughout their employment with ACT Government.

**The records captured and maintained by ACT Health are more general employment records, specific only to an employee’s employment within ACT Health.**

## 2.2 **One File per Employee**

The one file per employee method to hold all documentation associated with an individual employee’s general employment conditions is now considered the best method of capturing an employee’s employment records.

This one file per employee method ensures that employee records are able to be searched and tracked more effectively if or when required. These files should be classified as follows:

* **(Function) – Human Resources - (Activity) – Employee History and (Subject descriptor) - to be left blank**

Note:Previously classified under Function: Personnel – Activity: Employment Conditions

* No subject descriptors are to be used under the one file per employee method such as ongoing, non-ongoing or contract etc. This is because an individual’s employment status may change during their employment within ACT Health or due to the other subject descriptors being too specific.
* Under the one file per employee method, the free text component of the file should be structured as follows:
* SURNAME first and all in upper case followed by the individual’s given name(s) in lower case and then if applicable, the AGS number and business area name, if not the same as that indicated as the file’s owner. Employee position titles should not be recorded within the file’s free text title.
* Additional parts can be requested for an individual’s personnel file once it becomes full.
* The security marking of **Sensitive: Personal** should be applied.

**IMPORTANT**

**Please note that although it is preferred that the one file per employee be used, that an additional time sheet’s specific file is also able to be created per individual and used specifically to hold time sheets. In which case, *Time Sheets* must be recorded within the free text title and before an employee’s surname. However, leave forms and evidence associated with the time sheet period must not be placed on a specific employee time sheet’s file and must be placed on to each employee’s main employment record file used for capturing all other general employment records together for each employee. The only other option is the use of a combined employee time sheet file. Please refer to the Combined Employee Record Files guidelines for further information.**

Where an employee is employed by two separate sections, a file should be created by each section in order to hold records associated with the employee’s period of employment in each section. This includes time sheets and leave applications, etc.

However, if an employee is only working in another section for a short term (being less than three months), arrangements should be made to have all records associated with the employee’s secondary area of employment to be sent to the employee’s substantive section and the Director/Manager to capture the records on their file once approved and processed.

This is in order to ensure that there is a complete and periodic record within the one file rather than a number of files for employees and periods of short term employment.

**See Personnel Records Schedule 1 ⎯ One File per Employee**

**This excludes internal reviews or misconduct and disciplinary processes including Preliminary Assessments.** People & Culture is responsible for all official files relating to internal reviews, misconduct and disciplinary matters.

Managers should therefore contact the People & Culture with regards to any records relating to any formal processes that they have been managing so as to ensure that all records on these matters are transferred to People & Culture to be captured officially.

These guidelines exclude financial and other administrative processes associated with employees undertaking training courses or attending forums/conferences, specifically the booking and payment of airfares, car hire, accommodation and any other related expenses.

Please note that originals of certificates and other qualifications awarded to staff should be kept by the staff member and only certified copies or duplicates of these records kept on file.

Other electronic systems are not deemed verifiable instruments and therefore not in an acceptable method or format. ICT Shared drives and personal drives must not be used to capture and hold such records.

**See Personnel Records** **Schedule 2 ⎯ Shared Services Centre**

Shared Services (SSC) consolidated employment conditions files do not hold leave forms, time sheets or performance management documentation, etc. Therefore, it is ACT Health’s responsibility to capture and manage those records not being held on the SSC file.

The protocol for requesting Shared Services personnel files is for the Manager to contact People & Culture on extension 51646.

Paper-based leave forms should be submitted to the Shared Services Pay Team for processing at the following email address: HRSharedServices@act.gov.au

All original hard copy employee documents that need to be attached to a Shared Services Personnel file in its original format (therefore not to be scanned and sent via email) should be sent via the ACT Government internal mail service at the following physical address:

Shared Services HR, ACT Health Pay Team (Nursing/Medical/Admin, etc.)

Winyu House, 125 Gungahlin Place, Gungahlin, ACT 2912

## 2.3 **Procedural Changes Regarding Combined Employee Record Files**

Combined section owned employment record files are no longer able to be used to hold all leave forms, medical evidence, employee training or any other personnel records together within a combined area file, i.e. with the exception of combined employee time sheet files being used by areas of direct responsibility of **20 employees or more**.

Managers and Directors who directly manage more than 20 employees and where limited support is available to an area in order for them to be expected to place each employee’s time sheet on to their individual file periodically (fortnightly). This method cannot however, be applied collectively to an area that consists of several Business Units and independent managers responsible for each Business Unit and employees.

Business areas that wish to use combined employee time sheet files must ensure that a list of all employees contained on any given combined time sheet file is attached to the files inside the front cover.

Combined employee time sheets files should be classified under the Function (Human Resources) -Activity - (Employee History) and Free text (Time Sheets).

Combined employee time sheets files should have the security marking of Sensitive: Personal applied.

The name of the business area the employee’s leave applications or time sheets refer to should be recorded within the free text title.

The period the file is covering, if able to be determined at the time of a new file being requested, should also be recorded or the file amended to reflect the period covered at the time a file reaches its capacity and is closed off.

These files are to be titled to include the pay periods and financial year. This assists in tracking down the relevant file if or when required in the future.

Business areas keeping secondary records used for financial and other administrative processes such as determinations and payments of employee salaries and duplicate records to those that are being captured and maintained by the relevant and responsible Director or Manager of a Business Unit an employee works for, such as the Medical Officer Support, Credentialing, Employment and Training Unit (MOSCETU) are still able to create both combined employee time sheet and leave records files.

Combined leave files used by secondary record holders should be classified under the Function (*Human Resources*), Activity (Remuneration) and free text (Time Sheets).

Combined leave files used by secondary record holders should be classified under the Function (Human Resources), Activity (Remuneration) and free text (Leave).

The limitations with regards to combined employee files are due to the one file per staff member method being deemed the most effective means of searching and tracking a particular employee’s personnel records if or when required. Therefore, this combined file allowance will only be granted to those Business Units deemed as having a legitimate case.

Please note that an employee’s file will move with them as they take up employment in other sections within ACT Health. Please refer to the **File Transfer Process** guidelines for further information.

## 2.4 **Requesting a File ⎯ refer to Record Management Files**

To request a new hardcopy employment records file or new part go to the Health Intranet home page, then click - **Business Support – Business Support Services – Records**

**Management – Electronic File Request Form**

A new part continuation file should be created when an employee’s file reaches a maximum capacity of 200 folios (pages) as per ISO 15489.1-2002, approximately 2.5 cm thickness.

**Limited / Restricted Access**

A generic/standard limited access, rather than specific limited access indicating position titles, will be allocated to the file automatically to indicate as follows:

**“Please note that this file may contain sensitive information associated with an employee and therefore access will be restricted to People & Culture, the relevant Director, Manager or Delegated Staff only.”**

The reason for this generic label now being used is due to the continuous changes to the responsibilities and position titles of managers or directors taking place throughout the organisation as well as employees moving from one section and designated to another director or manager. Thus original limited access positions regularly need to be updated which is time consuming.

**Employment record files must be stored in lockable cabinets and restricted to only those authorised to access them.**

|  |
| --- |
| **Authorised Administrative Support Staff Duties**  |

Directors and managers are ultimately responsible for those employees they delegate this responsibility to and it is therefore essential that delegated staff be made aware of their responsibilities and/or limitations in order to ensure employment records are managed accordingly.

Support staff, although able to undertake most administrative processes associated with the management of employment records as listed below are not authorised to approve or submit time sheets or leave forms unless been given official authorisation to do so, i.e. as acting or assistant managers and directors with official financial delegation.

The following is a list of those processes able to be undertaken by administrative staff in support of their manager or director:

* Requesting new files.
* The collection of records on behalf of their Manager or Director for approval.
* Assisting in the verification orsupporting of staff hours or leave requests.
* The process of attaching records to files once approved and submitted to payroll by the Director or Manager.
* The storage of section owned employment records files on behalf of the Director or Manager as well as arrangements associated with the physical transfer of files between areas within ACT Health and the return or retrieval of files to and from Records Management.

Any information associated with an employee must not be disclosed to others by those responsible for administering employment records. Any highly confidential information pertaining to a particular employee and contained on file should not be held and maintained by delegated support staff and must instead be held and maintained by the employee’s direct line manager or director.

**Access be limited to Assistant Directors / Managers, Team Leaders, Supervisors and PA’s. However, other administrative support staff can undertake these roles as directed.**

## 2.5 **Records Custody (General)**

Employment records are not owned by directors/managers or individuals and remain the property of ACT Health and the Territory. Employment records are not to be transferred outside of ACT Health or taken by employees upon ceasing employment with ACT Health.

Under no circumstances should an ACT Health employee hold or maintain their own employment records file.

The following reporting lines/hierarchical structure must therefore be applied in relation to the capture, custody and maintenance of ACT Health employment record files:-

* Director General’s (DG’s) employment records are to be held and maintained by the **Head of Service, ACT Government**.
* Deputy Director Generals’ (DDG’s) employment record files are to be held and maintained by the Director General – Health and DG Office.
* Executive Director level employment records files are to be held and maintained by their respective Deputy Director General (DDG) and DDG Office.
* Director and Assistant Director level employment records files are to be held and maintained by their respective branch or division Executive Director and Office.
* Manager level employment records files are to be held and maintained by their respective Director or Assistant Director.
* All other employee employment records files are to be held and maintained by authorised employees as approved by the Executive Director.
* **Under supervision**, an employee can access their employment file and copy information, in line with Information Privacy legislation.

##

## 2.6 **File Transfer Process**

Files should follow employees as they take up new positions within ACT Health and where a change in reporting lines is taking place.

When an employee moves from one section to another within ACT Health, Records Management requires the current director/manager to organise the transfer of the employee’s file to the new section’s director or manager.

It is the responsibility of the current director/manager to notify Records Management of the transfer and to provide a circulation copy (cc) to the receiving director/manager. This notification should be made by email to the following email address: Records Management Centre – ACT Health.

The email should provide the employment record file number, the employee’s name that the file refers to, the new section’s name the file is being transferred to, as well as the name of the assignee, which may be the director, manager or delegated employee that will be taking possession of the employment record file(s).

**Records Management will then update the HP Records Manager (HP RM) record system to reflect the transfer.**

It is preferred that when possible, employment record files be hand delivered between sections when an employee is transferring from one section to another within ACT Health or securely sealed/packaged and clearly addressed, including sender details and sent via the ACT Government Internal Mail Service **only**.

**People & Culture have right of access to all ACT Health employment record files if or when required, therefore, all employment record files must be released to People & Culture staff upon request.**

## 2.7 **Records Destruction**

Records Management is responsible for the overall management of employment record files on behalf of ACT Health. Therefore, any employment files that are no longer required by a section due to, for example, an employee leaving ACT Health, the file must be returned to Record Management for storage and eventual sentencing and disposal.

**Employment records, like all other ACT Health administrative paper based records, must not be destroyed by the section. The destruction of employment records can only be undertaken by Record Management** **staff on behalf of ACT Health.**

#

## 2.8 **Managing Other Personnel Related Records Guidelines**

Personnel related records that are outside of the normal employment conditions (history) records and not able to be covered under the Managing Health Personnel Employment Records section.

## 2.9 **Records associated with Rostering**

Sections must keep hard copies of rosters unless the section is using the PROACT rostering system. The same titling conventions as applied to combined time sheets files should also be applied to rostering files, e.g. the business name area, the individual employee’s roster and the roster period covered.

The type or classification of staff can also be included within the title if business areas produce separate rosters for each staff discipline, e.g. radiographers or nurses.

Rostering files are to be classified as follows:

Function (Human Resources) - Activity (Employee History) - Free Text (Rosters)

## 2.10 **Records associated with Recruitment**

## 2.11 **Formal permanent recruitment**

All formal permanent recruitment processes are undertaken via the eRecruitment (TALEO) system, therefore, you do not need to capture in hard copy. All relevant documentation associated with the recruitment, once completed, should be sent to the relevant area.

These are:

* Shared Services Recruitment for all Permanent recruitment and advertising, and
ACT Health Recruitment for temporary, casual employment and higher duty requests.

## 2.12 **Expression of Interest**

Recruitment records for Expression of Interests (EOI’s) do need to be captured in hard copy by the section.

An EOI recruitment file should be classified under the function of Human Resources and the activity of recruitment. Subject descriptors should only be used if the file is solely being used to hold documentation specific to the subject descriptor recorded, or left blank in order to allow for all subject descriptors and documentation to be placed together.

The key words Expression of Interest (EOI) followed by the position title, position number and the level of the position should all be recorded within the free text title.

The EOI decisions should be retained in case there is an internal review requested.  The official SAC report signed by the delegate including all the considerations of the panel should be held.

Recruitment including EOI files should be classified under Human Resources – Recruitment.

## 2.13 **Records associated with Staff Injury and Compensation Claims and Return to Work Plans**

Records associated with staff injury and compensation claimsare held by Shared Services, Chief Minister, Treasury and Economic Development Directorate (CMTEDD).
Email: injurymanagement@act.gov.au

Please note that new claims can be discussed with ACT Health Workplace Health Advisory Unit on 6205 1432.

# Personnel Records, SCHEDULE 1

##

## **ACT Health employment file**

**ONE FILE PER EMPLOYEE**

**The following is a list of records that should be captured within an ACT Health employment file.**

|  |  |
| --- | --- |
| * Approval to drive ACTPS vehicles.
 | * Hard copies of the more traditional leave application forms submitted to Shared Services - Payroll (approved or declined). NB: No hardcopy evidence such as approval confirmation is required for leave if submitted via HR21.
 |
| * Approval to home garage an ACTPS vehicle.
 | * Home based work applications.
 |
| * Attendance records (timesheets). This is other than those areas capturing attendance records via the officially recognised PROACT rostering system.
 | * In which case a hard copy is not required.
 |
| * Authorisation to use private vehicles for work.
 | * Learning and Development plans
 |
| * Cancellation or recall to duty – reimbursement of costs.
 | * Performance Management (performance plan) – hard copy. (Records as defined under the performance management activity, i.e. performance agreements, counselling, performance evaluations, skills assessments and records associated with higher duties).
 |
| * Claims for reimbursement for loss or damage to clothing or personal effects.
 | * Staff employment contracts (copies).
 |
| * Conference records such as approvals, booking confirmation, itinerary, publications and contact details associated with the conference or forum, etc. being attended.
 | * Study assistance applications.
 |
| * Copies of Return to Work (RTW) Plans.
 | * Training approvals and other associated documentation.
 |
| * Driver licence verifications.
 | * Health Professional Credentialing Annual Papers.
 |

# Personnel Records, SCHEDULE 2

## **Shared Services Centre**

**The following is a list of records that are to be sent to Shared Services Centre (SSC) in order to be captured within an employee’s SSC personnel file. Copies are not to be kept on ACT Health individual employee’s file.**

|  |  |
| --- | --- |
| * Acceptable use of ICT resources
 | * Individual Special Employment Arrangements
 |
| * Acceptable use of IT resources form
 | * Instrument of appointment / permanent transfer / declaration of un-attachment
 |
| * Accident reports
 | * Medical papers on appointment
 |
| * Address & Contact Details
 | * Motor vehicle reimbursement
 |
| * Advice from Australian Taxation Office (ATO)
 | * Other leave applications
 |
| * Application for Leave Without Pay (LWOP)
 | * Police Check
 |
| * Application for Long Service Leave (LSL)
 | * Prior service application
 |
| * Application for Maternity Leave / Parental Leave
 | * Probation reports
 |
| * Approved mobile phone reimbursements
 | * Qualification / Registration e.g. AHPRA
 |
| * Bank Details / Deductions
 | * Reduction of classification application
 |
| * Birth Certificate / Passport / Decree Nisi
 | * Relocation papers
 |
| * Calculations e.g. final entitlements on cessation, overpayments, underpayments, pre calculated advance leave, cash out of leave
 | * Salary packaging application
 |
| * Change of hours applications
 | * Second job approvals
 |
| * Compensation papers associated with the payment of claims
 | * Secondment papers
 |
| * Excess officer notification
 | * Separation information e.g. resignation, retirement, redundancy, retrenchment, dismissal, death, forfeiture of office
 |
| * Garnishees / Debt recovery e.g. Child Support Agency, Courts, ATO
 | * Superannuation information
 |
| * Individual Australian Workplace Agreement
 | * Temporary contracts
 |
|  |  |

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