SESLHD PROCEDURE COVER SHEET

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TYPE OF DOCUMENT	Procedure
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EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR	Director, Digital Health (CIO) as nominated Senior Responsible Officer for Corporate Records.
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POSITION RESPONSIBLE FOR THE DOCUMENT	Manager Office of the Chief Executive
FUNCTIONAL GROUP(S)	Records Management – Corporate
KEY TERMS	Records Management; Disaster; vital records
SUMMARY	To outline the procedure for developing, implementing and maintaining an effective and efficient department-based Disaster Management Plan for records. The procedure focuses on the four recognised elements of disaster management: prevention and preparedness (pro-active) and reaction and recovery (reactive)

Feedback about this document can be sent to SESLHD-Policy@health.nsw.gov.au

1. POLICY STATEMENT

The Local Health District (LHD) has a responsibility to ensure all District Departments meet their responsibilities in regard to disaster management of records.

Under the State Records Act, Part 2 Section 10 the Chief Executive has a duty to ensure that their public office complies with the requirements of the Act and the regulations with respect to State Records. Part 2 Section 11 states that "each public office must ensure the safe custody and proper preservation of the State Records that it has control of."

2. BACKGROUND

To outline the procedure for developing, implementing and maintaining an effective and efficient department-based Disaster Management Plan for records.
The Procedure focuses on the four recognised elements of disaster management: prevention and preparedness (pro-active) and reaction and recovery (reactive).

3. RESPONSIBILITIES

Chief Executive has ultimate responsibility with delegated responsibility to Tier 2 Director Digital Health (CIO) nominated Senior Responsible Officer for Corporate Records.

4. DEFINITIONS

Disaster: Unexpected events with destructive consequences, including small and large scale events.

Disaster Management: Term given to strategies for the prevention, preparedness and response to disasters, and the recovery of operations following disasters.

Vital Records: Vital records are those records without which an organisation could not continue to operate. They are the records needed to re-establish an organisation if all other records were destroyed. They are essential to business and cannot be obtained from any other source.

5. PROCEDURE

Senior management have the responsibility to ensure that risk identification, analysis and assessment are carried out on a regular basis and that cost effective treatment methods are implemented to safeguard SESLHD's records and recordkeeping systems.

The recommended methodology, based on that in Australian/New Zealand Standard, AS 4360 - 2004, Risk Management, involves the following steps:

1. Establish the context
2. Identify the risks to records and recordkeeping systems
3. Analyse the risks in terms of probability and effect
4. Assess the risks in terms of acceptability and priorities for treatment
5. Treat the risks by identifying, evaluating and implementing options (this involves developing and implementing a counter disaster plan)
6. Monitoring and review

5.1 Prevention

The prevention phase should involve the:

- identification and assessment of risks to records and buildings and areas where records are stored, and
- identification and documentation of the important and vital records in the organisation.

Where cost effective methods can be found to eliminate or reduce risks, these should be implemented.

Each department must identify what is `vital'. This should involve elements of business continuity and resumption planning strategies, as some vital records are essential in restoring critical functions. Organisational charts and related documentation should be used to identify functions that are vital to the organisation.

Risk audits should be applied to SESLHD's vital records to see whether they are adequately protected and accessible to staff that require them. Risk audits for vital records should also identify the impact on business activities, such as service delivery functions, legal liability and financial functions, if such records were lost or unrecoverable.

Once functions are identified, they must be analysed to determine what records are:

1) **vital records:** those records which are irreplaceable and mission-critical

2) **important record**s: those records which are not irreplaceable but could be reproduced only at considerable expense, time and labour

3) **useful records**: those records which, if lost, will cause some inconvenience but could be readily replaced

4) **non-essential records**: those records which are listed in disposal schedules for routine destruction.

Electronic records might be vital as well, and will need to be identified and planned for. Once identified, vital records must be listed. Lists should include:

- an identification number for each type of record
- the name of the area responsible for record series or electronic system containing vital information
- the title of the series or electronic recordkeeping system
- an indication as to why it is considered vital
- the record format
- all physical locations of originals and duplicates, and
- the frequency of update.

5.2 Preparedness

Where risks cannot be eliminated they need to be managed. All Local Health District departments should establish and maintain a Disaster Management Plan. This Plan should identify the most appropriate way to:

- initially respond to a disaster
- maintain business continuity during the disaster, or
- recover quickly after the disaster.

The disaster recovery plan should also include:

- maintaining lists of materials and contacts that can be used in a disaster
- keeping recovery supplies on site
- testing and reviewing the plan, and
- training staff in the plan's use.

All potential risks to records, their possible causes and consequences should be identified. One of the most important ways to identify potential disasters is to conduct regular risk audits of the building and its surroundings.

Risk audits should also be applied to electronic records and their locations.

5.3 Response

Response includes the activities involved in putting the plan into action and getting together those resources that can assist agencies to protect or secure their assets from loss. It includes contacting the response and recovery team and relevant authorities, securing areas, issuing press releases and contacting recovery resources.
Appendix 1 – Flow chart - Long Term Actions for a minor disaster

5.4 Recovery

The final phase of disaster management is recovery, the activities associated with restoring resources and operations following a disaster so that normal operations can resume.

Detailed information on the four phases of Disaster Management for records are available from State Records NSW Counter disaster reaction and recovery plan.

6. DOCUMENTATION

Disaster Management Team Checklist – **Appendix 2**

7. REFERENCES

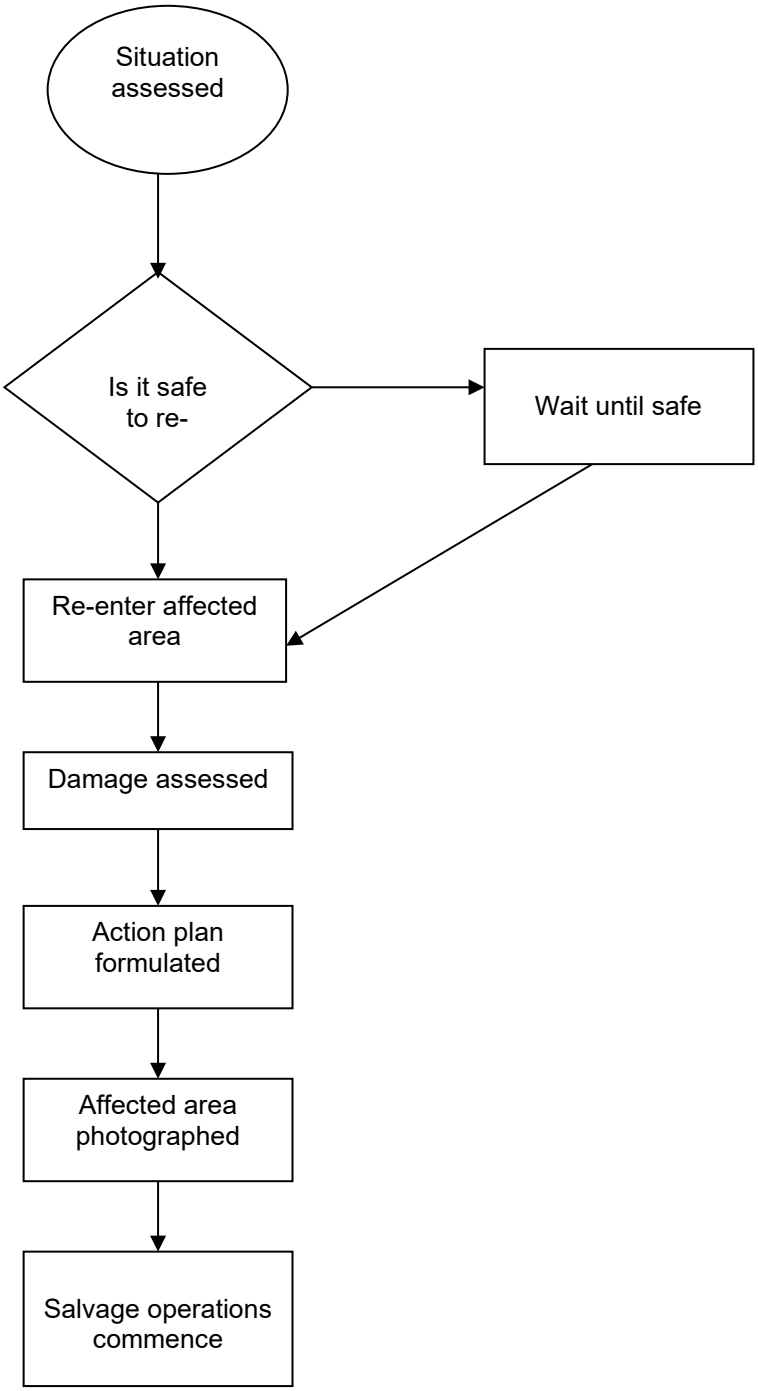
National Safety and Quality Health Service Standard – Standard 1 – Clinical Governance
State Records Act 1998
State Records NSW Counter disaster reaction and recovery plan
NSW Health Policy Directive PD2009_057 - Records Management – Department of Health

8. VERSION AND APPROVAL HISTORY

Date	Version No.	Author and approval notes
October 2004	0	Document previously prepared by Area Records Management Committee- not published- Reviewed in Oct 04 by Area Records

		Officer and re-formatted and released by the Manager Systems Integration.
September 2005	1	Minor changes made by Records Manager, Executive Support Unit following feedback from consultation with stakeholders. Approved by Area Executive Committee 27 September 2005
February 2011	2	Minor changed made by Records Manager, Executive Support Unit in consultation with Area Corporate Records Management Committee Formatting changes due to change to Local Health Network
October 2012	3	Changes made to LHD Approved by DET
November 2012	4	Minor changes made by Manager Executive Services in consultation with Chief Executive.
July 2016	5	Minor changes made by Records Coordinator to references and hyperlinks
July 2016	5	Updates endorsed by Executive Sponsor
May 2020	6	Minor changes made by Records Coordinator to references and hyperlinks and endorsed by Manager Executive Services on behalf of Executive Sponsor.
May 2020	6	Processed by Executive Services prior to publishing
18 December 2023	6.1	Minor changes to update Senior Responsible Officer for Records management to Director, Digital Health (CIO and update broken hyperlinks.

Appendix 1 - Long Term Actions for a minor disaster



Appendix 2 – Disaster Management Team Checklist

1. Have you developed a project work plan and a strategic plan for the project?	❑ Yes ❑ No
2. Have you arranged to report regularly to senior management?	❑ Yes ❑ No
3. Have you informed all staff of the project?	❑ Yes ❑ No
Prevention - Records management practices	
4. Do you have current records inventories which list a record's function, format, location and use, and whether it is vital?	❑ Yes ❑ No
5. Have you documented classification and retrieval systems so that files can be found easily?	❑ Yes ❑ No
6. Have you documented retention and disposal schedules?	❑ Yes ❑ No
7. Have you determined requirements for recordkeeping?	❑ Yes ❑ No
Vital records programs	
8. Have you identified your vital records in all record formats?	❑ Yes ❑ No
9. Have you addressed actual and potential risks that could adversely affect vital records?	❑ Yes ❑ No
10. Are vital records copied for backup protection and the copy stored at a different site to the original?	❑ Yes ❑ No
11. Are vital records stored on or offsite in appropriate storage conditions and housings?	❑ Yes ❑ No
12. Are vital records secured from unauthorised access?	❑ Yes ❑ No
13. Do you have a vital records plan?	❑ Yes ❑ No
14. Are there procedures to review and test the vital records program and manage the identification of new vital records based on the risk analysis?	❑ Yes ❑ No
Risk management	
15. Have the risks to records been addressed in organisation-wide risk assessments?	❑ Yes ❑ No
16. Have you assessed the risks to records as part of your disaster management project?	❑ Yes ❑ No
17. Have cost-effective risk treatment options been implemented?	❑ Yes ❑ No
18. Are risk management strategies for records regularly reviewed to ensure they are effective?	❑ Yes ❑ No
Security	
19. Are the records unit work area and all records storage areas secure against unauthorised access?	❑ Yes ❑ No
20. Are there procedures and equipment for securing records not normally held in records storage areas?	❑ Yes ❑ No
21. Do the procedures in Question 20 cover: a. the issue of records to/from agency staff b. removal or borrowing records from agency premises	❑ Yes ❑ No ❑ Yes ❑ No
22. Do you have procedures to secure your electronic records from unauthorised access?	❑ Yes ❑ No

23. Have you identified records which require special handling because they may contain confidential or valuable information?	❑ Yes ❑ No
24. Are such records stored securely and flagged to indicate restricted access?	❑ Yes ❑ No
Business continuity/resumption planning	
25. Have the critical functions of your department been identified?	❑ Yes ❑ No
26. Are the records to support these functions managed as part of your vital records program?	❑ Yes ❑ No
27. Has your department identified and listed other business resources needed to perform critical functions (such as computer equipment)?	❑ Yes ❑ No
28. Has your department identified alternative sources for these business resources?	❑ Yes ❑ No
Disaster planning, response and recovery	
29. Does your department have a counter disaster plan for agency records based on the risk analysis?	❑ Yes ❑ No