

State Government Organisations RKP Self – Evaluation Guideline

Purpose

The purpose of this Guideline is to:

- ensure State government organisations provide the required documentary evidence in draft/amended Record Keeping Plans submitted to the State Archivist and Executive Director State Records
- assist State government organisations to evaluate their draft Record Keeping Plans against standard criteria before submission
- promote consistency and uniformity in Record Keeping Plans.

Background

SRC Standard 2: Record Keeping Plans includes six (6) record keeping principles, each of which contains one or more minimum compliance requirements. SRC Standard 6: Outsourcing includes seven (7) record keeping principles, each of which contains minimum compliance requirements.

A Record Keeping Plan (RKP) will include one or more documents which, when assessed as a whole, provides an accurate reflection of the record keeping program within an organisation.

More specifically, documentation regarding an organisation's record keeping system/s, disposal arrangements, policies, practices and processes are essential components of the RKP. The inclusion of such documentation constitutes evidence of compliance. Documentation may take the form of:

- a **detailed** description of current practices within the body of the RKP, supported by manuals, plans, extracts, etc. (e.g. the disaster management plan, statement from the organisation's Annual Report addressing record keeping); **or**
- a **brief** description of current practices within the body of the RKP including a reference to copies of complete documents included as attachments to the RKP as evidence (e.g. policy and procedures manual, disaster management plan, staff induction manual, etc.).

All State government organisations are encouraged to submit their draft/amended RKP to the State Archivist and Executive Director State Records before the required date for submission (as advised by the State Records Office (SRO)). A draft RKP may be submitted without formal approval by the CEO/Principal officer to allow for SRO evaluation and feedback, CEO approval should be provided following finalisation of the draft.

Self-Evaluation Checklist

The Checklist is to be used by all State government organisations in preparing their draft/amended RKPs for submission.

The Checklist is to be completed as part of the preparation of the organisation's draft RKP and **must** be submitted with the draft RKP to the State Archivist and Executive Director State Records.

The Checklist addresses each Principle of Standard 2 and Standard 6 and their minimum compliance requirements.



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Sections to be completed include:

- whether required documentation is, or is not, included in the RKP (by answering Yes or No in Column 2)
- rating = Your assessment of your organisation's performance against each criterion (by applying a rating of 1 – 4 in Column 3)
- where the rating is less than 3, strategies for improvement and timelines for completion (Column 4)
- additional comments and references to attachments (Column 4).

Assessment Rating 1 or 2

Generally, if an organisation is unable to demonstrate that it has met the minimum compliance requirement/s (i.e. the assessment of any aspect is "Inadequate" or "Acceptable but Requires Development"), the organisation is to state in the RKP:

- a) the reasons for non-compliance (Assessment Rating 1 only)
- b) the strategies or actions it intends to undertake to meet compliance
- c) the proposed timeline for completion.

Transmittal Letter

Your finalised RKP should be submitted to the State Archivist and Executive Director State Records with a signed transmittal letter as per the samples located at:

<https://www.wa.gov.au/organisation/state-records-office-of-western-australia/record-keeping-plans-and-templates>



Principle 1 – Proper and Adequate Records

Government organisations ensure that records are created and kept which properly and adequately record the performance of the organisation's functions and which are consistent with any written law to which the organisation is subject when performing its functions.

Minimum Compliance Requirements

The Record Keeping Plan must provide information about:

1.1 Historical Background of the Creating Body,

and is to include:

- Brief organisational history, indicating the organisation's establishment date, names of predecessor organisations, names of major Boards, Committees, Commissions, Tribunals, etc. administered, or previously administered, any amalgamations and separations, and changes in functions that may have occurred, including dates when these events occurred and arrangements for custody and/or transfer of relevant records
- Essential relationships with other organisations.

1.2 Mission Statement

Include the organisation's mission statement.

1.3 Strategic Focus Identified

Include the organisation's vision statement and/or main strategic focus.

1.4 Business Activity Identified

List and provide a brief description of the primary business activities of the organisation.

1.5 Outsourced Functions Identified

List and provide a brief description of **ALL** functions (not only record keeping functions) outsourced to external bodies. (If not identified here, should be identified under Standard 6).

1.6 Major Stakeholders Identified

List the major stakeholders of the organisation.

1.7 Enabling Legislation

List the enabling legislation of the organisation.

1.8 Other Legislation

List the legislation the organisation administers and the significant legislation impacting on the organisation's record keeping (maximum list of 10).

1.9 Major Government Policy and/or Industry Standards

List significant standards the organisation is obliged to comply with or voluntarily adopts (maximum list of 10).

1.10 Identified Areas of Improvement

Report, if appropriate, areas where improvement is needed and what strategies/amendments/improvements will be implemented before the next review of the RKP, including expected date/s for completion.



Documentation Required in RKP

Documentation is to include **ALL** aspects addressed above, preferably in that order.

NB: Much of the information required is similar to that contained in Annual Reports, Strategic Plans, websites and reports published by your organisation.

Principle 1 - Checklist

Rating 1 - Inadequate

Means the required information or lists **HAVE NOT** been included in the RKP.

Therefore, the organisation **MUST** provide:

- the reasons for non-compliance
- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.

Rating 2 - Acceptable but Requires Development

Means the information or lists supplied in the RKP lack sufficient coverage, are incomplete, or are not clearly identified in the RKP.

Therefore, the organisation **MUST** provide:

- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.

Rating 3 - Effective

Means the information or lists supplied in the RKP meet the minimum compliance requirements.

Rating 4 - Very Good

Means the information or lists supplied in the RKP meet the minimum compliance requirements and are clear and concise.



Principle 2 – Policies and Procedures

Government organisations ensure that record keeping programs are supported by policy and procedures.

Policies and procedures are to cover records in all formats and all aspects of their management, including: the creation of records, their capture and control, their security and protection, access to them and their appraisal, retention and disposal.

Minimum Compliance Requirements

2.1 Records Management and Business Information Systems

An overview of the records management system/s and **major** information systems which contain corporate records.

2.1.1 Records Management System

Whether the records management systems are manual or automated, paper based, electronic or a hybrid system.

When the current system was implemented, how changes of systems have been managed.

Planned changes to records management systems.

2.1.2 Business Information System/s

Name of the business information system/s and a brief description of records, documents or data held in each system.

Which, if any, of the business information systems are integrated with the records management system.

2.2 Records Management Policy and Procedures

RKP documentation must show that the following aspects have been addressed in the organisation's policies and procedures manual:

- **Access to Corporate Records** - Security and access control for corporate records, protection of confidential records, procedures to manage requests for access to State archives in the organisation's custody.
- **Authorised Disposal** – Assigned responsibility for compiling disposal lists, authorisation of disposal, etc., frequency of retention and disposal program.
- **Correspondence Capture and Control** - Mail management policy and procedures, assigned responsibility for classifying, indexing and registration, file titling conventions, file numbering, etc.
- **Digital (electronic) Records Management** - The organisation's approach and methodology for the management of its digital/electronic records and information (e.g. print and file, identification of the official record, use of EDRMS, hybrid system, etc.).
- **Digitisation [Where applicable]** - Digitisation policy and procedures, including: risk assessment and quality control, categories of records digitised and arrangements for disposal of source records, compliance with the requirements of the *General Disposal*



Authority for Reproduced Source Records and the Specification for Digitisation.

- **Email management** - Capture, retention, and authorised disposal of email messages to ensure accountability. Should indicate whether the organisation is utilising a document management system or information system to capture emails (e.g., identification of the official record, use of EDRMS, hybrid system, etc.).
- **File Creation/Closure** - Assigned responsibility, physical and/or automated file creation.
- **Information Classification** –Outline how your organisation classifies and labels the sensitivity of its information, and the related roles and responsibilities for all staff, in accordance with the *Western Australian Government Information Classification Policy*.
- **Mail Distribution** - Assigned responsibility, frequency, tracking mechanisms, and security measures.
- **Metadata Management** - Methodology for capture and control of metadata, e.g. naming conventions, business rules or classification scheme, specification of metadata automatically captured in information systems, requirements for manual capture of metadata, etc.
- **Migration Strategy** - Strategies planned or in place for migrating records contained in information systems, on networks in various software applications, databases, etc. Include assigned responsibility, regularity.
- **System/s Management** - Delegations of authority for control and security of systems utilised by the organisation e.g. location of network servers, security measures for access to servers and network access, etc.
- **Website Management** - Guidelines to determine the purpose of the site (e.g. informational/transactional), strategies implemented for the management of the website over time, e.g. methods of managing records of changes/updates to the website information, capture of all information published to the website within the corporate record keeping system (e.g. EDRMS), or to another information system, etc.
- **Other** – Other policies and procedures relating to record keeping for the organisation, for example, procedures for management of social communication tools such as messaging apps and social media platforms.

2.3 Certification of policies and Procedures

RKP documentation must show that the policies and procedures have been formally authorised by senior management.

2.4 Evaluation of Policies and Procedures

Report, if appropriate, areas where improvement is needed and what strategies/amendments/improvements will be implemented before the next review of the RKP, including expected date/s for completion.



Documentation Required in RKP

The Record Keeping Policies and Procedures Manual

The “Certification” of Policies and Procedures

Evidence of formal authorisation or certification that the policies and procedures are in place and distributed throughout the organisation.

Where the organisation does not have a formal policies and procedures manual for record keeping, individual, certified/authorised policy and procedure documents may be provided as evidence.

In the absence of either a manual or individual policy and procedure documents, the organisation may adopt the RKP as the “manual” and must include statements addressing the following, demonstrating that:

- the policies and procedures have been established
- the roles and responsibilities for all employees are defined
- the organisational scope of the policies and procedures has been addressed e.g. their applicability to regional branches or outsourced contractors
- they have been authorised at an appropriate senior level and are available to all employees.

AND provide detailed descriptions of current practices in relation to all sections listed under 2.2.

Evaluation of Policies and Procedures

An evaluation of how well the policies and procedures operate in the organisation, including possible areas for improvement and the date the document is due for review.

Principle 2 - Checklist

Rating 1 - Inadequate

Means that an overview of the records management system/s and **major** information systems which contain corporate records have not been included.

In relation to policies and procedures, means:

- no policies and procedures covering the minimum requirement are in place in the organisation, or
- the policies and procedures in use in the organisation have not been formalised into a policy and procedures documents or a manual, or similar and it is not clear that the RKP constitutes the policies and procedures manual in relation to record keeping, or
- the policies and procedures manual or statements in the RKP do not contain the specified information as required in sections listed above under 2.2.

Means that no evidence of formal certification of the policies and procedures has been included.

Therefore, the organisation **MUST** provide:

- the reasons for non-compliance
- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.



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Rating 2 - Acceptable but Requires Development

Means that an overview of the records management system/s and **major** information systems which contain corporate records have been listed.

Means the policies and procedures manual, policy and procedure documents or statements in the RKP lack sufficient coverage and require development.

Means that some policies and procedures are pending finalisation and formal certification.

Means the evaluation indicates improvement is required.

Therefore, the organisation **MUST** provide:

- the strategies or actions it intends to undertake to meet compliance; and
- the proposed timeline for completion.

Rating 3 - Effective

Means that an overview of the records management system/s and major business information systems which contain corporate records have been listed as well as further details describing format, data held in each system and implementation dates.

Means the policies and procedures manual, policy and procedure documents or statements in the RKP provide sufficient coverage.

Means evidence of formal certification of the policies and procedures has been provided.

Means the organisation's evaluation indicates that policies and procedures are reasonably efficient and effective, or adequate for their organisation.

Rating 4 - Very Good

Means that an overview of the records management system/s and major business information systems which contain corporate records have been listed, include a detailed description of format, data held in each system, implementation, changes made and planned changes.

Means the policies and procedures manual, or statements in the RKP cover all aspects of the minimum requirements outlined and represents best practice record keeping.

Means formal certification for all policies and procedures has been provided.

Means the organisation's evaluation of the policies and procedures is comprehensive.



Principle 3 – Language Control

Government organisations ensure that appropriate controls are in place to identify and name government records.

Minimum Compliance Requirements

3.1 KWAAA Implemented

Has the Keyword AAA thesaurus for administrative records (KWAAA) been adopted and implemented?

Has a complementary functional thesaurus been developed, adopted and implemented?

OR

3.2 Thesaurus (other than KWAAA)

Has an in-house developed or other form of thesaurus been adopted and implemented, and does it cover administrative and functional records?

OR

3.3 File Plan/List of Subject Headings/List of Authorised Headings

Does the organisation utilise a tool, such as a file plan, subject list or a controlled list of file headings to control the titling of records, and does the tool cover administrative and functional records?

3.4 Assessment of its Effectiveness

Is the file titling system and terms in it appropriate for use by the organisation and does it cover both administrative and functional activities of the organisation?

Describe how the controlled vocabulary tool operates, its ease of use and how well it works. For example, coverage across the organisation, is it systematic/consistent, is it capable of being changed? Are changes to structure/content controlled?

3.5 Identified Areas of Improvement

Report, if appropriate, areas where improvement is needed and what strategies/amendments/improvements will be implemented before the next review of the RKP, including expected date/s for completion.

Documentation Required in RKP

- Description of the tool that the organisation has in place, how it works, whether it works well and report on any areas of improvement.
- If KWAAA is in use - **Do not** attach the thesaurus.
- If a complementary (to KWAAA) Functional Thesaurus is in use – Attach no more than three (3) **sample pages**, including a list of the functional Keywords and their scope notes.
- If another Thesaurus is in use - Attach no more than three (3) **sample pages**.
- If a file plan or list of authorised headings is in use - Attach a copy of the file plan or list.



Principle 3 - Checklist

Rating 1 - Inadequate

Means there are no appropriate mechanisms or tools in place to control the identification, naming or titling of the organisation's records.

Means the organisation has not provided an adequate description of the tool it has in place and how it works.

Means that the organisation has not provided an assessment of its effectiveness or identified subsequent areas of improvement.

Therefore, the organisation **MUST** provide:

- the reasons for non-compliance
- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.

Rating 2 - Acceptable but Requires Development

Means an appropriate tool/s is in place, but it lacks coverage (e.g. it does not adequately cover all the organisation's records), or is not easy to use, or changes to it are not well controlled.

Means the assessment of its effectiveness and/or identification of areas of improvement lacks sufficient detail or coverage.

Therefore, the organisation **MUST** provide:

- The strategies or actions it intends to undertake to meet compliance
- The proposed timeline for completion.

Rating 3 - Effective

Means an appropriate tool is in place and it covers all the organisation's records.

Means the tool is capable of being changed to suit business/functional changes, and that these changes are controlled, authorised and recorded.

Means the assessment of effectiveness and/or identification of areas of improvement is supplied, and indicates the tool is effective and only requires very minor improvements, if any.

Rating 4 - Very Good

Means an excellent tool is in place and it covers all the organisation's records.

Means the tool is capable of being changed to suit business/functional changes, and that these changes are controlled, authorised and recorded.

Means the assessment indicates the tool is very effective and there are no identified areas for improvement.



Principle 4 – Preservation

Government organisations ensure that records are protected and preserved.

Minimum Compliance Requirements

4.1 Assessment of the Risks to Records

A systematic assessment of disasters (natural, biological, structural failures, industrial accidents, technological, criminal behaviour and neglect), the likelihood of these occurring (rate low to high) and the risks to the organisation's records, with particular regard to current storage facilities, including:

4.1.1 Onsite Storage

Include, as appropriate:

- Onsite locations of the organisation (e.g. metropolitan offices are at Perth and Joondalup and regional offices are at Albany, Kalgoorlie, Geraldton and Carnarvon).
- Records storage facilities (e.g. metal filing cabinets, metal shelving, dedicated central filing area with metal compactus shelving, secure server room, etc.).
- Environmental conditions (e.g. all offices are air conditioned during office hours).
- Disaster prevention methods in place (e.g. fire detection devices and automated sprinklers installed in all offices).
- Most likely risks (e.g. All offices at risk of fire and vandalism, regional offices at risk of cyclones).
- Likelihood of occurrence (e.g. fire - low, vandalism – medium, cyclone – medium, etc).

4.1.2 Offsite Storage

Include a statement addressing whether temporary and/or archival records are stored offsite including location and details of commercial arrangements for records storage. For offsite storage **OTHER THAN** those approved under the CUA, include appropriate information as per 4.1.1 Onsite.

4.1.3 Data Centre and Cloud Storage

Include a statement detailing any arrangements for storage of electronic information at a third-party data centre or with a cloud service provider. Enter relevant information in the table (provided in the RKP template), including categories of records and information stored, location of the data centre/cloud, location of backups and confirmation that a risk assessment has been completed.

4.1.4 Storage of Archives

Include a statement addressing whether the storage facilities utilised to house archival records meet the requirements of the *Directions for keeping State archives awaiting transfer to the State Archives Collection*. Enter relevant information in the table (provided in the RKP template) with respect to: Environmental controls; Storage Mechanisms; Security and Disaster Management; Access and Control; and Preservation.

4.1.5 Backup Procedures

Include details of systems and frequency of backups, tape rotation, length of time backups are retained, responsibility, describe processes for checking backups, outline



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whether backups are stored offsite including location and details of any commercial arrangements for tape exchange and storage, if applicable.

4.1.6 Quantity of Records

Estimate (in linear metres) the quantity of hard copy **archival** records held by the organisation. To measure in linear meters, measure the length of the hard copy files / boxes as they sit on a shelf.

4.1.7 Security and Access

- Include a statement addressing security of records storage areas, including server rooms, and availability of access to records, including to electronic/digital records. Include additional security measures and access controls implemented in consideration of the *Privacy and Responsible Information Sharing Act 2024*.
- Overall risk assessment (e.g., overall risk assessment for all offices is low).

4.2 Assessment of the impacts of disasters

An assessment of the potential damage these disasters would have to the organisation's records and the potential impact on the business operations of the organisation.

4.3 Strategies in place for prevention and response

The strategies for reducing the risk of disaster and for quick response should a disaster occur with particular reference to:

4.3.1 Vital Records

Provide a list of record categories identified as Vital Records, including location, responsibility, and strategies for prevention of loss and response for recovery of the records.

4.3.2 Preservation of Electronic Records

Include strategies for ensuring electronic records/digital information remains useable for as long as required, periodic integrity checks and replacement of digital storage media (including removable storage devices), use of appropriate formats for preservation of electronic records/digital information with long term retention periods, etc.

4.3.3 Storage Review

Include frequency of reviews of records storage arrangements and facilities, responsibilities and outcome of latest review.

4.3.4 Recovery of Lost Information

Include strategies in place to facilitate the recovery of hard copy and electronic records (e.g. lists of contacts included in the organisation's disaster recovery plan/business continuity plan, placement of recovery bins in records areas containing equipment to assist staff in the recovery process).

4.4 Identified Areas of Improvement

Report, if appropriate, areas where improvement is needed and what strategies/amendments/improvements will be implemented before the next review of the RKP, including expected date/s for completion.



Documentation Required in RKP

A Records Disaster Recovery Plan (or similar) is attached which demonstrates that:

- an assessment has been made of the risks and impacts of disasters
- strategies and activities have been developed and implemented for reducing the risk of disaster
- quick-response strategies and activities have been developed and implemented for recovery of electronic/digital and hard copy records should disasters or emergencies occur.

The RKP should also:

- outline any further work which needs to be done to fully develop the Records Disaster Recovery Plan or other appropriate documentation (e.g. as part of an organisation wide Business Continuity Plan), and a time frame for completion
- demonstrate that the plan will be reviewed and updated regularly
- demonstrate that training program/s for all staff in relation to the plan is being implemented.



Principle 4 - Checklist

Rating 1 - Inadequate

Means that the organisation has not:

- undertaken an assessment of the risks to its records; and/or
- undertaken an assessment of the impacts of disasters on its records; and/or
- implemented strategies for the prevention of and response to disasters.

Therefore, the organisation **MUST** provide:

- the reasons for non-compliance
- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.

Rating 2 - Acceptable but Requires Development

Means that the organisation has:

- only undertaken a partial assessment of the risks to records; and/or
- only undertaken a partial assessment of the impacts of disasters; and/or
- only partial strategies are in place for the prevention of and response to disasters.

Therefore, the organisation **MUST** provide:

- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.

Rating 3 - Effective

Means that the organisation has completed an assessment of the risks to records in all formats.

Means that the organisation has completed an assessment of the impacts of disasters.

Means that the organisation has planned suitable strategies for the reduction and management of risk and has planned suitable quick response strategies.

Rating 4 - Very Good

Means that the organisation has undertaken an assessment of the risks to records in all formats.

Means that the organisation has undertaken an assessment of the impacts of disasters.

Means that the organisation has devised and implemented suitable strategies for the reduction and management of risk to records in all formats and has implemented suitable quick response strategies and can demonstrate that the plan will be reviewed and updated regularly.



Principle 5 – Retention and Disposal

Government organisations ensure that records are retained and disposed of in accordance with an approved disposal authority.

Minimum Compliance Requirements

Every State government organisation is to have an approved Retention and Disposal Authority (RDA) covering all records of the organisation.

New organisations **must** submit a draft RDA, either before or with the draft RKP, for the approval of the State Records Commission. New organisations should contact the State Records Office **prior to commencing development** of the RDA.

The organisation's RDA is to be reviewed and a report of the review submitted to the relevant approving body under the *State Records Act 2000* (the State Records Commission for Schedule 1 organisations; the President or the Speaker for Schedule 2 organisations; or the applicable Minister for Schedule 3 organisations). The review of an RDA may form part of the organisation's RKP. If the organisation has identified that the RDA requires amendment, the State Records Office should be consulted **before** the organisation commences that work.

5.1 Retention and Disposal Authority or Sector Disposal Authority

Organisations that have approved RDAs or a Sector Disposal Authority (SDA) which cover all the organisation's records in all formats need to provide the following details in the RKP:

The Registration Number of the RDA/SDA and its name.

Organisations also need to list details of previously approved, now superseded RDAs/SDAs.

5.1.1 Retention and Disposal Authority Review

Organisations that have an approved RDA must provide a report on the review of the RDA.

5.2 General Retention and Disposal Authority for State Government Information (GRDASG)

A statement confirming that the organisation has implemented the GRDASG for disposal of administrative, financial and human resource management records, and functional records where they are covered by appropriate classes.

5.3 Digitisation and Disposal of Source Records

[Where applicable describe:]

The organisation's approach and methodology for digitising source records, including evidence of the risk assessment undertaken, established policy and procedures that comply with the requirements of the *General Disposal Authority for Reproduced Source Records* (GDA 2025-013) and the *Specification for Digitisation of State Records*. Detail the categories of records digitised and arrangements for disposal of source records.



5.4 Existing Ad Hoc Disposal Authorities

Provide details of any Ad hoc disposal authorities approved by the State Records Commission for the organisation, including Ad hoc number, date range and type of records covered and whether disposal actions have been completed.

5.5 Existing Disposal Lists

Provide details of any disposal lists approved by the State Records Commission for the organisation, including disposal list number, date range and type of records covered and whether disposal actions have been completed.

5.6 Restricted Access Archives

A statement addressing the identification of restricted access archives, if any, is required. If it is decided that access to an organisation's archives is to be restricted, the statement is to include the:

- categories of records that are to be restricted
- reasons for restriction
- proposed open access dates (or restriction period).

5.7 Transfer or Retention of Archives

A statement detailing whether the organisation will transfer archives older than 25 years to the SRO, or whether they intend to retain State archives beyond the compulsory transfer period of 25 years in accordance with *SRC Standard 7: State Archives retained by Government Organizations* and the *Archival Storage Specification*.

The following must be included for archives that will not be transferred:

- the categories of State archives, including the applicable disposal authority reference number, that the organisation is requesting permission to retain
- justification for retaining the State archives
- evidence that State archives will be kept in accordance with *SRC Standard 7: Archives retained by Government Organisations*.

5.8 Retention and Disposal Program Implemented

RKP documentation is to address:

- the extent to which the organisation's RDA/SDA and the General Retention and Disposal Authority have been implemented
- the frequency of retention and disposal programs.

5.9 Authorisation for Disposal of Records

The level of authorisation (e.g. CEO) required for the disposal of records and a copy of a recent authorised list of records for disposal as evidence.

5.10 Identified Areas of Improvement

Report, if appropriate, areas where improvement is needed and what strategies/amendments/improvements will be implemented before the next review of the RKP, including expected date/s for completion.



Documentation Required in the RKP

- Details of the organisation's approved RDA or the relevant SDA (do not include the RDA/SDA itself).
- Details of the organisation's RDA review processes and the outcome of the review.
- Attach evidence that digitisation procedures comply with the requirements of the *General Disposal Authority for Reproduced Source Records*.
- Details of any restricted access archives.
- Details of any State archives which will not be transferred to the SRO.
- Attach evidence that the organisation can meet the requirements of *SRC Standard 7*.
- Details of previous ad hoc disposal authorities and disposal lists.
- Attach evidence of the retention and disposal program and its implementation (e.g. copies of the disposal procedure and a section of a recent records disposal showing authorisation and a sample list of records (up to three pages)).

Principle 5 - Checklist

Rating 1 - Inadequate

Means the organisation, which has never had an approved RDA, has **not** submitted an RDA and no predecessor agency's RDA applies.

Please liaise with the State Records Office if this is the situation.

NB: The only exceptions to this may apply to new State government organisations submitting a draft RKP under section 21 of the *State Records Act 2000*.

If a new organisation has not submitted an RDA as part of its draft RKP submission, the organisation **MUST** provide:

- the reasons for non-compliance
- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.

Means the organisation which has an approved RDA has **not** reported on the review of the RDA.

Rating 2 - Acceptable but Requires Development

Means the organisation has never had an approved RDA but has submitted a draft and are liaising with the State Records Office to finalise it for approval.

Means the organisation, which had an RDA approved more than five years ago, has submitted a new, fully revised RDA and is liaising with the State Records Office to finalise it for approval.

Means the organisation which has an approved RDA which does not cover all of the organisation's records has submitted the required amendment/s for the RDA and are liaising with the State Records Office to finalise it for approval.

Therefore, the organisation **MUST** provide:

- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.

Rating 3 - Effective

Means the organisation has submitted an RDA or an appropriate amendment to an RDA and



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it has been approved.

Means, if appropriate, the organisation has established digitisation procedures that fully comply with the requirements of the GDA for Reproduced Source Records.

Means the organisation's retention and disposal program and processes are in place and are effective.

Rating 4 - Very Good

Means the organisation's records are covered by an approved RDA or SDA.

Means the organisation's RDA is regularly reviewed for currency and comprehensiveness.

Means the organisation's retention and disposal program and processes are in place and meet best practice.



Principle 6 – Compliance

Government organisations ensure their employees comply with the record keeping plan.

Minimum Compliance Requirements

6.1 Staff Training, Information Sessions

Provide details of the strategies and activities that have been developed or implemented to ensure that the organisation's employees are aware of their record keeping responsibilities and compliance with the RKP. Strategies should include, but may not be limited to:

- presentations of in-house Records Management training; and/or
- external Records Management training; and/or
- staff information sessions; and
- coverage, whether training and/or information sessions are for records management staff and/or general staff.

And/or

6.2 Brochures or Newsletters

Provide details of record keeping information provided for employees within organisational brochures, newsletters or the intranet etc. Description should include whether the information is provided regularly, or on an ad hoc basis, and the regularity with which information is reviewed and updated.

And

6.3 Induction Programs

Describe information provided for new employees to ensure they are aware of their role and responsibilities. Description should include if induction programs are undertaken, including their coverage (e.g. provided to all staff) and topics covered.

6.4 Performance Indicators in Place

Outline of the Performance Indicators developed to measure the efficiency and effectiveness of the organisation's record keeping systems.

6.5 Agency's Evaluation

A report on the evaluation of efficiency and effectiveness of record keeping systems within the organisation.

NB: Record keeping systems are to be evaluated regularly and not less than every 5 years.

6.6 Annual Report

The organisation's annual report should include information on the organisation's compliance with its RKP and the *State Records Act 2000*.

New organisations should provide a draft statement reporting training/compliance that is to be included in the organisation's annual report.



Organisations completing an amended RKP should include an excerpt from the Annual Report where record keeping training/compliance is reported.

6.7 Identified Areas of Improvement

Report, if appropriate, areas where improvement is needed and what strategies/amendments/improvements will be implemented before the next review of the RKP, including expected date/s for completion.

Documentation Required in the RKP

- Statements which demonstrate that information on employees' record keeping roles and responsibilities is included in the organisation's induction program. Attach a copy of the induction program showing inclusion of record keeping as a topic.
- Statements which demonstrate that ongoing staff training in record keeping is being undertaken, including the method of instruction, (e.g. information sessions and/or brochures and newsletters), and topics covered in training sessions. Attach examples of brochures, handouts, intranet screenshots, etc.
- A report on the evaluation of the efficiency and effectiveness of the record keeping system including how and when the system was evaluated (e.g. staff survey, performance indicators).
- An excerpt from the Annual Report where training/compliance is reported, or for new organisations, a draft statement which is to be included in the annual report.

Principle 6 - Checklist

Rating 1 - Inadequate

Means there is no record keeping training program provided or under development for staff.

Means there is no record keeping induction program provided or under development for new staff.

Means the organisation does not have and is not developing Performance Indicators for measuring the efficiency and effectiveness of its record keeping system.

Means the organisation has not provided an initial evaluation of the efficiency and effectiveness of its record keeping system.

Means the organisation has not provided a draft statement or excerpt from its Annual Report where training/compliance is reported.

Therefore, the organisation **MUST** provide:

- the reasons for non-compliance
- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.

Rating 2 - Acceptable but Requires Development

Means there is a record keeping training program being developed or has been developed, but it does not provide adequate coverage.



Means the induction program is being developed or near completion, but it does not provide adequate coverage.

Means the organisation has provided an initial evaluation of the efficiency and effectiveness of its record keeping system, but it does not provide adequate coverage.

Means the organisation does not have but is developing Performance Indicators to measure the efficiency and effectiveness of its record keeping system.

Means the organisation has not provided a draft statement or excerpt from its Annual Report where training/compliance is reported.

Therefore, the organisation **MUST** provide:

- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.

Rating 3 - Effective

Means there is a record keeping training program provided with adequate coverage.

Means there is an induction program provided with adequate coverage.

Means the organisation has provided an initial evaluation of the efficiency and effectiveness of its record keeping system, and if necessary, provided strategies for improvement.

Means the organisation has developed Performance Indicators for measuring the efficiency and effectiveness of its record keeping system.

Means the organisation has provided an excerpt for inclusion in its Annual Report where training/compliance has been or will be reported.

Rating 4 - Very Good

Means the organisation provides a record keeping training program which has adequate coverage and includes information sessions, brochures or newsletters and induction programs and is reviewed regularly.

Means the organisation has provided an initial evaluation of the efficiency and effectiveness of its record keeping system, which has thorough coverage of the record keeping systems and demonstrates that it is regularly reviewed.

Means the organisation has developed and implemented Performance Indicators which measure the efficiency and effectiveness of its record keeping system.

Means the organisation has provided an excerpt from the Annual Report where training/compliance is reported.



Standard 6 – Outsourced Functions

State government organisations may enter into contracts or other arrangements whereby an individual or an organisation is to perform a function or service for the organisation, or act as the organisation's agent to deliver services to clients, or for the organisation's own use. The general term 'outsourcing' is used for such arrangements.

Contractual arrangements should ensure that the contractor creates and maintains records that meet the State government organisation's legislative, business and accountability requirements.

Minimum Compliance Requirements

7.1 Outsourced functions identified

Functions outsourced to other organisations/bodies/persons are to be identified. This may repeat the information provided under Standard 2 – Principle 1, or this section could refer to the information provided under Principle 1.

7.2 Record keeping issues included in contracts

In accordance with Standard 6 – Outsourcing, the organisation is to provide evidence to adduce that the following principles have been, or will be, addressed in contractual arrangements.

7.2.1 Planning

Matters relating to the creation and keeping of proper and adequate records of the performance of the outsourced function are included in the planning of outsourced functions so that State records are kept in accordance with legislative, business and accountability requirements.

7.2.2 Ownership

All State records or copies of those records (including backup disks/tapes) of the outsourced function, irrespective of their format, are specified by the State government organisation including legal ownership and use of the records created by the contractor during the life of the contract or agreement.

7.2.3 Control

Stipulates that the contractor creates and controls records, in electronic or hard copy format, in accordance with record keeping standards, policies, procedures and guidelines stipulated by the organisation.

7.2.4 Disposal

The retention and disposal of all State records of the outsourced function are covered by an approved disposal authority.

7.2.5 Access

All access provisions are specified.

7.2.6 Custody

Custody arrangements between the State government organisation and the contractor for State records stored on and off site by the contractor are specified and are to include the provision of adequate storage and security of State records in the custody of the



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contractor.

7.2.7 Contract Completion

All arrangements regarding record custody, ownership, disposal and transfer upon completion of the contract or agreement are specified.

Documentation Required in the RKP

Documentation is to include:

- excerpts of clauses which address record keeping requirements contained within existing contracts for outsourced functions; or
- examples of clauses which address record keeping requirements to be included in new or amended contracts for outsourced functions.

Standard 6 – Checklist

Rating 1 - Inadequate

Means the required information has not been included in the RKP.

Therefore, the organisation **MUST** provide:

- the reasons for non-compliance
- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.

Rating 2 - Acceptable but Requires Development

Means the information supplied in the RKP lacks sufficient coverage or is not clearly identified in the RKP.

Therefore, the organisation **MUST** provide:

- the strategies or actions it intends to undertake to meet compliance
- the proposed timeline for completion.

Rating 3 - Effective

Means the information supplied in the RKP meets the minimum compliance requirements.

Rating 4 - Very Good

Means the information supplied in the RKP meets all the minimum compliance requirements, demonstrates best practice record keeping, and is clear and concise.