Information Governance

Guideline

Version: Draft

Date Finalised: DD/MM/YYYY

Date for Review: DDMMYYYY

STATE RECORDS
of South Australia

Government of South Australia
State Records

Table of Contents

i. Glossary

Information governance maturity and capability – indicates the level of compliance of your agency's current Information Management Program and practices against the Information Management Standard.

Information asset - incorporates the definition of official record as defined by section 3(1) of the SR Act, and includes information, data and records, in any format (whether digital or hardcopy), where it is created or received through the conduct of government business.

Information asset audit - is a survey to identify what information assets exist and to evaluate how these assets support business requirements.

Information assets register – is a register that identifies what information resources are held and where they are located. It provides stakeholders with an overview of the information assets under your agency's control.

Business and regulatory analysis – a systemic approach to assessing the internal and external environment of your agency to identify its operational, compliance and regulatory information requirements in order to determine what information it should be creating.

Information Management Strategy – is a document which establishes the principles that must be followed by agencies to ensure information assets can be relied upon and trusted.

Information Management Standard – this document expands on the principles of the Strategy by outlining expected behaviours required to effectively manage information assets, to achieve business objectives and to meet legislative and policy obligations.

Information Management Program – comprises the overall set of elements needed to implement an information governance model which meets the Standard.

Information Management Plan – provides practical direction for implementing elements of the Information Management Program and meeting the Information Management Policy.

Information Management Policies and Procedures – an information management policy is the means of conveying the information management requirements expected of your agency. The procedures are the operational guidance for achieving the Policy.

Normal Administrative Practice - transitory or ephemeral, only needed for short period of time - a few hours or days.

Metadata - recordkeeping metadata comprises of the details needed to identify, describe, manage, and understand records so they act as authoritative evidence of business activity.

Disposal - disposal is a range of processes associated with implementing records retention, destruction or transfer decisions [not including transfer to State Records] which are documented in disposal determinations.

Disposal Determination – a disposal determination is a legal document that provides authorisation in accordance with the State Records Act for information assets to be disposed of.

Disposal schedule - is the means through which the disposal determination is implemented by identifying information assets as either temporary or permanent value. For information assets identified as being of temporary value, the disposal schedule further identifies how long the assets must be kept, at a minimum, before your agency can destroy them. Permanent information assets are to be transferred to State Records' custody in accordance with the Transfer Standard.

Good Information stewardship - is the careful, responsible and accountable management of information.

ii. Introduction

Purpose and scope

The Information Governance Guideline (Guideline) has been developed to support agencies in meeting their information keeping requirements under the *State Records Act 1997* (SR Act).

It is applicable to all agencies as defined in section 3(1) of the SR Act, and to the information assets of those agencies.

In this Guideline, the term 'information asset' incorporates the definition of official record as defined by section 3(1) of the SR Act, and includes information, data and records, in any format (whether digital or hardcopy), where it is created or received through the conduct of government business.

This Guideline will assist with the development and implementation of an Information Management Program, as prescribed in the Information Management Standard (Standard). It will also provide direction on how to improve an existing Information Management Program. It expands upon the behaviours underpinning the Standard, offering guidance on the necessary structure and rigor to manage information assets now and into the future. It also offers advice to assist in compliance with other standards issued under section 14 of the SR Act, and other advice provided by State Records.

South Australian Information Management

The governance of information for South Australian State and Local Government agencies, and Universities is established in the Information Management Strategy (Strategy) and the Standard.

The Strategy establishes the principles that must be followed to ensure information assets can be relied upon and trusted.

The Standard expands on these principles by outlining expected behaviours required to effectively manage information assets, to achieve business objectives and to meet legislative and policy obligations.

These expected behaviours can be achieved through the implementation of an Information Management Program (Program). You can assess your Program's compliance and current information management practices against the Standard using the Self-Assessment Tool (Tool) developed by State Records. The results of the Tool provide an indicative assessment of your agency's overall information governance maturity and capability, highlighting Program elements to focus on to ensure compliance with, and improvement against, the Standard.

Implementation of this Guideline

This Guideline does not need to be read in any particular order. You can choose to focus on priority information management areas already identified as needing improvement or carrying particular risk, for example ensuring systems are compliant.

It can be applied to:

- one or more components of information governance, such as security controls, privacy considerations, or disposal determinations
- any function or business process, including one that may span more than one business unit
- single business units or the whole agency
- any agency, regardless of size.

Sections 1-5 are in typical order of action but there is flexibility in how you might undertake them. For example:

- some elements may already be in place and only require review
- some elements can be undertaken simultaneously
- risk or regulatory requirements may dictate a focus on one specific element.

This Guideline may be used by any staff responsible for defining and / or implementing information management processes or systems. This includes records and information managers, Information and Communication Technology (ICT) staff, or risk and compliance managers who are involved in advising or assisting in process or system implementation.

This Guideline is to be used in conjunction with the Standard (Appendix A) and the Tool.

It should also be read in conjunction with the following standards:

- Appraisal
- Transfer
- Disposal
- Managing Digital Records in Systems
- Minimum Recordkeeping Metadata Requirements.

iii. Information Management Program

The Standard prescribes the required elements for a information management governance model, described here as a Program. The relevant components of the Program are outlined below:

Collectively, these elements will assist to develop a clear strategic direction for the management of information assets as well as foster a good information management culture with a view towards continuous improvement.

A Program should support broader strategic and corporate goals and objectives, carrying the same executive level commitment.

There are a number of steps to follow to develop and implement a Program:

1. Information Asset Audit

Undertake an information asset audit to identify what information assets are held. The identified information assets must be linked back to the business activities and functions.

2. Value and Risk Assessment

Assess and value what information should be created to support its business and regulatory requirements. To do this, consider legal and regulatory requirements, associated risks and business objectives. Risks associated with not creating information to support requirements need to be identified and managed. This can be achieved by undertaking a value and risk assessment.

3. Information Management Plan

An Information Management Plan (Plan) provides practical direction for implementing a Program. The Plan should be based on the outcomes of the information asset audit and value and risk assessment and identify information priorities. The Plan is a key element of the Program.

4. Education

Induct and train staff on the Program. A large part of the success of a Program relies on the commitment of staff to the information management policies and procedures and an awareness of their information management responsibilities.

Educating staff in the value and management of information is key to fostering a culture of good information management (refer to Principle 1 of the Standard).

5. Self-assessment and Reporting

Continue to formally assess and review the Program using the Tool. A self-assessment can also assist agencies understand gaps in their Program and as such can be used as a first step in the review of the Program.

1. Information Asset Audit

Relationship to the Information Management Standard

To implement the principles and behaviours in the Standard, what information assets your agency holds need to be identified (Behaviour 1.1) as well as how they relate to business functions and activities (Behaviour 1.3).

This will ensure your agency is making and keeping full and accurate records appropriate to your business processes, regulatory environment and risk and accountability requirements (Behaviour 4.1).

These behaviours will be met by conducting an information asset audit.

1.1 What is an Information Asset Audit?

An information asset audit is a survey to identify what information assets exist and to evaluate how these assets support business requirements.

One of the purposes of conducting an information asset audit is to compile a comprehensive information asset register (asset register). An asset register identifies what information resources exist across your agency and provides stakeholders with an overview of the information assets under its control.

1.2 Conducting an Information Asset Audit

Preparation

Before conducting an information asset audit:

Determine the scope of the audit, for example prioritise core business functions, business-critical assets (such as assets which hold information that is vital to the survival of your agency, or without which it could not operate), high-profile work units, identified areas of risk or agency-wide.

Determine how it will be conducted, such as through interviews and focus groups, business unit staff completing a questionnaire or business units completing a proforma asset register.

Determine how to identify an information asset. An information asset is not usually a single item. It should be recognisable to the business users as an identifiable collection of data, where a collection is a set of like or related information. For example, personnel files, a contracts database, customer management data, a group of policies and procedures, or in the case of single items could be an asset register, complaints register or a password register.

Applications that collect, manage or store information are not information assets but the information contained within them are. However, for information security purposes applications might be treated as an information asset, as the software itself requires protection.

A single system may hold multiple types of information assets. For example, a single system in a Council may have modules for rates, accounting, property, etc., each of which are separate information assets.

Check relevant sources to locate existing information assets, such as:

- documentation from previous information audits, including information security audits
- recordkeeping systems including registers of repositories for physical storage such as agency-run storage facilities, approved service providers (ASP) or State Records
- information sharing agreements including Memoranda of Understanding and contracts
- approved operational Records Disposal Schedules (RDS)
- ICT technical environment lists and systems registers
- lists of information required to be reported externally and internally.

Prepare initial list of people/business units to approach, such as staff who may be able to help identify and value information assets**.**

Conduct the Information Asset Audit

An information asset audit can be conducted by:

- interviewing selected staff to obtain information asset profiles
- sighting information assets and / or systems where required
- acquiring any additional documentation relating to information assets and / or systems.

Record and collate data into an asset register and analyse results. Create the asset register in a format such as a spreadsheet which enables data to be extracted for analysis, reporting or other purposes. Fields may include:

- type of record
- description
- business owner
- start date
- format, including copies
- legislative or contractual context
- system context, including interdependencies or previous migrations
- disposal coverage
- known risks.

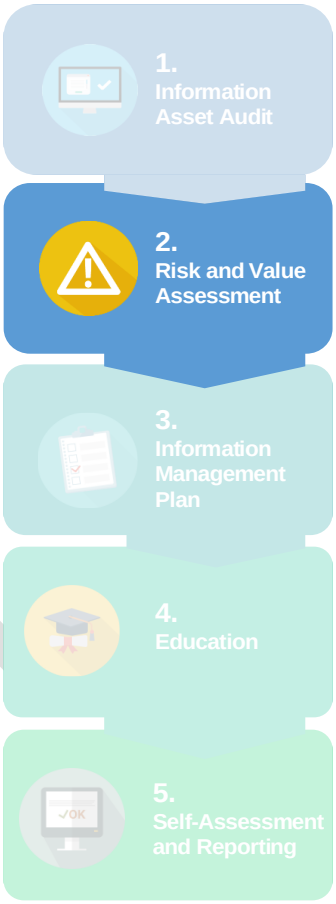
Review and finalise the asset register. This can be done by asking the nominated staff to review and validate the list relating to their business unit, or provide further information as required.

Plan to review the asset register both routinely and as more information assets are created, found or discontinued. A review should also be conducted when systems, software and media are upgraded or become obsolete.

1.3 Outcomes of an Information Asset Audit

The information asset audit will produce an asset register that will enable a clear understanding of what information assets are held. The asset register will form part of the value and risk assessment you will need to complete to inform the value of the information it holds.

2. Value and Risk Assessment



Relationship to the Information Management Standard

Information assets must be managed appropriately. To do this, it is vital to understand how your agency's information assets support the business objectives and operations, including its compliance obligations (Behaviour 1.2). This helps determine their value. Linking your agency's information assets back to its business functions and activities will enable this understanding (Behaviour 1.3).

In addition to the information assets identified through the audit, your agency also needs to analyse and document the information it needs to create to meet its legal and operational obligations (Behaviour 2.1).

A value and risk assessment can then be conducted to meet these behaviours.

Risks associated with not creating the required information must be identified and managed (Behaviour 2.3).

2.1 Why assess value and risk?

By knowing what information assets are held it is possible to assess the value of those assets, the risks to the assets and any action that might be needed to manage and protect them. There will then be understanding of how the information assets support business objectives, and operations and compliance obligations.

Assessing value and risk relies on a good understanding of your agency's external and internal context. External and internal context can be determined through a business and regulatory analysis.

Examine:

- external context including: regulatory requirements, political and societal influences, economic environment, technological and physical environment, and contractual relationships. Note: information assets that may not be of high value to your agency may be to the State of South Australia and need to be permanently retained.
- internal context including: governance and organisational structure, policies, objectives and strategies, resources, capabilities or knowledge, decision-making processes, technological environment, standards and guidelines adopted by the agency, and contractual relationships.

  This includes the business context in which the information assets are being created and used, and any governance arrangements in place addressing the management (both administrative and regulatory) and registration of its information.

Understanding your agency's organisational, accountability and regulatory requirements means priorities can be determined based on objective data, which in turn enables planning of information related actions and justifiable allocation of resources.

2.2 How to determine valuable information

'Value' is the level to which something is held to be important, worthy, or useful. In relation to information assets, 'value' can mean a monetary amount but also includes the value the asset has in its business, legal, political or social context.

There are two angles from which to value an information asset:

- its present importance to your agency, the government and the community, acknowledging this might change over time
- its ongoing value to the State as an authoritative source of evidence, summary of substantive decisions or actions, or aesthetic or historical significance (which would be deemed to be permanent under the Appraisal Standard).

High value information assets are those that enable your agency to perform its functions, provide services and be of permanent value either to your agency, government and the wider society.

Information assets with an active business value, but not necessarily of permanent value, are critical in enabling agencies to:

- undertake and continue their functions
- make good decisions
- service their clients / customers
- maintain or enhance their reputation
- respond to commissions, inquiries, audits, investigations and legal issues.

State Records' Appraisal Standard outlines the criteria for determining information assets of permanent value to the South Australian government.

Regardless of the value of an information asset, it cannot be disposed of unless authorised under a current disposal schedule.

Deciding information assets to make or keep

The process of deciding what information assets should be made and kept, based on value and risk, is also known as appraisal. This is different from an information asset audit which records what information assets your agency has, not what it should be creating.

Appraisal is achieved by:

- gathering information about the relevant business activity or process, including the people involved in the process (customers, clients, citizens)
- analysing the broader legislative, political and social context of the business

- documenting the analysis and risk assessment to communicate and account for the decisions.

Consider the following sources to help identify your agency's information needs:

- legislation and regulations
- industry and State Records standards
- government policies and procedures
- Audit reports (for example Auditor-General, other external or internal audit reports conducted on the agency)
- Ombudsman reports
- Royal Commission reports
- community and customer expectations.

These sources articulate specific information assets to be created, kept or provided. For example, under Regulation 425 of the *Work Health and Safety Regulations 2012,* agencies must create and maintain an asbestos register.

Where legislation states that specific information must be 'kept', this usually means 'created' and does not mean the information asset has permanent or even long-term value. Where information requirements are not clear in legislation or regulations, it may be necessary to seek legal advice. For more information on appraisal refer to State Records' Appraisal Standard or *ISO TR 21946 Information and documentation – Appraisal for Managing Records*.

Business classification

Once your agency's information requirements (what it should be creating) have been identified, these should be linked back to business functions and activities. This can be documented using a classification scheme. A classification scheme applies a uniform hierarchical set of terms and conventions to classify, title and retrieve information assets. It need not be limited to security classification.

Benefits of classification include:

- consistency in the description of information assets
- documenting the link between information assets and business activities and functions
- documenting access and security decisions
- improving the accuracy and ease of retrieval
- assisting in sentencing and disposal of information assets.

Gap analysis

Once your agency's information requirements have been identified this can be compared against the information your agency already creates.

Gaps, as risks, can be added to an information assets risk assessment, to be managed and mitigated.

2.3 Value changes over time

The value of most information assets will change over time. How the value of an information asset changes over time will depend on several factors, including the potential use of an asset beyond its original purpose, your agency's organisational, accountability and regulatory requirements and potential societal changes. For example:

- high value may decline as the risk for your agency and the community passes. A contract is high value while it is active, then decreases in value after the contract has finished but it still holds some value in case of any recourse. It then becomes of low or no value once the time has expired for recourse. The value scale will depend on what the contract is for. Contracts for major building works would have a longer value over time in comparison with a short-term cleaning contract.
- permanent value information assets, either to your agency or the State, may retain their high value indefinitely, even as their use changes. School registers or hospital admissions are high value to particular agencies as evidence of the delivery of services. Over time, these registers offer evidence of family relocations and familial health outcomes.
- information assets of little or low value to the business may become high value to the community. An agency visitor sign in sheet needed for security or safety on a given day, may become relevant in an Inquiry as evidence of who was on site on a particular time or date.
- evidence needed for reporting diminishes once reports have been made. Accounting spreadsheets might have medium value for a finite period then reduce to low or no value once regulatory requirements have been met. They may be duplicated for future reporting cycles but are only for reference. If they were lost, the risk would be low.

2.4 How to assess level of risk

'Risk' is the effect of uncertainty. It is a deviation from the expected, which can be positive or negative.

Risks are analysed in terms of potential events, the likelihood of those events and the consequences of those events both internally and externally.

For more information on risk assessments refer to the agency's risk management policies or the *ISO TR 21946 Information and documentation – Appraisal for Managing Records*.

Types of risk

While there are many different types of risk to your agency, the two information-related risks are:

- **business risk:** not having, or not being able to find, the information needed to meet your agency's obligations or the inappropriate disclosure of information through inadequate security or privacy management. For example, staff employment agreements are visible to a range of unauthorised staff within a corporate records management system, or documentation of a major tender

process are not available to query a breach of contract. These risks can be mitigated by having an information asset register and knowing what your agency's information requirements are.

- **risk to the information assets themselves:** through inadvertent deletion, poor physical storage, inadequate digital backup, or corruption.

Identification of potential events

Any risk event or circumstance that could affect business objectives and compliance obligations needs to be identified.

Initially this can be done based on past failures and successes, customer complaints, legal matters your agency has been involved in, watchdog reports, historical research or other events.

The causes and sources of the risk can also be discovered through questionnaires, interviews, workshops, examples from other agencies or testing scenarios.

In assessing the level of risk to an information asset or assets, consider:

- what is the business risk of information not existing, or being unable to be found when required?
- what is the likelihood of the information being required?
- does this likelihood diminish over time?
- does the impact, effect and cost of remediation reduce over time?
- are there any physical or digital risks to the information assets themselves?

Table 1 provides some examples of risks to information assets.

Table 1: Risk examples

Potential source of risk	Examples
Changes in the external environment	» regulatory » technological » physical environment (such as weather events, building damage, vermin) » external security threats (such as theft, cyber-attack) » stakeholder expectations
Changes in the internal environment	» organisational » technological » corporate capability and expertise » financial and material resourcing » internal security threats (such as fraud or sabotage)

Potential source of risk	Examples
Adequacy of the systems that manage information assets	» system design and documentation » system support » maintenance » sustainability » interoperability with related systems » cyber security
Processes for managing the information assets	» definition of requirements » steps to create and capture relevant information assets » quality of metadata capture » managed access and use » maintained usability » retention and / or disposal

Likelihood of the event

Once the potential event is known, consider the expected likelihood (probability or frequency) of that event occurring. For example, is a system outage a rare occurrence, or does it happen regularly? Are physical security breaches increasing around the offsite storage or transport of hardcopy information?

Likelihood is usually quantified on a scale of 'unlikely' to 'highly likely'.

Each risk should be assessed in terms of the likelihood of an event happening and the consequence if it does happen.

Potential consequences and impact

Poor information management results in:

- loss of evidence of a business transition or decision because it was never created or retained
- information assets being lost or damaged, destroyed, incomplete or inaccessible
- altered information which is unable to be trusted.

These results might have an impact on business objectives and compliance requirements.

Table 2 expands on the potential consequences of poor information management.

Table 2: Potential consequences

Potential consequence	Examples of impact
Ethical	» corporate social responsibility at risk or damaged » loss of trust » poor governance and compliance
Cultural	» change in community expectations
Legal	» failure to comply with legislative obligations » breach of contractual obligations
Social	» labour issues » human rights issues » public health issues » political uncertainty
Reputational	» poor / unreasonable stakeholder expectations
Environmental	» pollution
Financial	» reduction in revenue » negative budgetary implications » reduction in assets » increase in debt

Rating the risks

An example of a consequence / likelihood matrix is below using a five-point likelihood scale and a four-point consequence scale.

Placing a risk event in any of the squares determines its significance and therefore the urgency for action to address the risk.

For example, an external cyber infiltration event may result in information being lost or compromised. This could halt some operations and expose other systems to disruption. This event's likelihood is 'possible' but has 'high' consequences. The risk therefore falls into a category of 'high' significance and urgency for action.

Like value, the level of risk can change over time, so a risk assessment should be revisited periodically to ensure that risk mitigation measures remain fit for purpose.

Table 3: Four-point consequence scale

LIKELIHOOD				
Almost certain	Medium	High	**Significant**	**Significant**
Likely	Medium	High	High	**Significant**
Possible	Low	Medium	High	High
Unlikely	Low	Medium	Medium	High
Remote	Low	Low	Medium	Medium
	Low	Medium	High	Significant
				CONSEQUENCE OR IMPACT

All risks should be recorded as part of your agency's risk management program, whether in a separate information risk register or within a general agency-wide risk register or program.

2.5 Outcomes from assessing value and risk

Identifying information assets that are of high value and / or are at high risk enables priorities to be determined, strategies and plans to be developed and resources to be allocated accordingly.

Using a value-risk matrix can give an indication of where to assign priorities for risk treatment or mitigation.

Table 4: Value-risk matrix

VALUE				
High	Medium	Medium	**High**	**Vital**
Medium	Low	Medium	Medium	**High**
Low	Low	Low	Medium	Medium
	Low	Medium	High	Significant
				RISK

These priorities will form the foundation of the Information Management Plan by enabling your agency:

- to identify and manage associated risks of not creating or managing information required for business activities and compliance
- to prioritise efforts or resourcing

- to help compliance with regulatory requirements for information assets (such as the SR Act, *Freedom of Information Act 1991* (FOI Act), *Public Sector (Data Sharing) Act 2016* (Data Sharing Act), open access directives, etc
- to determine protection measures for information as required to maintain the security, confidentiality, integrity and availability of the information assets, including the assignment of physical, digital and information classification controls
- to develop business continuity programs and incident recovery plans
- to support the development of a disposal schedule
- to develop strategies and prioritise investment to ensure information assets remain in a usable and readable format for as long as required (for example through preservation or mitigation)
- to identify any 'silos' of information and decide what (if any) action to take. For example locating the information asset elsewhere, opening access to other areas of your agency, other areas of government or the public
- to identify where using existing information assets can be used to a greater extent, to reduce duplication of systems or effort
- to develop mechanisms for greater discoverability to support, for example, subpoena and other legal discovery processes.

3. Information Management Plan

Relationship to the Information Management Standard

As with any government asset, it is important that the management of information assets is planned at the agency-wide level. This is done through a Plan.

The Plan provides practical direction for implementing elements of the Program and meeting the Information Management Policy.

The outcomes of both the information asset audit and the value and risk assessment form the foundation of the Plan.

To develop the Plan, you will need to know which:

- policies and procedures are required to support the information management priorities, as well as to manage information assets in general (Behaviour 2.2)
- information resources your agency has/requires
- information management roles and responsibilities are required
- access and discovery schemes are applicable to your agency, through which information can be requested and / or shared, and how these are to be managed (Behaviours 5.7 and 5.8)
- privacy considerations and controls your agency has / requires to ensure the protection of personal information is properly managed. This includes its collection, storage, access to, correction of, use and disclosure (Behaviour 5.6)
- security and business controls your agency has / requires to ensure its information remains accessible, available, managed and shared and can be relied upon for as long as it is needed (Behaviours 2.4, 2.5, 4.5, 5.1 and 5.2)
- disposal program your agency has / requires to ensure information assets are disposed of in an authorised and timely manner once all business, legal and accountability requirements have been met (Behaviours 2.7, 5.4, 5.5 and 5.9)
- systems your agency has / needs to meet its information and information management requirements to ensure the quality and authenticity of information and comply with relevant Standards (Behaviours 2.5, 2.6, 5.2 and 5.3).

The Plan is a key element of the Program.

Scope and content of the Plan

It is recommended that agencies have one Plan. However, detailed project plans can be developed for the various projects and initiatives outlined in the Plan.

The Plan can contain short and long-term actions.

At a minimum the Plan should cover:

- Responsibilities
  Outlining the overall responsibility for leading and monitoring the implementation of the Plan and reporting on progress, as well as responsibilities for ensuring that specific actions are implemented and progress is reported
- Tasks and Timeframes
  The measurable tasks needed to achieve the objectives of the Program and the prioritised actions identified based on the value / risk analysis. These are likely to include:
  - policy and procedure development
  - access schemes
  - privacy measures
  - security measures
  - retention and disposal program
  - compliance of systems that hold information
  - education/training of staff
- Resources
  Defining what resources are needed to meet the actions, including funding, staffing and technical systems
- Consultation
  Identification of where consultation and interaction are required with other areas of the agency, such as ICT, security, business areas and senior management
- Monitoring, assessment and reporting

Review the Plan

Progress against the Plan should be assessed and reported on a regular basis.

The Plan should be reviewed annually or as part of the self-assessment tool process to:

- change or update the scope or timing on tasks as your agency's information governance maturity and capability improves and past Plan actions are completed
- delete or add new tasks or projects
- ensure it takes into account any changes in an external or internal context that affect the actions required under the Program and associated policies. For example a change in legislation might affect your agency's privacy or data security framework or data sharing arrangements
- ensure it addresses any gaps in the Program and its overall compliance with the Standard.

3.1 Policy and Procedure

Relationship to the Information Management Standard

Information Management policies and procedures are the formal mechanisms outlining how your agency will support its information management priorities, including how information will be created and managed, appropriate to risk, specific to your agency's context (Behaviour 2.2).

Your agency should have a clear strategic vision of its information management values and practices. This will assist in the fostering of an organisational culture that values and manages information as an asset and supports business objectives and activities (Behaviour 1.5).

All staff should be inducted and trained in information management policies and procedures (Behaviour 1.4). Staff adherence to the information management policies must be monitored and addressed as required (Behaviour 2.9).

Policies and procedures should be regularly reviewed to ensure they continue to support your agency's business and information requirements (Behaviour 2.8).

3.1.1 Information Management Policy

Develop the Information Management Policy (Policy) as a high-level set of requirements to be implemented according to the scale and complexity of your agency or business function, and the level of risk. It should contain objectives that reflect the principles and behaviours in the Standard as well as address your agency's information requirements (Behaviour 2.2).

An Information Management Policy:

- takes an agency-wide approach. It applies to all functions where information assets are created, controlled, stored, preserved, retained, destroyed or transferred
- is developed within the style and structure of your agency's policy framework (if one exists)
- is broad and should remain applicable over time
- should be short, concise and easily understood by the reader to communicate the guiding principles for creating and managing your agency's information assets
- should be formally authorised by an appropriate senior manager and sent to staff, contractors and volunteers that create or access the information assets
- should contain links to related policies
- should be easily accessible
- has a policy owner and is reviewed regularly and updated.

The Policy can be a single document, or the requirements can be built into one or more existing policies, such as Information Security Policy, Information and Data Access Policy, Risk Management Policy etc.

Generally, your agency should have policies that cover:

- roles and responsibilities relating to information assets including education and training
- the management of information assets, including use, disclosure and storage
- information asset privacy
- information asset security
- the disposal of information assets.

All information management policies must comply with relevant Standards, including ICT requirements.

3.1.2 Information Management Procedures

An Information Management Procedure:

- provides step by step instructions to achieve the objectives in the Information Management Policy
- includes a detailed description of activities, including what, how, when or who
- should be regularly reviewed and updated to reflect any process changes or responses to regulatory changes and risk
- is easily accessible
- should be short, concise and easily understood. Lists, tables, checklists and drawings are useful ways of presenting guidance in a concise manner.
- should have a procedure 'owner' that is responsible for reviewing, updating and championing its use.

Procedures should be developed according to need. This will be dependent on the:

- size and complexity of your agency and the functions it performs
- level of regulatory compliance and risk, requiring rules-based controls
- amount of detail required to provide the appropriate level of operational guidance.

A small agency might only need one or a few procedures covering the main aspects of information management practice. Whereas a large agency might need many procedures detailing information management practice for different functions of the agency.

Information management requirements can be one or more standalone procedural documents or can be built into other procedures. For example incident management planning for information assets can be included as part of business continuity procedure and planning or as a standalone plan / procedure.

3.1.3 Review and adherence

Policies and procedures should be reviewed regularly to ensure they remain up-to-date and relevant and continue to support your agency's information requirements (Behaviour 2.8). Regular review ensures:

- changes to regulatory or business requirements are incorporated and communicated to staff
- policy gaps are identified and addressed
- feedback received from stakeholders can be incorporated to improve current policies and services.

A large part of the success of the Program, and in turn fostering a culture that values information, relies on staff adherence to information management policies and procedures (Behaviours 1.5 and 2.9). It is important to educate and train staff (Behaviour 1.4) appropriately in:

- the value of your agency's information assets
- their information management responsibilities
- the relevant information management / business systems
- your agency's information management policies and procedures.

All relevant policies and procedures should be communicated to staff. Training should be provided where required. If appropriate, staff should provide an affirmation that they have read and understood polices applicable to them.

3.2 Resources, Roles and Responsibilities

Relationship to the Information Management Standard

Sufficient allocation of resources, including budget, infrastructure and staff is a vital element of a Program and Plan.

Staff allocated to perform information management related functions must be appropriately skilled and have the capability to manage information management assets in accordance with the Standard (Behaviours 1.4 and 3.1-3.6) and the agency's Plan.

Resource allocation needs to be done within your agency's specific context, such as its legal and regulatory requirements, risk and business objectives.

Under Behaviour 1.5, agencies must "*foster an organisational culture that values and manages information as an asset and supports business objectives and activities*". To foster such a culture, all staff must have a clear understanding and acceptance of their information management roles and responsibilities.

3.2.1 Resources

The scope of the Plan will define the type and quantity of resources needed to implement the tasks identified.

Relevant resources include:

- financial – once-off and / or ongoing
- staff – number and expertise
- infrastructure – such as space, technology, materials, logistics such as transport, services.

All resource allocation will have a financial component, even in terms of using regular budget allocation. New initiatives may require additional funding. Depending on the nature, scope and components of the initiative a business case might be required. For example, if the initiative is to make one or more specific information systems compliant with relevant standards, there may be costs in engaging external specialists to undertake that work. Or, if a major records disposal program is required, funding might be required for contract staff, materials and transport.

Determine resource needs by:

- identifying all aspects of support needed to implement the required information management related tasks

- assessing if resources are needed on a once-off, intermediate or ongoing basis, and how the resource mix might change. Funding might need to be secured as part of the regular budget allocation for specific areas (for example the records management function)
- identifying what resources are already available and what resources need to be acquired from elsewhere
- identifying costs as accurately as possible and, if applicable, how they might change over time
- identifying possible options for resourcing, for example can someone with appropriate expertise be assigned from another area of your agency or from across the sector, can university students with relevant skills be engaged, can existing budget be reassigned from a lower priority task or can your agency share storage space with another agency?

If needed, a business case or recommendations according to your agency's internal process can be prepared. In aiming to meet the Standard should clearly identify the business benefits and risk.

Short-term engagement of appropriate expertise is recommended, where required, for agencies that do not have a dedicated information management specialist.

3.2.2 Roles and responsibilities

Principle 3 of the Standard is about information ownership or stewardship. Information stewardship is the careful, responsible and accountable management of information. The information is not owned personally by any individual but rather by your agency, however responsibility and accountability for the information may be assigned.

Good information stewardship

Ownership and accountability for information (Principle 3) must be managed consistently through a governance structure that:

- formally assigns the responsibility of information assets (in writing) to relevant 'business owners' (the terminology used to denote those responsible and accountable for specific assets, as noted above no ownership rights are actually assigned)
- ensures staff are aware of their information management responsibilities and have the necessary skills to fulfil them
- documents and clearly defines in writing, through policy or other internal documents, the roles and responsibilities relating to the management of information assets
- provides clear communication to assigned owners of their responsibilities in managing the information assets assigned to them
- monitors and reports on staff adherence to its internal information management policies
- has the support and commitment of the chief executive and senior management, including the allocation of proper resourcing.

Information stewardship might be the responsibility of several roles at different levels within your agency. An individual may be assigned more than one role, for example a senior manager or the Information Manager may also be the Information Management Policy owner. For small to medium agencies roles may be combined.

Fostering a good information management culture

In addition to good information stewardship, it is important for your agency to foster a good information management culture (Principle 1: the value of information is known), that:

- values and manages information as an asset
- recognises how its information assets support business objectives and activities.

To achieve a good information management culture, your agency must have a clear and well communicated strategic vision and understanding of the value of its information assets and how they are to be managed. Your agency's strategic vision and direction should be developed in accordance with the Standard's principles with adequate training and resourcing provided to ensure the effective implementation of such policy. One of the key pillars to fostering an organisational culture that values and manages information as an asset and supports business objectives and activities is having a robust Program.

Another key pillar is the championing and promotion of good information management principles and values by your agency's chief executive and senior management. This includes ensuring the Program is effectively implemented through:

- the allocation of adequate resources. This includes identifying future areas for improvement / development to be factored into budget objectives where current budget constraints apply
- promoting sound information management practices, underpinned by the Standard, in its operational activities, including the implementation of supporting information management policies and procedures
- providing information management training to staff and educating staff on the importance of information management to create a shared understanding of your agency's information management values.

Responsibilities

The level of responsibility for information management varies according to an individual's role.

Typical levels of responsibility are listed in Table 5. The role title may be different depending on the agency, for example the Information Manager may be titled 'Records Manager'.

Your agency must ensure all staff receive information management training and comply with your agency's information management policies and procedures. All staff should be made aware of the roles and responsibilities in creating and capturing information assets in order to carry out business functions and activities effectively. Staff compliance should be monitored routinely.

Table 5: Roles and responsibilities

Role	Responsibility
Chief Executive (or principal officer)	» ensure the agency complies with legislative requirements for information management, including the SR Act and Standards issued under the SR Act » actively support and champion information management values and practices
Senior Managers	» understand regulatory requirements for information management and oversee compliance » approve and assign appropriate resources to support the implementation of the Plan » actively support and champion information management values and practices
Information Manager	» participate in the development, acquisition and implementation of systems that keep information assets, in any format. This might be done in conjunction with others, such as ICT professionals, business area managers » develop controls for information assets » provide training and support » undertake information management compliance or capability assessments » intervene promptly and appropriately when made aware of inappropriate information management practices » manage centralised hardcopy records systems and dedicated Electronic Document and Records Management Systems (EDRMS)
ICT / Information Custodian / Records officers and administrators	» ensure continuous and reliable operation of information systems, such as security, backup and business continuity, including for hosted or cloud-based systems » administer hardcopy records systems and EDRMS
Business Unit Head	» be designated as the 'Business Owner' of specific information assets (for example the person or group that is ultimately responsible for an information asset) » be responsible for the creation and management of any information in their business unit » ensure that the Policy is appropriately implemented in their area and good information management behaviours are practiced
All staff	» adopt good information management practices by creating complete and accurate information assets wherever evidence of the conduct of business is required and storing them in compliant systems

3.3 Access and Release Schemes

Relationship to the Information Management Standard

Knowing the relevant access and release schemes (schemes) that apply to your agency will ensure it provides access to information where it is appropriate to do so or where authorised (Behaviour 5.7). This should be reflected in the Plan, policies and procedures.

Release of information outside of the schemes, wherever possible, is encouraged through proactive disclosure (Behaviour 5.8).

3.3.1 Access and releasing of information

Access and release of information can be done through a range of schemes, such as data sharing, FOI and legal discovery.

Such schemes can be used by:

- members of the public to access certain types of government information
- government agencies to share information with each other.

Each scheme has a different purpose and method of access / release. The schemes can be used to facilitate the flow of information within government (Data Sharing Act) or to the public (Government directives). They can also be legislative (FOI) or policy based (administrative release).

To develop the Program and Plan, all relevant schemes that are applicable to your agency need to be identified. This can be done as part of the business and regulatory analysis.

This will determine the access and release policies and procedures that may be needed (Behaviour 5.7). For example, the process to follow when dealing with an FOI application is mandated by the FOI Act, whereas the process for administrative release is determined internally by your agency.

Common requirements for accessing information

To provide responsible and open access to information to the public or other government agencies your agency needs to know:

- any privacy constraints attached to the information sought
- the systems (physical or digital) that are holding the information and any security classifications that have been applied
- any third-party property rights, such as copyright
- that the information is assessable and available for release.

Other considerations include how and when to release the information and in what format.

The applicable schemes for your agency are determined by its regulatory and operational environment. Some of the more common access and release schemes are listed below.

3.3.2 Relevant access schemes

Open data

Open data is the release and re-use of non-sensitive public sector data to the public. Government data sets are made freely available online. It is important when your agency is releasing open data it uses established and existing definitions of information where possible (Behaviour 4.4), refer to Data SA.

Under the *Government's Open Data Framework* state government agencies can publish open data proactively or on request from another government agency.

For further information, refer to the *Open Data Toolkit* and *Open Data Process Guide*, available from the Department of the Premier and Cabinet's website.

Government directives release of information – applicable to State Government Agencies

There are several government policies that require state government agencies to proactively disclose information to the public by online publication. Examples include the following Department of the Premier and Cabinet Circulars:

- PC035 *Proactive Disclosure of Regularly Requested Information*: agencies are required to release information that relates to various aspects of government expenditure, unless claimed exempt under FOI
- PC045 *Disclosure Logs for Non-personal Information Released through Freedom of Information*: agencies are required to make non-personal information and documents available that have already been released under FOI
- PC031 *Disclosure of Cabinet Documents 10 Years or Older*: allows a Cabinet document, over ten years but under 20, to be proactively disclosed to the public (subject to certain conditions).

3.3.3 Relevant release schemes

Administrative release

Administrative release of information can be done proactively, or in response to a request (Behaviour 5.8).

This is separate from information required to be released under legislation such as FOI, or for inspection as a public register, or other documents under agency-specific legislation. It does not include information specifically published for public dissemination such as publications.

To ensure consistency in decisions about, and processes for, the administrative release of information, a public access policy and / or procedure should be developed and published online by your agency.

For more information on administrative release refer to the State Records website.

Data Sharing Act

Under the Data Sharing Act, agencies can make information available to other public sector agencies or non-government organisations for specific purposes, subject to certain criteria and under specified protections (such as protocols around personal information). This is done through data sharing agreements which outline how both parties will fulfil the legislated trusted access principles.

The agency providing the information / data to another agency or organisation remains responsible for administering any other request by the public for that information.

Agencies can meet the requirements under the Data Sharing Act by implementing a comprehensive Program ensuring your agency has appropriate security and access controls in place.

Information Sharing Guidelines

The *Information Sharing Guidelines* provide the steps to be taken when sharing information relating to vulnerable people which might otherwise be subject to privacy restrictions.

Agencies that have interactions with vulnerable people (such as those dealing in human services) should have a procedure for staff which explains how to implement the *Information Sharing Guidelines*.

For more information on the *Information Sharing Guidelines* refer to the Department of the Premier and Cabinet's website.

Freedom of information

Under the FOI Act members of the public and Members of Parliament have a legally enforceable right to:

- be given access to government information, subject to any exemptions in Schedule 1 of the FOI Act
- amend their own personal information held by a government agency that is incorrect, incomplete, out of date or misleading.

The purpose of the FOI Act is to:

- promote openness in government and the accountability of Ministers of the Crown and other government agencies
- facilitate more effective participation by members of the public in the processes involved in the making and administration of laws and policies.

If your agency is subject to the FOI Act, having an up-to-date asset register will assist in the quick identification of information asset sources and locations that will need to be searched when progressing FOI applications.

All FOI applications must be:

- processed in accordance with the FOI Act by trained and designated Accredited FOI officers
- captured and managed within your agency's records management system. The original official record must be retained in the records management systems with copies of such documents, redacted where appropriate, provided to the FOI applicant.

FOI should be used as a last resort. Proactive disclosure or release through administrative schemes, where appropriate, is the preferred approach.

For more information on FOI refer to the State Records website.

3.3.4 Information sharing required by law

There are situations required by law where information must be shared irrespective of consent being given or not. For example mandatory notifications under the *Children and Young People (Safety) Act 2017* or disclosures in the interests of public safety under the *Correctional Service Act 1982*.

Legal discovery is another process which requires mandatory production of documents for inspection as evidence relevant to the case under scrutiny. This could be a civil litigation matter or a commission of inquiry.

3.3.5 Public access to archives

When permanent value information assets are transferred to the State Records Archive, the SR Act requires your agency to make a determination (in consultation with the Director of State Records) to indicate whether the information assets are:

- open to public access immediately
- initially to be 'closed' to public access for a specified period, and open once their sensitivity has diminished
- closed for public access indefinitely.

State Records provides access to records that have been transferred to the Archive and are deemed open under an authorised access determination.

Where a request for access to a 'closed' record is received, your agency can either provide the information through proactive disclosure, require the requestor to make a request under the FOI Act or can authorise State Records to provide access via its research centre. State Records will contact your agency if it considers that sensitive information from your agency in our custody is not adequately protected and might need a review of the access determination.

In making a determination to restrict public access to your agency's records in State Records custody, it's important to consider:

- the protection of personal information
- the continuing information security needs

- the ongoing commercial confidentiality
- legislative requirements.

State Records may impose additional restrictions based on the condition of fragile information assets. It is recommended that information assets of a non-personal and / or non-sensitive nature be open to public access on transfer to State Records.

3.4 Privacy Protection and Considerations

Relationship to the Information Management Standard

Personal information must only be collected, used, disclosed, stored and disposed of by your agency, in accordance with privacy principles (Behaviour 5.6).

Your agency's Plan, policies and procedures should clearly reflect how personal information collected and held by your agency will be managed.

3.4.1 Information privacy protection

Information privacy refers to how an individual's personal information (for example name, address, date of birth, health information etc.) is handled.

Your agency must ensure that personal information is stored, accessed and used in accordance with established general privacy principles (Behaviour 5.6) such as:

- being transparent - informing individuals why the personal information is being collected, such as if the collection is authorised or required by law and how the personal information will be used and disclosed, for example only for the purpose it was collected for, unless certain conditions are met (for example required for law enforcement purposes or authorised under law)
- data minimisation - only information that is required for the stated purpose will be collected
- security - ensuring appropriate security measures are in place to ensure the personal information is securely stored and managed according to its sensitivity
- accessibility - informing individuals how their personal information can be accessed
- correction - informing individuals how their personal information can be corrected if they believe it is incorrect, incomplete, out-of-date or misleading.

While the overarching policy varies for different sectors, the same principles will apply.

State government agencies must comply with the Information Privacy Principles Instruction (IPPI) which regulates the way they manage, collect, use and store personal information.

Agencies not bound by the IPPI should have their own privacy policy that describes the way they manage personal information.

3.4.2 Personal information privacy breaches

A privacy breach occurs when personal information that is not already publicly available, is lost or subjected to unauthorised access, use modification, disclosure or misuse.

A breach may have happened because of accidental loss, internal errors, deliberate actions, theft of hardcopy assets or the theft or misuse of electronic information.

Where a personal information privacy breach occurs, your agency must:

- take immediate action / actions to contain the breach
- identify any risks associated with the breach and mitigate where possible
- report the breach to the relevant authority (if relevant)
- notify relevant affected parties
- implement remedial action to address current breach as well as prevent further breaches occurring.

Staff should be advised of the process to be followed in the event of an information breach including potential investigation and disciplinary actions.

State government agencies must notify the Privacy Committee of South Australia of breaches relating to personal information as soon as possible after the breach has occurred. For more information refer to the State Records website at https://archives.sa.gov.au.

3.4.3 Assessing privacy requirements

Where a project is planned or a decision is made to go ahead with an initiative that involves the collection, use, disclosure or storage of personal information, a Privacy Impact Assessment (PIA) should be undertaken. A PIA is a systematic assessment that identifies the relevant privacy considerations and risks an initiative / project might have on the privacy of individuals and how those risks will be managed or eliminated. Importantly, a PIA should be undertaken in the initial stages of development of a project to have the best opportunity to mitigate privacy risks.

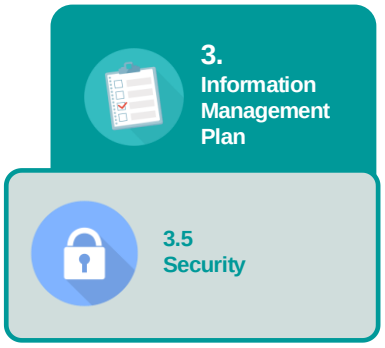
The purpose of completing a PIA is to identify and manage possible privacy risks or impacts and to understand how personal information flows in a particular project / initiative. For more information refer to the State Records website at https://archives.sa.gov.au.

3.4.4 Privacy requirements and proactive release of information

Section 3.3 outlines various schemes under which information can be accessed. In all cases, your agency needs to know what privacy requirements apply when releasing information under these schemes.

For example, when releasing information under the *Information Sharing Guidelines*, consent must be sought from the record holder unless to do so would result in harm to their or others safety and wellbeing. Further privacy requirements include ensuring that the personal information (in any format) is stored securely and when required to be shared it is done in a secure way.

3.5 Security Controls



Relationship to the Information Management Standard

To ensure information assets remain accessible and reliable, appropriate informational, physical and digital security controls need to be implemented. These controls include:

- implementing information security classifications for all information assets applicable to the sensitivity of that information (Behaviour 5.1)
- reviewing and amending access restrictions on information as sensitivity alters (Behaviour 5.2).

This will help ensure information assets are managed and stored appropriately and remain accessible for as long as required (Behaviour 2.6).

These controls should be reflected in the Plan and / or its information security policy. The Plan should also require all systems to be designed in accordance with relevant standards to ensure they support the effective management and disposal of information (Behaviour 2.5).

Relevant standards include the Minimum Recordkeeping Metadata Requirements Standard (Metadata Standard) and the Managing Records in Systems Standard (Systems Standard).

3.5.1 Security requirements

Your agency can use and implement several different controls to manage and monitor the security of its information assets.

Information assets must be protected according to the impact misuse of such information could have on your agency's business activities and functions.

Information Classification

Information classifications must be applied to information assets (Behaviour 5.1). This includes emails. A classification is determined based on the sensitivity of the information in question.

Systems need to be configured to automatically assign access and edit permissions to information assets based on their information classification. Refer to the Systems Standard for more information.

Your agency should also apply access restrictions or permissions to information assets. Access restrictions or permissions should be regularly reviewed and removed as soon as they no longer apply or once sensitivity changes (Behaviour 5.2). Systems should be configured to review access restrictions or permissions automatically as information classifications change.

Note: State Government agencies need to ensure they apply information classifications in accordance with the South Australian Protective Security Framework (SAPSF) policy *INFOSEC1: Protecting official information*.

In addition to applying information classifications to the information assets, all cyber security risks must be managed in accordance with the SAPSF when engaging third parties to access, store or otherwise handle information on behalf of the agency.

For further information on the SAPSF and how to apply the information classifications to the agency's information assets, refer to the Department of the Premier and Cabinet's website.

Physical security

Information assets (both hardcopy or digital) should be kept secure to protect from physical interference or damage (such as theft, corruption, changes to environmental conditions, tearing, vermin etc) and from unauthorised access (such as having appropriate security measures and controlled access to storage areas) (Behaviour 2.6). An indicative list of requirements is in Table 6 with examples of appropriate controls.

The type of storage facility depends on the information assets format and their physical and chemical properties, their required retention period and accessibility requirements.

Table 6: Requirements for physical security

Requirement for physical security	Examples of controls
Security arrangements for information stored onsite	» server rooms » storerooms for hardcopy information » fire protection facilities » key management » building security » vermin and climate (temperature, humidity, air quality and lighting) controls
Security arrangements for information in use onsite	» clean desk policy and practice » locked facilities for confidential or sensitive information (this includes access controls) » ensure hardcopy information cannot be seen in public-facing areas » ensure computer screens (containing corporate-only information) cannot be seen in public-facing areas

Requirement for physical security	Examples of controls
Security arrangements for information stored or taken offsite	» secure transport and handling » use only State Records ASP if using non-agency facilities » security is applied to offsite assets taking into account the different risks of working outside the agency's premises
Information transmission	» information assets and equipment are managed securely when taken out of the office for official purposes, including home-based work
Ownership and custody arrangements	» government information assets is not sold, abandoned or donated to external parties » government information assets is not used for unofficial purposes without authorisation » appropriate controls for transferring information assets to other government agencies in the event of structural change » transfer permanent information assets to State Records according to applicable retention and disposal schedules and access determinations
Retention and disposal	» non-current information assets are retained for the required periods according to applicable retention and disposal schedules » information assets are destroyed using an appropriate method to ensure they are not accessible » appropriate sanitising or destruction of obsolete or damaged media so they are no longer useable by sanitising or destroying the ICT media and equipment, for example full data erasure, crushing or disposal via an external specialist company

Digital security

There are additional controls that apply for information assets stored in a digital environment regarding the accessibility, sharing, storage and disposal of information.

Information assets should only be accessible to those with appropriate permission as defined by their information and security classification. Permission for users should be clearly defined and assigned in the systems used (refer to the Systems Standard), as well as align relevant security metadata to information assets (refer to Metadata Standard) (Behaviour 2.5).

When sharing digital information, staff should ensure they use:

» appropriate email controls for sending information to others (internally or externally), this includes:

    - applying the appropriate information classification according to the sensitivity of the information
    - using bcc, and not using 'reply all'
- secure applications or methods for sharing information externally, in particular over public network infrastructure
- encryption of sensitive material.

Digital information assets should be stored appropriately and securely (Behaviour 2.6). Having a robust ICT infrastructure ensures digital information assets remain secure and not subject to unauthorised access and use. This can be achieved through mechanisms such as having secure logins, user authentication, encryption, supervision or surveillance of data. Incident recovery and business continuity regimes can also be built into the ICT infrastructure management plan.

Incident recovery planning is an important element of your agency's Program. Measures can be put in place to ensure that information assets continue to be accessible, managed, available and shared in the event of, and after, an incident. It is one security measure that aims to protect information assets against loss or irreparable damage (including corruption) because of an incident.

When disposing of digital information assets, they need to be deleted using an appropriate method to ensure they are no longer accessible or capable of being recreated or reinstated. Disposal of any information assets must be done in accordance with the SR Act. Further, any equipment that stored the information assets must be destroyed using an appropriate method (such as sanitisation or physical destruction) to ensure they are no longer usable.

3.6 Disposal

Relationship to the Information Management Standard

Information can only be destroyed if it is no longer required and in accordance with the SR Act (Behaviour 2.7).

Your agency's chief executive or delegate is responsible for ensuring:

- no information of corporate value is destroyed unless in accordance with a current, approved disposal determination (Behaviour 5.5)
- that information is not sold, abandoned or donated to external parties which would result in it not having access to that information and without authorisation in the form of a disposal determination (Behaviour 5.9).

This includes identifying requirements for retaining information assets not covered by a disposal determination (such as General Disposal Schedules (GDS) or a current RDS) and seeking a disposal determination for these information assets if needed (generally through a RDS) (Behaviour 5.4).

To ensure information remains accessible for as long as required and is not destroyed without authorisation, the Plan needs to be underpinned by a proper disposal program and approved disposal determinations in accordance with the SR Act and the Disposal Standard.

3.6.1 Disposal

The Standard requires agencies to dispose of information assets in a timely manner once all business, legal and accountability requirements have been met (Behaviour 2.7).

Disposal is not simply destroying information assets, it is a range of processes associated with implementing records retention, destruction or transfer decisions [not including transfer to State Records or between agencies] which are documented in disposal determinations (*ISO 15489.1 Information and documentation - Records management, Part 1: Concepts and principles* (2017)).

Information assets must only be disposed of in accordance with the requirements set out in the SR Act and the Disposal Standard. The Disposal Standard provides a set of mandatory principles and requirements to adhere to when disposing of government information.

Disposal includes:

- destroying information assets
- abandoning information assets
- migrating information assets from one system or platform to another

- transferring ownership or possession of information assets to a private entity (known as Transfer of Ownership and Custody Schedule or TOCS)
- selling information assets.

Under the SR Act, disposal does not include transfer to State Records or to another government agency.

3.6.2 Disposal Program

A Disposal Program is a key element of your agency's overall Program. It should include:

- development of an agency specific RDS if your agency does not already have one (Behaviour 5.4)
- understanding of any other disposal schedules that might apply to your agency's information assets
- a Disposal Plan if your agency is dealing with a backlog of information to be retained or disposed of. Alternatively, a schedule for implementing regular (for example annual) retention and disposal action if such action has already been occurring. Transfer permanent information assets to State Records annually or twice a year, rather than small ad hoc transfers
- regular review of the currency of the disposal schedules applicable to your agency. This includes ensuring any current information assets are not subject to a disposal freeze. This assists in guaranteeing all information assets are covered by a disposal schedule
- procedures for applying one or more disposal schedules (for example sentencing of information assets)
- policy and guidance on Normal Administrative Practice
- application of one or more disposal schedules by skilled and experienced personnel (internal or contracted)
- processes for applying retention periods, including documentation of decisions and quality checking
- approval and documentation processes for the permanent retention and destruction of information assets
- documentation and transfer of temporary information assets to an appropriate internal storage / ASP until they are due for destruction
- documentation and transfer of permanent information assets to State Records when they meet the Transfer Standard (they are over 15 years old, no longer required for current administrative use by an agency and are openly accessible or only restricted for no more than 15 years after transfer, unless otherwise agreed)
- submission of documentation for State Records approval of information assets planned for destruction, followed by secure destruction.

To develop a Disposal Plan your agency will need to know what information assets exist, including those in business systems, and which are, or are not covered by a current disposal determination.

Destruction of hardcopy or digital information assets must be done securely. External specialist services are available for this. Disposal methods include pulping, burning, pulverisation, disintegration or shredding and need to be chosen according to information assets format and security classification.

3.6.3 Disposal determinations

There are various disposal determinations that can be used to enable compliant retention and destruction of your agency's information assets (Behaviour 5.5). These determinations apply to information in any format.

Disposal Schedules

General Disposal Schedules (GDS)

These are developed to cover information assets common to all agencies or councils, or to a specific sector. For example:

- GDS 30 – covers information common to all state government agencies. **Note:** GDS 30 cannot automatically be applied to temporary information assets more than 50 years old and previously unsentenced. For these information assets, a specific operational RDS (see below) will need to be developed in conjunction with State Records
- GDS 40 – covers all information assets common to local government agencies.

A GDS may also be issued to freeze disposal of any information assets relating to a specific subject. For example:

- GDS 32 – covers Records of Relevance to the Royal Commission into Institutional Responses to Child Sexual Abuse
- GDS 16 – covers Native Title Claims.

Records Disposal Schedules (RDS)

These are developed to cover information assets unique to your agency's core business which is not covered by a GDS.

An RDS can also be developed to cover a specific set of agency information assets. For example:

- to get approval to destroy administrative information assets created after 1900 and over 50 years old, which is not covered by a GDS
- damaged information assets that cannot be recovered.

Lost or misplaced information assets on loan from State Records must be formally reported to State Records, as this is a form of unauthorised disposal.

Transfer of Ownership and Custody Schedules (TOCS)

These schedules are developed to cover the transfer and ownership of agency information assets to a non-government agency. For example, a TOCS will be

required whenever an agency function is privatised, such as the sale of a government owned aged care facility to a private entity.

A TOCS applies to specific categories of information assets created and controlled by an agency which are affected by sale or an administrative change and are required by the private entity to carry out the functions and related activities that have been transferred. For example, a TOCS for personnel records will be required because of an administrative change where public sector staff are transferred to a private entity along with the former government held function.

A TOCS is not required for a lease or third-party provider contract.

The retention periods and classification of information assets in a TOCS mirror those included in GDS 30 (for state government agencies) and / or the agency's RDS. The TOCS prescribes, depending on the information assets in question, who is responsible for disposal and relevant retention periods.

Sentencing

Sentencing is the process of applying retention periods to digital or hardcopy information assets in an approved disposal schedule.

Sentencing usually involves:

- determining if the information asset has temporary value or is required to be retained permanently
- if temporary, identifying the earliest date when the information asset may be destroyed
- recording the date for destruction or requirement to retain the information asset permanently, and the RDS or GDS reference, on the information asset itself or in a recordkeeping system such as an EDRMS.

Note: All pre 1901 information assets are permanent due to their rarity.

In addition to ensuring the information assets are sentenced against a current approved disposal schedule/s, information assets should also be reviewed to ensure they are not:

- required for a longer retention following legislative changes
- subject to a disposal freeze
- required as evidence in legal proceedings
- required for ongoing business use (Behaviour 5.5).

Resentencing should occur when previously sentenced information assets become due for destruction or transfer to State Records; these information assets need to be reviewed to ensure the sentence applied is still current (for example, the GDS/RDS version and item number still applies).

It might also occur when a new disposal schedule is issued or an existing disposal schedule is reviewed / amended.

When a revised version of a disposal schedule is issued there will often be changes to existing retention periods. Some retention periods may be increased from temporary to permanent, while others may decrease. Also new classes may be added and / or class descriptions may change resulting in some classes being combined (or rolled up) into one class and other single classes may be split into multiple new classes. Resentencing will confirm the current disposal schedule and item number for the information asset and what retention period applies.

Normal Administrative Practice (NAP)

NAP applies to destruction of **non-official information assets**.

Under NAP your agency may routinely destroy information of a transitory or ephemeral nature where it is obvious that no information of continuing value to the agency will be lost.

An information asset will be of 'continuing value' if it is required for administrative, business, fiscal, legal, evidential or historic purposes.

For the destruction of **official information assets** refer disposal determinations.

The NAP Test

Before an information asset can be destroyed using NAP, the following test must be applied:

1. Does the information asset relate to the agency's work? For example is the information asset used to perform staff's duties, such as printouts used to verify or monitor data.

If the information asset **does not** relate to your agency's work, it can be destroyed under NAP as it is not an official information asset.

2. If the information asset does relate to your agency's work, does it:
    - form part of your agency's business
    - add value to an existing information asset
    - show how a transaction was dealt with
    - show how a decision was made
    - show when and where an event happened
    - indicate who was involved and what advice was given
    - require someone to action it
    - relate to a legal document or agreement?

If the answer is yes to any of the above questions, it **cannot** be destroyed under NAP as it is an official information asset.

If the answer to all of the above questions is no, the information asset can be destroyed under NAP.

Drafts and duplications

In addition to NAP, information asset that are not captured under the SR Act as an official information asset, such as drafts and duplications, can also be destroyed if it is identified that it will not become an official information asset in the future (refer to section 3 of the SR Act).

Drafts and duplications must not be destroyed if they contain significant decisions, discussions, reasons and actions or contain significant information that is not contained in the final version of the information asset.

Hybrid files

Hybrid files contain both digital and hardcopy information assets dealing with the same activity or function. Prior to the disposal of an information asset, it must first be established whether it is part of a hybrid file.

To efficiently dispose of hybrid files, both information asset need to be destroyed, preferably at the same time.

When transferring permanent information asset to State Records, State Records needs to be advised if the information assets form part of a hybrid file. Your agency must retain the electronic permanent information asset, adding such metadata as required to reflect the transfer of the hardcopy permanent records to State Records.

If transferring both the electronic and hardcopy temporary information asset to an ASP, your agency should ensure that the hybrid nature of the files is reflected in the description.

Sale, abandonment and donation of government information assets

Staff need to understand they are creating government information asset swhich have value not only to their agency but to the government, community and the State. This can be achieved by having policies clarify that information assets must not be sold, given away to external parties or taken home by staff without proper authorisation (Behaviour 5.9).

The sale or donation of information assets can only be authorised under the SR Act through a disposal determination approved by the State Records Council. A risk assessment should be undertaken prior to seeking authorisation which addresses legal, moral, cultural and operational risks to your agency. For example is the information asset of historical significance even if it is not of enduring value?

State Records should be contacted prior to entering negotiations to discuss the potential need for future access to the information assets by your agency and whether this needs to be included in the final agreement.

Information assets no longer required must not be misused or accessed inappropriately. Controls should be in place to prevent the abandonment of information assets. All information assets, including the devices on which are they are held, need to be securely, completely and lawfully destroyed once they are no longer required.

3.6.4 Other influences

Other situations or events might require information assets to be kept longer than the minimum retention periods. For example:

- legal matters – information is to be kept longer than the minimum periods where your agency is aware of actual, or likely, legal or statutory requests for access to information, such as: legal discovery for an impending legal matter, a subpoena, a Royal Commission Notice to Produce or as a result of new legislation or regulation
- FOI – where information is due for disposal but is subject to a current FOI application
- high risk – information should be kept longer where it is identified as being of significant risk
- machinery of government changes – information might need to be kept longer when functions, activities or processes change, within your agency or across government.

For digital information that must be kept long term or permanently, your agency is responsible for the information assets ongoing custody. Use long term preservation formats, official systems and well managed migration processes to ensure the information assets remains in a readily accessible format (which includes content, structure and context) for the prescribed retention periods.

3.6.5 Accessibility

Information assets must remain accessible and in good condition (if digital in a readable format) for as long as they are required. This includes when information assets need to be migrated from a physical to a digital format for preservation or conservation purposes, or digital information assets need to be migrated from one system, software or media to another due to upgrades or the system becoming obsolete (Behaviour 5.3).

For example, if an information asset covered by a GDS has a retention period of 100 years it must remain accessible over the entire 100 year period and be capable of being relied on as trusted and authentic evidence of your agency's decisions made and actions taken. This means it must be capable of being retrieved by your agency in a readable format.

3.7 Compliant Systems

Relationship to the Information Management Standard

All systems must be designed and implemented in accordance with relevant standards to ensure they support the effective management and disposal of its information (Behaviour 2.5). This should be reflected in the Plan.

Relevant standards include the Metadata Standard (Behaviours 4.2-4) and the Systems Standard (Behaviours 4.2, 4.5 and 5.3).

Having compliant systems will also help ensure the quality and authenticity of information assets (Behaviour 4.5) as well as ensuring that information assets are managed and stored appropriately and remain accessible for as long as required (Behaviour 2.6).

For the purposes of the Standard:

- quality refers to the integrity, reliability and accessibility of information assets to meet its identified information requirements
- integrity refers to information assets being intact, whole and uncorrupted
- reliability refers to information assets being trustworthy
- accessibility refers to information assets being available and locatable in a readable format
- authenticity refers to the information assets being of undisputed origin and genuine. Not a copy.

3.7.1 Characteristics of compliant systems

Compliant systems are format and technology neutral. Systems may be physical in nature (such as hardcopy filing systems) or digital (such as business information applications or dedicated EDRMS). The systems might be owned and managed by your agency or by others (such as in the cloud) but used by your agency.

Clear policies that outline each parties' responsibilities in relation to the management and use of your agency's information assets are required where systems are used that are outside the control of your agency.

Management of digital and hardcopy records

Information assets created digitally should be managed digitally. It does not need to be printed for filing or information management purposes.

Information assets created physically can generally be scanned and managed digitally unless:

- there are specific legal reasons to keep hardcopy information assets, such as property deeds
- operationally hardcopy information assets are routinely received and it is not possible or feasible to scan them
- existing systems do not have the required controls to manage digital images.

These digitised information assets do not hold the status of official information assets for the purposes of the SR Act. This means that until the digital information asset is deemed to be the official source information asset, your agency cannot dispose of the original hardcopy information assets.

For a digital copy to be recognised as an official information asset for the purposes of the SR Act, your agency must be able to certify it has complied with the conditions of GDS 21. Once certified, your agency can dispose of the hardcopy source information asset under GDS 21.

Where there is a legal, business or evidential need for keeping hybrid files, your agency must ensure that both the hardcopy and digital files are managed in the same manner. This means that both files should:

- be appropriately linked to one another with the link documented in your agency's information asset register
- be classified and sentenced the same
- have the same security classification applied
- be disposed of at the same time and documented accordingly.

Specifying system requirements

All business systems, including EDRMS', should, not only meet your agency's business requirements, but must ensure data quality and accessibility for as long as the information asset is required.

Business requirements usually identify the functions the systems should perform to support business objectives and operations. Technical (non-functional) requirements are also usually documented.

Business specific information management requirements are generally identified as part of your agency's value and risk analysis.

State Records has identified the **minimum** functional requirements that business systems must have regardless of the purpose of that system. These include:

- being able to store digital information assets required as evidence of business activity as a record
- ensuring information assets can be located and read
- being able to apply access permissions to information content and metadata
- ensuring information assets can only be deleted through an authorised process.

For a full list of the minimal functional requirements a system must have refer to the Systems Standard.

The System Standard is to be used / read in conjunction with the Metadata Standard as business systems need to hold the most up-to-date information while recording the relevant metadata to show the exact state of the data on which decisions were made at a particular point in time.

State Records endorses the use of the international *standard ISO 16175 Processes and Functional Requirements for Software for Managing Records* if your agency requires more detailed specifications than listed in the System Standard.

These documents can be provided to information system developers and project teams at the early stage of system development projects, or specific requirements from these documents can be added into business requirements documents.

Ensuring adequate controls

Compliant systems must have controls. Controls for information assets should include:

- creation (where this occurs inside the system), capture and classification
- access, retrieval and use (including security)
- storage and preservation, including preservation of legibility
- control of changes (such as version control and audit trails)
- retention and disposal.

Designating specific systems that are compliant as “official” information systems can be considered. These official systems can be taken to hold the true accurate record.

As these ‘official’ information systems are designated as the primary stores for agency information assets, it enables:

- design and implementation of consistent and understood controls (above) across systems
- an agency-wide strategy for implementing retention and disposal of information assets
- embedded staff routines of recording information and storing it in core systems.

For systems other than dedicated records systems (such as EDRMS’) processes can be implemented to provide the required controls. For example:

- define and implement business rules for information management processes
- configure the system to capture additional metadata where needed and / or enable metadata to be entered manually by a user
- design a process for applying retention and disposal requirements
- implement system security functions to prevent unauthorised access or modifications to any information, including metadata
- design system capability to ingest information and / or associated metadata from other business applications

- develop methods to migrate / export information and associated metadata, including security classifications, to another or a replacement business application
- develop and implement preservation and migration policies for information assets that requires long-term retention.

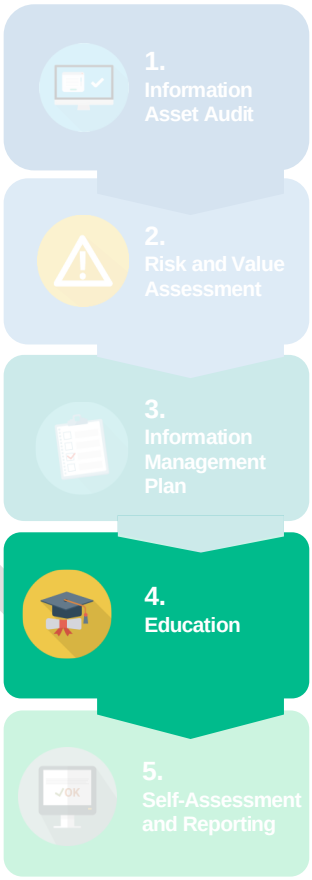
The above processes may also be applicable to some dedicated records systems too.

The technology itself should be fit-for-purpose, operate on a continuous and reliable basis and be protected by incident recovery and business continuity regimes.

3.7.2 Corrective action

When systems fail to perform for any reason, corrective action should be taken immediately. These might be as simple as configuring more automatic metadata capture to developing work-arounds (manual processes) for implementing retention and disposal actions, or restricting edit and delete permissions. They may also relate to increasing the education / training of staff in system use or good information management practice.

4. Education



Relationship to the Information Management Standard

Once the Plan has been developed, staff must be inducted and trained in the value of information and in their information management responsibilities and any relevant policies (Behaviour 1.4). All staff allocated to perform information management related functions must be appropriately skilled and have the capability to manage your agency's information management assets.

However, all staff must have a basic understanding of information management.

A large part of the success of your agency's Program relies on establishing the right culture and adherence to information management policies and procedures and awareness of their information management responsibilities (Behaviours 3.2 and 2.9).

Educating staff in the value of information and the management of information assets is key to fostering a culture of good information management (Behaviour 1.5).

4.1 Different messages for difference audiences

Before developing education or training tools, determine what information management messages your agency wants to convey, as these will differ depending on the audience. For example, the message to:

- executive and senior management might emphasise that good information management supports achievement of business goals and objectives and mitigates business risk. It might also indicate management's ultimate responsibility for compliant information management across the agency, as well as meeting regulatory requirements, all of which contribute towards the fostering of an organisational culture that values and manages information as an asset and supports business objectives and activities
- information technology professionals might focus on system and infrastructure reliability, security and acquisition of systems that are fit-for-purpose
- business owners might focus on their responsibilities for overseeing the implementation of the Policy in their area and ensuring good information management behaviours are practiced
- operational staff might focus on their individual and collective responsibility to create information arising from decisions and actions, managing it securely and storing it in the designated systems. To assist ensuring all staff have basic information management training, State Records has available an Introduction to Information Management online course.

Identify your agency's audiences, what their competencies are required and the key messages that need to be conveyed. Programs should be tailored appropriately

according to the competence of each audience. It will also depend on whether your agency is introducing something new (such as software) or reinforcing previous training.

Audiences will vary in size and the frequency of messaging might be different for each. This will affect the style and content of the education or training programs.

4.2 Education content and delivery options

The aim is to build and maintain organisational capability to achieve your agency's information management objectives and compliance requirements.

Education and training needs to communicate the relevant messages in the right way. This includes:

- what to communicate
- how to communicate
- when to communicate and how often
- with whom to communicate
- who should communicate it.

Education and training is critical for fostering a good information governance culture for the chief executive and senior management to promote and champion, creating awareness of the information management values that should be reflected in your agency's operational activities.

Table 10 is a summary of options for different types of information management education and training and the means of delivering it. Responsibilities for delivery will vary according to the roles that exist in your agency and its size and functions. Where the role 'Information Manager' is shown, in smaller agencies that task may be undertaken by another person or by an external specialist.

Table 10: Training and capability building in information management

Training	Audience	Delivery Mechanism
Induction	New staff, contractors and volunteers	» provided by the Information Manager as part of the existing induction program » content includes core principles and mandatory requirements » face-to-face briefing + one-page reference guide to resources available on your agency's intranet and / or » e-learning module (for example State Records Introduction to Information Management course), including a Q&A component and pass requirements

Training	Audience	Delivery Mechanism
General awareness	Management All staff, including contractors and volunteers	» key messages according to audience and your agency » delivered by the Information Manager » targeted brief sessions at staff meetings, 'pop up' briefings in lunchrooms or similar – five-minute messages » regular short messages or bulletins on your agency's intranet » easily accessible suite of guidance documents on the intranet, for example the Policy, procedures, FAQ's » provision of a central contact for Information Management advice and support
Tailored	Staff with specific information management responsibilities, such as system administrator	» externally commissioned program for System Administrators » structured training program for staff with different information management responsibilities and on-the-job training and / or mentoring, for example educate ICT staff about retention, disposal and system compliance requirements (metadata) » contracted training or engagement of external expertise including knowledge transfer as part of the contract
EDRMS	All staff, contractors and volunteers using the EDRMS	» initial comprehensive training on rollout » provided by: ○ external supplier of the system (where an external application is purchased) on a train-the-trainer basis ○ super-users for business unit training » other training and support provided by the Information Manager: ○ small classroom-style, hands-on training ○ quick (one-page) guides on specific, commonly used functions ○ one-on-one instruction for specific staff (such as senior managers) ○ simple user guidelines on the intranet, hyperlinked between topics ○ refresher – as needed » help desk for non-IT infrastructure queries and guidance on information management
Exit Interview	Separating staff (and contractors and volunteers where relevant)	» a standardised handover process for information management included as part of a staff exit procedure » staff member to provide overview of information used for their operations to the incoming incumbent or person conducting exit interview

4.3 Review and monitoring

Regularly review and update your agency's information management education and training. This will ensure staff knowledge and skills are updated or developed as information management responsibilities and the value of your agency's information assets change.

Refresher courses should be provided on a regular basis.

Maintaining the ongoing education of staff is important, both as part of ongoing business and because of any changes to your agency's information management requirements.

Staff adherence to education and training should be monitored and non-compliance addressed (Behaviour 2.9). Provide additional education and training as required.

5. Self-assessment and Reporting

Relationship to the Information Management Standard

The last element of your agency's Program is to assess and review how well its information management policies and practices support its business activities and functions (Behaviour 2.8) and complies with the Standard overall.

5.1 Self-assessment

The aims of self-assessment are to enable your agency to assess the maturity and capability of its Program and to identify gaps in complying with the behaviours mandated in the Standard.

This will:

- allow action to be taken where needed to address gaps and act on poor practice or where high value / high risk information asset is threatened
- sustain good practice
- allow continuous improvement to occur where the opportunity arises.

Your agency may choose to use the Self-Assessment Tool (Tool) as a first step in the review of an established Program to identify gaps for prioritisation. This tool will be used by State Records as a survey mechanism under the SR Act.

The Tool enables an assessment of your agency against the behaviours that underpin the five principles in the Standard. It is recommended the use of the Tool on an annual basis to assess the Program's compliance against the Standard and your agency's overall information management governance maturity and capability.

The Tool is an excel spreadsheet which comprises four components:

- instructions for use
- detailed Assessment
- capability Model
- assessment Priorities.

The Tool developed by State Records is available on the State Records website - https://archives.sa.gov.au/.

Refer to the Tool instructions for more information on its use.

5.2 Self-assessment methodology

The methodology behind the Tool offers a scalable, tiered approach to help identify areas of strength and weakness at each level of requirement and to develop and implement actions to address weaknesses, improve outcomes and progress to the next level.

The four levels of maturity and capability your agency can assess its current information management practices (maturity and capability) against are:

- absent (level 0)
- basic (level 1)
- operational (level 2)
- proactive (level 3).

To comply with the Standard, your agency must satisfy at least the level 2 (operational) for each behaviour (under the principles of the Standard), unless a valid reason can be demonstrated why maintaining a lower level is acceptable. For example due to agency operational or regulatory requirements or level of risk identified.

Regardless of size, the Tool can be used by all, and can be applied to:

- a whole agency
- one or more business units
- one or more business processes
- all information formats, or one or more information assets such as hardcopy information assets or the content of business systems.

Improvement priorities may be determined based on the level of risk to a particular business area and the information assets supporting that area.

5.4 Outcomes of the Self-assessment Tool

Both the Capability Model and Assessment Priorities can be used by your agency's chief executive and senior management team to depict a high-level overview of the gaps in your agency's Program. The higher maturity and capability levels (level 2 - Operational and level 3 - Proactive) in the Detailed Assessment can also be used to help identify future actions required to improve your agency's compliance against individual behaviours.

The chief executive and senior management team can use the identified areas for improvement from the Capability Model report to feed back into their Program and Plan, improving their overall compliance with the Standard and their information management maturity and capability.

Need further assistance?

Contact
Tel (+61 8) 8204 8791
Email StateRecords@sa.gov.au
Web www.archives.sa.gov.au

Date approved	Approved by	Date for review	Version
DDMMYYYY	Director, State Records of South Australia	DDMMYYYY	Draft / Final

Appendix A

Information Management Standard

STATE RECORDS
of South Australia

Government of South Australia
State Records

Information Management Standard

Introduction

The appropriate management and control of information and data is crucial for the effective delivery of government functions and services. Good information and data management practices are the basis of good government; supporting evidence-based decision making, the development of policy and accountability.

Effective management of information and data supports innovation and the transformation of service delivery, enabling communities and individuals from across South Australia to transact with government and stay informed of government decisions.

Purpose

The Information Management Standard establishes the principles and behaviours expected of agencies in managing government information and data (referred to as *information assets*) to achieve their own business objectives and to meet requirements under their legislative and policy obligations.

The Standard is consistent with the concepts of International Standard ISO15489 (2017).

Authority

This Standard is issued under section 14(1) of the *State Records Act 1997*.

State Government agencies must manage their information assets in accordance with the requirements set out in this standard.

Definition

For the purposes of this Standard *information assets* refer to information, data and records, in any format, where it is created or received through the conduct of government business.

Principles

The management of government information assets is based on five principles:

1. The value of information is known
2. Information assets are created and managed appropriate to risk
3. Ownership of information assets is assigned
4. Information assets can be relied upon
5. Information assets are available as required

Behaviours

Each principle is underpinned by a set of behaviours that agencies must demonstrate in order to ensure their information management practices align with government expectations.

The *Information Governance Guideline* and the *Self-Assessment Tool* have been developed to support agencies in achieving these behaviours.

Principle 1: The value of information is known

Information is treated as an asset of the agency; its value, both current and future, is determined, understood and leveraged to improve business outcomes.

Behaviours

Agencies must:

1.1 identify and document what their information assets are, where they are stored and who is responsible for their management;

1.2 understand and document how their information assets support their business objectives and operations or their compliance obligations;

1.3 ensure information assets are linked to business functions and activities;

1.4 induct and train staff in the value of information and in their information management responsibilities; and

1.5 foster an organisational culture that values and manages information as an asset and supports business objectives and activities.

Principle 2: Information assets are created and managed appropriate to risk

Agencies understand what information needs to be created and kept to support business objectives, meet compliance obligations and mitigate risk.

Behaviours

Agencies must:

2.1 analyse and document what information assets must be created and managed across the agency applicable to the regulatory environment in which they operate;

2.2 develop and issue policies and procedures outlining how information assets will be managed;

2.3 assess the risks of not creating or managing information assets where there is a legal, evidential, or business need;

2.4 manage information assets digitally unless there are specific reasons for keeping hardcopy records;

2.5 design and implement systems according to relevant standards so that they support the effective management and disposal of information assets;

2.6 manage and store information assets appropriately, to ensure it remains accessible for as long as required;

2.7 only destroy information assets when no longer required, and in accordance with current, approved disposal determinations issued by State Records; and

2.8 review and audit how well their information management policies and practices support their business;

2.9 monitor, report and improve staff adherence to internal information management policies.

Principle 3: Ownership of information assets is assigned

Responsibility for the governance of information assets is assigned appropriately in order to ensure information assets are managed for the best outcomes of the agency, its customers and broader community.

Behaviours

Agencies must:

3.1 ensure ownership of information assets are assigned;

3.2 ensure that owners are aware of their responsibilities and accountabilities for managing the information assets;

3.3 ensure responsibilities for information management are delegated appropriately, in writing;

3.4 ensure that roles and responsibilities relating to the ownership and management of information assets are clearly defined in policy or other internal documents;

3.5 ensure that ownership and accountability for information assets is managed consistently through a governance structure; and

Principle 4: Information assets can be relied upon

Policies, practices and systems are implemented that ensure information assets can be relied upon as trusted and authentic evidence of decisions made and actions taken.

Behaviours

Agencies must:

4.1 create and keep full and accurate records, appropriate to their business processes, regulatory environment and risk and accountability requirements;

4.2 ensure information assets are saved into systems that meet relevant standards in a timely manner;

4.3 record relevant details (metadata) in systems so that the business context of information can be readily understood;

4.4 use established and existing definitions for information assets where possible, so that there is consistency across the agency; and

4.5 implement practices and systems that ensure the quality and authenticity of information assets.

Principle 5: Information assets are available as required

Information assets are accessible for as long as needed and is shared appropriately (subject to access, security, and privacy rules) within a protected and trusted environment.

Behaviours

Agencies must:

5.1 implement information security classifications and requirements that are applicable to the sensitivity of the information;

5.2 review access restrictions on information and amend as sensitivity alters;

5.3 migrate digital information as systems, software and media are upgraded or become obsolete to ensure it remains accessible for as long as it is required;

5.4 identify requirements for retaining information assets not covered by general disposal schedules, and seek a disposal determination for these information assets;

5.5 ensure that no information asset is destroyed unless in accordance with current, approved disposal determinations;

5.6 collect, use, disclose, store, and dispose of personal information in accordance with privacy principles;

5.7 share information across government as appropriate or where authorised;

5.8 proactively publish information in line with government policy; and

5.9 not sell, abandon or donate information assets to external parties where such action would result in the agency not having access to that information and without authorisation in the form of a disposal determination.

Resourcing

Sufficient allocation of resources, including budget, infrastructure and staff, is a vital component of an agency's information management program. Staff allocated to perform information management related functions must be appropriately skilled and have the capability to manage their agencies information assets in accordance with this Standard.

Planning

Like any organisational asset it is important that the management of an agency's information assets are considered and planned at an agency-wide level. An information management plan is a core element of an agency's information management program and should be developed to support the agency's broader strategic and corporate goals and objectives.

The information management plan provides practical direction and must be consistent with legislative and business requirements, and should be supported by a broader governance model (Information Management Program) incorporating policies, procedures, education and technology.

Progress against the plan should be regularly assessed and reported on.

Prescribed Governance Model for Information Assets

Refer to the Information Governance Guideline and the Self-Assessment Tool for more information on the prescribed governance model.

Version Control

Date approved	Approved by	Date for review	Version
18 June 2019	Attorney-General, SA	31 Dec 2021	1.1
28 June 2021	Director, State Records of SA	31 Dec 2023	1.2
XX XXX 2022	Director, State Records of SA	31 Dec 2023	1.3

Need further assistance?

State Records
Tel (+61 8) 8204 8791
Email staterecords@sa.gov.au
Web www.archives.sa.gov.au