

Office of the Chief Information Officer

Private Bag X 1314
Alice 5700
South Africa

Tel: 043 704 7291
Fax: 086 625 7364
Cell: 083 407 7937

Email: cjohl@ufh.ac.za

Date: Wednesday, January 13, 2016

Ref: INFORMATION MANAGEMENT POLICY



University of Fort Hare
Information Management Policy

Policy number	ICT-016			
Policy Version Number	Version 1.0			
Policy originator / owner	Information, Communications and Technology			
	Date	Minute ref	Name	Signature
Approved by EMT				
Approved by Senate				
Approved by JBF				
Approved by Council				
Next review date				

**Records and Information
Management Policy**

Chief Information Officer



Index

1	Management Summary	3
2	Purpose	4
3	Introduction	4
4	Scope	4
5	Background.....	4
6	Definitions	5
7	Electronic and Non-electronic Documents/Records	5
8	Information Management Principles.....	5
9	Information Management Guidelines	7
10	Roles and Responsibilities: EDMS	7
11	Roles and Responsibilities: Access to information and Data Protection	8
12	Related Documents, Policies & Procedures.....	10
13	Publication Scheme of automatically available Information in terms of the PAIA act 2 of 2000	10
14	Policy Objectives	11
15	Records and Information Management Policy Review	12
1	This Annex describes more specific guidelines governing the management of information within the UFH. These underpin the eight information management principles stated in the main document. The Annexure is structured under the following headings:.....	17
2	Creation and Capture/Receipt of Information	17
3	Storage and Retrieval of Information	18
4	Retention & Disposal of Information	18
5	Compliance with Statutory and Regulatory Requirements.....	20

1 Management Summary

- 1.1 This document replaces all University of Fort Hare (UFH) Records and Information Management Policies that may exist. The policy is required in light of legislation and is an institutional requirement identified in the Strategic planning process. One of the requirements of the Strategic Plan 2009 to 2014 is to “develop a Corporate Information Policy”.
- 1.2 The document outlines the scope of Records Management and provides eight key principles to ensure that staff:
 - 1.2.1 Treat UFH Information as an Institutional Resource
 - 1.2.2 Make the information they create or capture accessible to those within the UFH who need it to fulfil their duties
 - 1.2.3 Manage all information in a consistent manner across the UFH
 - 1.2.4 Record details of key business activities undertaken on behalf of the UFH
 - 1.2.5 Ensure that UFH information is accurate and fit for purpose
 - 1.2.6 Retain or dispose of information in accordance with legislative requirements and UFH procedure/policy
 - 1.2.7 Take personal responsibility for the effective management of UFH information
 - 1.2.8 Comply with all Statutory and Regulatory requirements.
- 1.3 This document also describes the roles and responsibilities of the different types of users of the Electronic Document Management System (EDMS) and provides more detailed guidelines for Information Management within the UFH. The key responsibilities of the main roles can be summarised as follows:

Role	Responsible for:
End User:	Creation, capture, storage, dissemination and retrieval of information.
Record Manager:	Providing records management for the UFH including responsibility for the Corporate File Plan and Electronic Document and Records Management System. Also co-ordinating high level searches for Data Protection and Freedom of Information requests.
Reviewer:	Review and decide if appropriate disposal of UFH records should be actioned (record managers would undertake the actual destruction). Allocation of retention / disposal schedules and conducting security and sensitivity review of UFH records before public release.
Systems Administrator: Deputy Information Officer	Systems configuration and management. Deals with Access to Information and Data requests at Directorate / Establishment level.

2 Purpose

- 2.1 This document provides an information management policy for the recorded information.

3 Introduction

- 3.1 The University of Fort Hare (UFH) is dependent on its records to operate efficiently and account for its actions. This policy document assigns specific responsibilities for its implementation and defines a structure for UFH to ensure adequate records are maintained, managed and controlled effectively and at best value, commensurate with legal, operational and information needs of UFH.
- 3.2 Records Management is an Institutional function responsible for the systematic and comprehensive control of the creation, capture, maintenance, filing, use and disposition of records. ***It embraces all records regardless of their storage medium.***
- 3.3 All members of staff are responsible for ensuring that they practice good records management in their daily functions.
- 3.4 The UFH Records Manager will develop and implement, with the help of appropriate staff and resources, a training programme for all members of staff to understand and use the methods for managing information, which are developed as part of this Policy.
- 3.5 Key compliance drivers for records management activity within UFH are the Access to Information Act 2 of 2000, Regulation of Interception of Communications and Provision of communication related Information Amendment Act, Act 48 of 2008 as well as the Electronic Commerce and Transactions Act, Act 25 of 2002, and any other relevant legislation that may require compliance.
- 3.6 Effective management of information is essential to improve the efficiency and effectiveness of the UFH. The right people must have access to the right information when they need it. An Electronic Document Management System (funded by the Department of education was introduced in December 2008 and was designed to achieve this goal.) The full benefits have not been realised to date however and a number of steps are being taken to rectify this. The first, and arguably most important, is the creation of a specific EDMS policy.

4 Scope

- 4.1 This Policy covers all recorded information, whatever it's medium, e.g. electronic or paper. It also covers information which originates either from within the UFH or from outside.
- 4.2 It excludes information such as telephone conversations, meetings or physical objects unless these or references to them are recorded as documents.
- 4.3 This Policy covers information held in discrete computer applications and databases.

5 Background

- 5.1 The development of this Policy has been informed by the Acts of Parliament of the Republic of South Africa as listed in 3.5 above as well as:
- 5.1.1 International Standard on Records Management (ISO 15489).

6 Definitions

6.1 Certain words in this Policy have specific meanings and these are explained in the Glossary. Two terms are however fundamental to this policy and are defined as follows:

6.2 ***Document***

6.2.1 A "document" can be defined as: "recorded information that can be treated as a unit (e.g. on paper, a computer drive etc.)" The term also covers information in what might seem non documentary formats e.g. computer applications and databases. (ISO 15489-1)

6.3 **Record**

6.3.1 A "record" can be defined as: "information created, received, and maintained as evidence and information by an organization or person, in pursuance of legal obligations or in the transaction of business" (ISO 15489-1)

6.3.2 A record can either be created in the UFH or outside. It may be created to fulfil a legal requirement and may be required as legal evidence or to satisfy public accountability.

7 Electronic and Non-electronic Documents/Records

7.1 There is an important distinction between electronic and non-electronic documents and records as they may be processed in different ways and by different people. However, ultimately all UFH information should be managed using the Electronic Document Management System. Clearly, retrospective management of some paper documents using the EDMS will only be completed as required. All new documents will be managed using the EDMS and will normally be held in electronic format. Hard copy documents necessarily retained in that format will still be managed using EDMS.

8 Information Management Principles

8.1 The success of the UFH depends on effective use of its information. It will therefore adopt the following eight information management principles.

8.2 The primary one is:

Principle 1. UFH Information is a Corporate Resource. All Information (including e-mail) belongs to the UFH and not to any individual or group.

8.3 Therefore, information needs to be:

Available:

Principle 2. Staff will limit colleagues' access to information they create or capture only if its sensitivity requires such limitation.

Principle 3. Staff will manage information consistently, including the use of approved file structures (specifically the Electronic Document Management System (EDMS)).

Appropriate:

Principle 4. Staff will record details of appropriate Business Activities.

Principle 5. Staff will ensure that information is accurate and fit for purpose.

Principle 6. Staff will retain or dispose of information appropriately.

Accountable:

Principle 7. Staff will accept responsibility for the information they personally manage. Every member of staff is personally responsible for the effective management of the information they create, capture or use.

Principle 8. Staff will manage information in compliance with Statutory and Regulatory Requirements. In managing information, staff will comply with the relevant statutory, regulatory and protective marking requirements – including the requirement not to destroy information where there is a legal obligation to retain it.

-
- 8.4 The UFH has the responsibility to train staff so that they can follow these principles. Training and development will be led by the Records and Information Management Team.

9 Information Management Guidelines

9.1 All staff are obliged to create accurate records of their activities and to manage and maintain such documentation within the Electronic Document Management System. Heads of Departments and Line Managers must ensure that staff complies fully with the records management guidelines set down in this Policy. Record management must be included where possible as a Key Output Area on staff Performance Report Forms and also in Departmental Plans. Specific guidelines for managing information are provided in Annex B. These underpin the eight information management principles and are structured under the following headings:

- 9.1.1 Creation and Capture / Receipt of Information
- 9.1.2 Storage and Retrieval of Information
- 9.1.3 Dissemination of Information
- 9.1.4 Retention and Disposal of Information
- 9.1.5 Compliance with Statutory and Regulatory Requirements

10 Roles and Responsibilities: EDMS

10.1 The following roles are needed to manage information using the Electronic Document Management System:

- 10.1.1 End User;
- 10.1.2 Super User;
- 10.1.3 Record Manager;
- 10.1.4 Reviewer; and
- 10.1.5 Systems Administrator.

10.2 The responsibilities for each of these roles are as follows.

- 10.2.1 Users and Super Users
- 10.2.2 End Users are responsible for all processing of information within their areas of work. They have an obligation under legislation to declare records that demonstrate actions taken by them on behalf of the UFH. Paramount in this role is the correct use of the EDMS, i.e. all documents as previously defined must be filed within the classification structure in EDMS. Circumventing the EDMS classification scheme by inappropriately using personal storage areas or e-mail archives cannot be allowed.
- 10.2.3 Super Users have delegated authority to manage information within their areas to ensure consistency. Specifically, they are responsible for the creation of containers in EDMS and ensuring that staff within their areas are aware of and adhere to this and other subsidiary policies. Users receive their delegated authority through record managers and will receive appropriate training, including refresher training where necessary. It is the responsibility of Heads of Department to ensure the appointment and replacement of Super Users where necessary.
- 10.2.4 Super Users will assist colleagues by identifying the most appropriate containers for storing documents in the Institutional File Plan. Where necessary they will be responsible for opening new containers at the 3 lower levels of the Corporate File. Super Users will be responsible for setting security access permissions on new folders they create. They will be responsible for updating the staff list of their particular user group.
- 10.2.5 Super Users will also be responsible for identifying training needs in their business areas relating to the EDMS.

10.3 Record Managers

- 10.3.1 Record managers are responsible for maintaining the Electronic Document Management System. They will assist with the development of the system across the UFH. They will have an audit function to ensure the correct use of EDMS by staff and management and will have the authority to take appropriate measures where evidence of poor records management is found.
- 10.3.2 Record managers are also responsible for mapping retention/disposal schedules to EDMS once approved by THE RECORDS AND ARCHIVES MANAGEMENT COMMITTEE. They will be responsible for the archiving and disposal of records in accordance with these schedules.
- 10.3.3 Record managers are also responsible for Access to information and Data Protection and will, where necessary, conduct searches for information in order to fulfil their statutory duties.
- 10.3.4 The Chief Information Officer will be responsible for the activities of record managers and will ensure that they are appropriately trained in order to carry out these and other functions.
- 10.3.5 Record managers receive their delegated authority through the UFH Chief Information Officer.

10.4 Reviewers

- 10.4.1 Reviewers are responsible for reviewing records and recommending an appropriate means of disposal, in accordance with disposal schedules. They also advise what needs to be withheld from release, for security and sensitivity reasons via appropriate consultation.
- 10.4.2 Reviewers receive their delegated authority through the UFH Chief Information Officer.

10.5 System Administrators

- 10.5.1 System administrators are responsible for the creation of new user roles on the EDMS, system configuration, and system management including, disaster recovery. Systems administrators will also be responsible for carrying out various systems functionality tasks. These will include conducting statistical analysis and producing audit reports either as part of the management of the technical infrastructure or at the request of senior record managers or security officials.

10.6 Records and Information Management

- 10.6.1 Responsibility for the day to day Information Governance function within the organisation will be the responsibility of the Deputy Information Officers.
- 10.6.2 Responsibilities will include:
 - 10.6.2.1 Guidance and training on Records Management & Information Management issues;
 - 10.6.2.2 Develop policies and procedures relevant to this area;
 - 10.6.2.3 Manage the Access to Information Desk which will oversee and Quality Assure the processing and reply to all requests for information;
 - 10.6.2.4 Disposal Schedule Design & Maintenance;
 - 10.6.2.5 Responsible for the Corporate File Plan and EDMS system;
 - 10.6.2.6 Preparation of Monitoring returns to the Human Rights Commission;
 - 10.6.2.7 Dealing with the Information Commissioner

11 Roles and Responsibilities: Access to information and Data Protection

- 11.1 The following roles are needed to enable the UFH to meet its legislative obligations under the Access to Information Act 2 of 2000, the Data Protection Act (POPI)

11.2 Chief Information Officer

11.2.1 This person will be responsible for the Information Governance function at board level and will have strategic ownership of the Information Governance function within UFH.

11.3 Internal Review Panel

11.3.1 Where applicants, under access to information legislation, are discontent with the response to a request for information from UFH they shall have the right to request a review of the decision. These reviews will be heard internally in the first instance, although, ultimately, the applicant has the right to seek redress from the Information Commissioner.

11.4 Deputy Information Officers (DIO's)

11.4.1 Deputy Information Officers will be appointed in all areas where there is a need to deal with information requests.

11.4.2 An Establishment or Directorate may have more than 1 DIO's. It is the duty of the Information Officer (Vice Chancellor) to appoint and replace these officers as necessary on an on-going basis.

11.4.3 Peromnez Grade 7 should be the minimum level for this position (Managers). The persons chosen to fulfil this role will require extensive training and this should be to a standard agreed with the Chief Information Officer.

11.4.4 Duties will include:

11.4.4.1 Registering all requests for information applications centrally

11.4.4.2 Finding all information relating to the subject of the request

11.4.4.3 Collating that information

11.4.4.4 Determining what information cannot be released (this is determined by the application of exemptions specified under the relevant Act as appropriate)

11.4.4.5 Redacting (removing) that exempt information from copies of the documentation

11.5 Registry Function

11.5.1 The registry function provides the cornerstone for Records Management activity within UFH. All necessary hardcopy files created by staff within UFH should be registered with Registry. They should be given a unique identifier and descriptive reference to facilitate ease of reference and retrieval.

11.5.2 Once the EDMS is in place no new paper files should be opened and those already in existence must be closed down and an electronic continuation file opened in EDMS. There may be exceptional cases in which paper files need to be opened. Where this occurs, they should be given a descriptive reference and unique identifier that matches the reference of the documents within the Corporate File Plan. The paper files will then be regarded as duplicate records with the electronic counterpart being the records to which disposal schedules will apply and will be the records that THE RECORDS AND ARCHIVES MANAGEMENT COMMITTEE will review in respect of possible historical value. When that transition has been made paper records (duplicate records) can be destroyed when they are deemed to have no further administrative use. They need no longer be made available to THE RECORDS AND ARCHIVES MANAGEMENT COMMITTEE for inspection.

11.6 EDMS Functionality

11.6.1 The main functionality associated with each of these roles in relation to the EDMS is shown in Annexure C. This is not intended to be definitive or complete and will evolve as the EDMS develops to meet UFH needs.

12 Related Documents, Policies & Procedures

12.1 Disposal Schedules

12.1.1 A disposal schedule is a list of series or collections of records for which predetermined periods of retention have been agreed between the relevant operational manager and the Chief Information Officer.

12.1.2 The disposal schedules which have been developed by the Records and Information Management Team and approved by THE RECORDS AND ARCHIVES MANAGEMENT COMMITTEE are to be considered part of this policy document but will be updated on an on-going basis to reflect changing business needs and changes in legislation.

12.1.3 Each business unit is responsible for ensuring that disposal schedules have been developed to cover all classes of information held or created, in whatever media, by that Department. The Records and Information Management Team will provide direction in this process. Schedules should be reviewed by the Department on a regular basis to ensure that they reflect ongoing business activity and details of required changes should be emailed to the Records and Information Management Team to be actioned.

12.1.4 A process of mapping the disposal schedules to the Corporate File Plan will be undertaken once approved and at that time the Disposal Schedules will be reformatted, where necessary, to reflect the structure of the Corporate File Plan.

12.2 Related Policies

12.2.1 All records management activity should occur in the context of, and be compliant with, any other relevant policy approved by the UFH Council or delegated authority (for example 'The UFH Internet and email usage policy' as published by the Information, Communications and Technology Department (ICT))

12.3 Procedures

12.3.1 Specific operating procedures have been developed for processing requests for Information and other records management issues. These procedures are drafted in terms of the applicable legislation.

13 Publication Scheme of automatically available Information in terms of the PAIA act 2 of 2000

13.1 Publication Schemes are a legal requirement for UFH under sections 11, 14 and 15 the Access to Information Act 2 of 2000.

13.2 A publication scheme is both a public commitment to make certain information available and a guide to how that information can be obtained.

13.3 Publication Schemes are essentially guides to the information that a public authority routinely publishes or intends to publish.

14 Policy Objectives

14.1 Quality

- 14.1.1 Records are complete and accurate and the information they contain is reliable and its authenticity can be guaranteed. Records will be held in the best possible format for the purpose which they are created and the length of time for which they will be retained. The creation and capture of metadata necessary to ensure the authenticity and the reliability of records, is incorporated into records keeping systems and procedures.
- 14.1.2 The Chief Information Officer should liaise with the Standards Audit Unit to develop and maintain standards appropriate to the area of records and information management.

14.2 Accountability

- 14.2.1 Records contain information that is necessary to support the business activities and the regulatory and evidential requirements for which they were created.

14.3 Security

- 14.3.1 Records will be secure in both the physical and electronic environment from unauthorised or inadvertent alteration, loss or erasure. Access and disclosure will be properly controlled and audit trails will track all use and changes.

14.4 Storage of records — cost

- 14.4.1 The storage of records is carried out as effectively and efficiently as possible i.e. related records should be collocated where possible to aid retrieval and stored in the most cost-effective manner possible.

14.5 Accessibility

- 14.5.1 Records are arranged and described in a manner which facilitates fast, accurate and comprehensive retrieval.
- 14.5.2 Records are accessible to those who require using them and are held in a medium that will be accessible over time.

14.6 Retention and Disposal

- 14.6.1 There are consistent and documented retention and disposal procedures to include permanent preservation of archival records. Copies of these schedules are available from your Local Information Manager.
- 14.6.2 It is a criminal offence under section 21 of the Access to information Act to alter or destroy information in response to a valid request for information.

14.7 Training

- 14.7.1 All staff are made aware of their record-keeping responsibilities through generic and specific training programmes and guidance.

14.8 Performance Measurement

- 14.8.1 The application of records management procedures are regularly monitored against agreed indicators by direction from the Chief Information Officer and action taken to improve standards as necessary.
- 14.8.2 Records Management, in accordance with this policy, is to be included as a Key Output Area for all Heads of Department /Heads of Functions.

15 Records and Information Management Policy Review

- 15.1 This policy will be reviewed at regular intervals (at least once every 3 years) by the Chief Information Officer to ensure that it conforms to current legislation and record keeping requirements. A formal paper either confirming that the policy is still valid or pointing out areas requiring amendment will be presented to the Chief Information Officer on completion of the review. Changes can also be put forward by the Senior Records & Information Manager for the approval of the Chief Information Officer on an ad-hoc basis.

Annexure A: Glossary of Terms

The following glossary is provided in order to clarify terms used in relation to EDMS or information management and that may have a meaning particular to the UFH.

AUDIT TRAIL	Data which allows the reconstruction of a previous activity, or which enables attributes of a change (such as date/time, operator) to be stored so that a sequence of events can be reconstructed in their correct chronological sequence.
BUSINESS AREA	For the purposes of this Policy, a Business Unit is defined as the lowest organisational unit level within the UFH with a unique and self contained strategic objective, e.g. normally a Department or division.
CLASS	A class is a subdivision of the overall classification scheme by which the electronic 'file plan' is organised. A class may be sub-divided into one or more lower level classes; and this relationship may be repeated down the hierarchy. A class does not itself contain records; it is an attribute against which a folder is classified.
CLASSIFICATION	A systematic identification of business activities (and thereby records) into categories according to logically structured conventions, methods and procedural rules represented in a classification scheme.
CLASSIFICATION SCHEME	A business classification scheme which is an organised structure within which electronic folders are placed. This along with the folders, which are classified against the scheme, make up the file plan.
CORPORATE FILE PLAN (CFP)	The full set of classes, and the folders which are allocated to them, together make up the Corporate File Plan. The CFP is a full representation of the business of the organisation, within a structure which is best suited to support the conduct of that business and meet record management needs. The CFP is managed using EDMS.
DATASET	The term used for the whole EDMS structure, i.e. content index, database, classification etc.
DECLARATION	The process of defining that a document's contents (and some of its metadata attributes) are frozen as it formally passes into corporate control and is thereby declared as a record.
DESTRUCTION DISPOSAL SCHEDULE	The process of eliminating records beyond any possible reconstruction. A set of instructions allocated to a folder to determine the length of time for that folder should be retained by the organisation for business purposes, and the eventual fate of the folder on completion of this period of time.
DOCUMENT	Information that is stored as a single entity on some medium (e.g. on paper, a computer drive etc.)
EDMS	Electronic Document and Records Management System.
EXPORT	The process of passing copies of a record or group of records with their metadata from one system to another system, either within the organisation or elsewhere. Export (rather than transfer) does not necessarily mean removing them from the first system.
EXTRACT/REDACTION	This is a copy of a record, from which some material has been removed or permanently masked. An extract is made when the full record cannot be released to a requestor, for example under access to information, but part of the record can. An extract of a whole record is made by removing the parts that can be released from the whole. Redaction is the opposite of extraction in that a copy of the whole record/folder is released with the excluded parts redacted or removed.

FOLDER	<p>Folders are created only at the lowest level class in any single part of the classification scheme. They can usually be one of four types; i) a folder which is a container for other folders; ii) a folder which only contains electronic documents; iii) a physical folder which only contains physical paper documents; or iv) a folder which contains both electronic documents and references to physical paper documents, commonly known as a hybrid folder. An electronic folder is a (virtual) container for records (which may be segmented by part). Folders are allocated to a class. A folder is the primary unit of management, and is constituted of metadata. Some of this metadata may be inherited from the class to which the folder belongs; and some may be inherited by the records which the folder itself contains. Where this term is used in isolation, it refers to both electronic folders and paper folders (as the latter are represented in the system). Otherwise, it is used only when qualified, e.g. electronic folder, physical folder to refer to that specific type of folder.</p> <p>HYBRID FOLDER A set of related electronic and non-electronic records, some stored in an electronic folder within the system and some in a non-electronic folder (typically, a physical folder) outside the system. A hybrid folder may have several hybrid parts. Both electronic and non-electronic elements of the hybrid folder must be managed as one.</p>
INFORMATION	<p>Knowledge of some fact, opinion, advice, instruction or occurrence, which is communicated and relates directly or indirectly to the functions of the UFH.</p> <p>NOTE: In this Policy the word "information" relates to the term "recorded information" i.e. documentary information.</p>
INFORMATION TYPE	<p>(also relates to RECORD TYPE) All electronic documents and records must be of an Information Type. The Information Types provide a definition for document or record objects which specifies particular metadata attributes and particular forms of behaviour those documents/records have. A default information type is the norm; specific information types are deviations from the norm. (A Record Type is a subset of its corresponding Information Type and defines additional metadata attributes that are required to support a record's integrity).</p>
INHERITANCE	<p>Principle by which an object can take on a metadata attribute of its parent' entity, either by Inheritance on creation where the subordinate (or 'child') object takes the value of that attribute when it is created; or by Retrospective inheritance where either the attribute of the parent object is changed or the parent object is altered (e.g. by moving a folder in the file plan so that it has a new parent object).</p>
MARKER	<p>Metadata which describes attributes of a record which is stored externally to the system (for example, large paper documents such as building plans, a database held outside the EDMS system, a record on a CDROM).</p>
METADATA	<p>Additional data about a record or document within the EDMS system that is linked to that document, record or other object. (literally – Data about Data)</p>
MIGRATION	<p>The process of moving records from one technological platform to another, to refresh software or media formats, while maintaining their authenticity, integrity, reliability and usability.</p>
OCR	<p>Optical Character Recognition. The process by which any readable text on a scanned image is recognised. This results in an image and text version of a scanned image. Often EDMS systems store these separately but allow searching to return the image using the OCR text. Another</p>

	<p>alternative used by some EDMS systems is to store the image as a text-on-image PDF file.</p>
PART	<p>A part is a segment of a folder; it has no existence independent of the folder. A folder will always contain at least one part which, until and unless a second part is created, is co-extensive with the whole folder. The concept of parts allows the contents of folders which would otherwise be closed to be disposed of in a regular and orderly manner.</p>
PDF	<p>Portable Data Format is a de-facto industry standard for electronic documents and is designed as "electronic paper" for platform and application independent electronic record access and usage.</p>
PERMANENT PRESERVATION	<p>The process by which records are preserved in perpetuity in a public record office, in an accessible and reliable form and which maintains them as authentic records, reflecting their business context and use.</p>
PHYSICAL PAPER FILE	<p>A paper file which exists in a filing cabinet or other storage system in an office environment. An EDMS system commonly holds a representation of these as a special type of folder which allows management of their location and properties.</p>
POINTER	<p>Method of controlling instances of electronic records classified against more than one folder, without physical duplication of the document. More than one pointer can be created within the file plan to reference a single database object, but each must be logically managed as though separate records for disposal.</p>
PROTECTIVE MARKING	<p>Designations applied to a record to show the degree of security that it should be afforded. One of several words and/or phrases taken from controlled lists, which indicate the access controls applicable to a record.</p>
RECORD	<p>A document which provides evidence of a business transaction or contains information needed to carry on UFH business. A 'Record' can either be created by or received into the UFH. A record may have been created to comply with a legal requirement and UFH records may be required to be produced as evidence in legal proceedings or to satisfy public accountability or parliamentary scrutiny. [A record is a document or other object with a primary value – the purpose for which it was created or captured. It may also have secondary value over time (for example required for a public inquiry or retained for permanent preservation). Once declared, a record cannot be altered and can only be deleted or destroyed in accordance with UFH policy and procedure by an officer authorised to carry out such actions.]</p>
RECORD TYPE	<p>(also relates to INFORMATION TYPE) A Record Type is a subset of its corresponding Information Type and defines additional metadata attributes that are required to support a record's integrity.</p>
REVIEW	<p>The examination of the disposal status of a folder, or a part of a folder, to determine whether its disposal can take place (i.e. that it should be destroyed, sent to an archive, or retained for a further review at a later date). [As it will be possible to determine the disposal status of some folders and/or parts of folders at the time of creation 'Review' will only apply to those folders or parts of folders where disposal status has not been determined at the point of creation].</p>
TRANSFER	<p>The process of exporting (usually groups of) complete electronic folders and subsequently destroying them within the exporting system, effectively transferring custody of the records. Records may be transferred for the purpose of permanent preservation in the Public Record Office, or some other place of deposit; or following structural</p>



changes to the machinery of government, which creates, dissolves or merges organisations.

Annexure B: Information Management Guidelines

1 This Annex describes more specific guidelines governing the management of information within the UFH. These underpin the eight information management principles stated in the main document. The Annexure is structured under the following headings:

- Creation and Capture/Receipt of Information
- Storage and Retrieval of Information
- Dissemination of Information
- Retention and Disposal of Information
- Compliance with Statutory and Regulatory Requirements

2 Creation and Capture/Receipt of Information

2.1 Responsibility to Create Records

- 2.1.1 All staff are under an obligation to create accurate records of their activities and to manage and maintain such documentation within the EDMS system.
- 2.1.2 Best Practise Management of Records requires that: 'Records of a business activity should be complete and accurate enough to allow employees and their successors to undertake appropriate actions in the context of their responsibilities, to: Facilitate an audit or examination of the business by anyone so authorised, Protect the legal and other rights of the authority, its clients and any other person affected by its actions, and Provide authenticity of the records so that the evidence derived from them is shown to be credible and authoritative.' And that: 'Records created by the authority should be arranged in a record keeping system that will enable the authority to obtain the maximum benefit from the quick and easy retrieval of information.'
- 2.1.3 Staff will consider whether any communication which they receive is relevant to the work of the UFH and therefore needs to be captured into the EDMS. This would include information which will be needed by anyone in the UFH for future reference or is likely to be of historical significance. Ephemeral or inconsequential information should not be captured. Staff will also consider whether any information, which they create or receive, should be preserved as a record.

2.2 Context and Metadata

- 2.2.1 Appropriate metadata will be applied to all documents and records created, captured and kept by the UFH. (Wherever practical and feasible, metadata will be determined and entered automatically by the EDMS.) The originator or recipient of a record will ensure that it is assigned appropriate metadata in the EDMS, and stored in the appropriate information system.

2.3 Intellectual Property of Others (Copyright)

- 2.3.1 A Document shall not incorporate the intellectual property of others unless the UFH has the relevant rights. Staff will not enter documentation (including scanning) into an information system unless the UFH owns or has obtained the copyright to do so. Material specifically addressed to the UFH can be entered into an information management system.
- 2.3.2 Staff responsible for scanning documents received from outside the UFH will comply with UFH scanning policy and procedures.

3 Storage and Retrieval of Information

- 3.1 UFH staff have a responsibility to make their information accessible to as wide an audience as possible as early as possible. A consistent approach is important to preserving the quality and integrity of our information and ensuring that it can be identified and retrieved in a predictable manner.
- 3.2 UFH staff should consider the wider business goals of the UFH when managing information. Staff are required to consider the overall information needs of the business rather than just managing information in a way that simply suits their personal interests or those of their Business Unit. Some examples of the implications of this on the way UFH staff should work are as follows:
 - 3.2.1 Staff should consider the retrieval needs of others within the UFH when storing information. For example, this could mean using a meaningful document title and adding relevant keywords to enable others within the UFH to retrieve the document.
 - 3.2.2 Staff should place documents within the Corporate File Plan at the earliest opportunity. Waiting until a document is finalised means that the information it contains may be out of date by the time it is accessible to others in the UFH who would have an interest in it.
 - 3.2.3 Staff should structure information in a way that reflects the way the UFH works. For example, setting up folder structures that relate to the functions of the UFH rather than a narrow "silo" view based on organisational structure. The Classification Structure in EDMS begins this process which should be followed through to the lowest level of container.
- 3.3 When staff retrieve a document from one of the UFH's repositories it is important to know if they are looking at the most recent version or if the information has been superseded in some way. This means that it is important to apply version control and identify the sequence in which documents were created. This has been applied through automated procedures and processes within the EDMS system. Such automated procedures will be largely invisible to the end user.
- 3.4 Security
 - 3.4.1 Staff have a duty to protect information for which they are responsible, even though it is to be made as widely accessible as possible. There is an equally important requirement to protect information that is in any way sensitive or confidential. Protective markings should be assigned to all documents and records in line with guidance issued by the UFH Security Officer.
- 3.5 Dissemination of Information
 - 3.5.1 Staff who receive information not relevant to their own business function will pass it to someone within the UFH who can determine whether it should be a record. Where possible pointers or links to documents should be used rather than emailing attachments to multiple addressees which will reduce duplication of information. This will also improve the accuracy of information as the most recent version will be accessible. Documents being mailed outside the UFHEDMS Dataset will need to be sent as attachments.

4 Retention & Disposal of Information

- 4.1 Information is captured stored and maintained because it has a value to the UFH and to the Government and public at large. Information that is inaccurate or out-of-date should not be kept (unless there is a clear historical value to the information). Indeed, keeping inaccurate information can be damaging. Staff should therefore aim to delete information that is no longer needed for business purposes and where the UFH is not under a legal obligation to retain it unless the material is of historical significance.

-
- 4.2 The retention requirements for many forms of information can be determined at the point of creation or capture. As such, all Divisions were required to develop and maintain retention schedules covering all functional areas of the UFH. Such schedules will meet the legal requirements for retaining records in relation to functional areas of business, estimates on the time period of retention required to fulfil business need (based on time periods or event realisation) and potential historical value. These schedules also determine actions to be taken on information either after a set time period or after a particular event. This will ensure that information can be managed with confidence and either be deleted, archived or reviewed for permanent preservation. All retention schedules will be approved by the Registrar and record managers will assist with their development and maintenance.
- 4.3 Disposal schedules will be created using THE RECORDS AND ARCHIVES MANAGEMENT COMMITTEE guidelines. Any change to information in an information system must not destroy any record unless the relevant Retention and Disposal Policy explicitly permits this.
- 4.4 Emails
- 4.4.1 Applying the above guidelines to emails means that if a message conveyed contributes to full understanding of a policy decision; results in an action being taken; or forms a significant part of the "story" it must be kept. If not, it should be deleted. Those emails not required for business needs or which do not need to be retained "for the record" should be deleted as soon as they have ceased to be of use. Emails that are added to the UFH's EDMS must be deleted from inboxes or other storage areas immediately they have successfully been added to the official record. Personal, ephemeral and other emails not added to the official record keeping system should be deleted as soon as they have ceased to be of use. Individual members of staff are responsible for doing this.
- 4.4.2 The UFH may apply limits on the time that emails may be kept outside the EDMS before automatic deletion. Some departments, for example, delete emails after three months.
- 4.4.3 Currently UFH does not apply such time limits.
- 4.5 Archiving
- 4.5.1 Any selection of information to be archived must faithfully reproduce the relevant records. This output must take into account their nature, the operational circumstances of the information system, and include metadata and other contextual information if this is required for the records to be meaningful. For transfer to THE RECORDS AND ARCHIVES MANAGEMENT COMMITTEE, it must be in THE RECORDS AND ARCHIVES MANAGEMENT COMMITTEE-approved formats and on THE RECORDS AND ARCHIVES MANAGEMENT COMMITTEE-approved media.

5 Compliance with Statutory and Regulatory Requirements

- 5.1 Compliance with legal requirements will protect the UFH from challenge in the courts - fighting lawsuits is both costly and diverts staff from performing their normal duties. In addition, compliance with regulations will protect the UFH from criticism.
- 5.2 Compliance with legislation may operate at several levels within the UFH. For example, there will be legislation that applies to the UFH as a whole, such as the Data Protection Act, and all staff will need to be aware of their information management responsibilities under such legislation. There will also be legal requirements that relate to just one aspect of the UFH's operations. For example, business units responsible for letting contracts will need to comply with EC procurement legislation and the information management requirements that this imposes (e.g. retention of contract documents for 5 years from contract award date).
- 5.3 There is also an obligation on the UFH to identify relevant legislation and to inform staff members accordingly. UFH staff can only be expected to apply legislation and regulations of which they are aware and consequently training and communication exercises will be necessary.
- 5.4 Access to information Act
 - 5.4.1 In the interests of public accountability UFH documents will be placed in the public domain unless there is a reason for not doing so.
 - 5.4.2 The EDMS will help the UFH to carry out its obligations under the PAIA 2 of 2000. This will be co-ordinated by the Records and Information Management Team, but all DIO's will be responsible for ensuring compliance. They will devote enough resources to this, including staff, for the UFH to fulfil its obligations.

ANNEXURE C: EDMS - Permissions by User Role

This list will evolve as the use of the EDMS is developed to meet specific needs.