

## Scottish Children's Reporter Administration Minute of Information Governance Leads held on Tuesday 22 February 2022 via Microsoft Teams

## SCOTTISH CHILDREN'S REPORTER

ADMINISTRATION

## Present:

Alistair Hogg (Chair), Donald Lamb, Janet Robertson, Paul Harkness, Anne Marie McIntosh (for Kelly Campbell), Jim McClafferty, Shona Carnegy, Vicki Ritchie, Gwen McNiven, Nicola Baird, Pamela Armstrong, Angela Mitchell, Stephen Eodanable, Hannah Mcculloch, Joanne Donald, Gillian Henderson, Bruce Knight, Jacqui Stephen

		Timescale	Action
1.	<b>Apologies</b> Kelly Campbell, Ed Morrison, Helen Etchells, Sheena Banks		
2.	<ul> <li>Any other Business</li> <li>Four items added:</li> <li>i) Janet Robertson – Envelope provision contract renewal</li> <li>As the contract for the secure mailing bags with Bayard</li> <li>Packaging will expire at the end of June 2022, Crawford Gardner</li> <li>is in the process of setting up a User Intelligence Group (UIG) to</li> <li>take forward a tender exercise. Paul Mulvanny has agreed to</li> <li>sponsor this exercise and Ed Morrison will support Crawford and</li> <li>the UIG as required. Volunteers will be required for the UIG.</li> </ul>		
	<b>ii) Gillian Henderson – Requests for historic information</b> There has been an increase in requests because of availability of redress schemes for those abused in care and just a general awareness that it is possible to obtain this personal information. These are often from people who were in care pre 1996, so SCRA does not hold the information they are looking for, instead it will be Local Authorities. It would be more useful (and more sensitive) to the individual enquiring, if instead of being passed to I&R, the Locality advise in the first instance that they should contact the LA. This would ultimately offer a better customer service and reduce SCRA workload. The LA is obliged to come to SCRA if their information originated with SCRA and SE can handle those cases. Where cases are post 1996 and the information has been destroyed to comply with retention of files guidelines, this can be very upsetting for an individual and can be handled by I&R. Locality teams to be made aware.	ASAP	AII
	<b>iii) Bruce Knight - Simulated Phishing campaign</b> Following the condensed iTECS report circulated by BK prior to the meeting, BK explained that the 2 <sup>nd</sup> round results were not as good as the 1 <sup>st</sup> round. There has been a Connect news item promoting good practice of correct reporting to the cyber security mailbox. BK discussed emails 2,4,5 & 6. Email 2 was a simulated voicemail notification encouraging the recipient to click on the link. You can hover over the links and gain a better understanding of what a domain is. A sense of urgency is a common indicator of a phishing email. Email 4 was a quarantine report which doesn't derive from a recognised tool used in SCRA. It also contains		

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	spelling errors and uses a generic 'Dear Customer', also with a sense of urgency. Email 6 contained the Scottish Govt logo but was not sent from a corresponding email address. With an increase in phishing attacks, staff need to learn more. Training is offered by Scottish Govt online and via Youtube, accessible on SCOTS. HR will be working on updating the training used for new- starts as SCRA training is becoming outdated. This report will be made available on Connect. PH noted that with the volume of emails most staff receive, mistakes are inevitable but staff are keen to get this right. It was agreed that more defences minimise the risk.GH raised an issue re quarantined emails profanities settings. BK explained that Scot Govt sets up a generic standard and this can be challenged if it creates a business issue. Staff can utilise a 'safe senders' list. BK happy to assist.		
	<b>iv) Bruce Knight – G:Drives</b> . If sensitive information is stored on Locality G:Drives this can be potentially accessed. A minimalist retention approach is advised. CSAS should be used and consideration of restricted folders being utilised. If SCOTS make further headway with their consideration of cloud storage, this would not be at a 'sensitive' level so these files could not be stored there at all.		
	Update on cloud storage progress.	Next meeting	BK
3.	<ul> <li>Minutes of last Meeting (23 November 2021) Minutes agreed as being accurate with no matters arising.</li> <li><u>Updates on actions from previous minutes</u> Data Quality – DL – In CSAS there are two areas in the record of proceedings where decisions on grounds are recorded; Hearing decisions and Hearing grounds. Discovered that in a number of cases, the Hearing decisions are filled in but the Hearing ground outcomes aren't. An IT fix is hopeful for linking the grounds to the correct Hearing. Retention of records (see item 4) Update of ND Group workstreams (see item 5) Audit of Ayrshire – follow-up (see item 8) Training (see item 9)</li> </ul>		
4.	Retention of over 18 files AH – This requires a final decision on what the rules are going to be and what the retention policy will be. SE has worked on drafting the revised policy. Need to know what the CSAS capability will be so a chicken/egg situation is unavoidable. SE updated on the policy with lots subject to change and views required on exceptions. There will be proposed removal of the exception on retaining DNA type evidence as police don't expect us to retain that. Claims for damages are a risk if we retain records for over- 18s, and SCRA has recently experienced a complaint where a request was made for personal data and the recipient then claimed that we should not be holding their data, as the applicant is over 18 years. Currently we retain cases of local importance. Query whether that exception should be removed. We need to		

examine what value those records provide and where the risk lies. For audit purposes we need to show why they are being held beyond 18. National importance cases could be retained by Practice. AH confirmed it is a risk to hold beyond 18 years as		
individuals and ICO want to know why. There needs to be a balanced risk if we require retention for local reasons e.g. if a further sibling is reported. Discussions then moved on to include Locality experiences with PH and JS concurring that there is reluctance to dispose of old cases, but experience demonstrates there is no retention need. SE confirmed that the risk of legitimate criticism for disposal is disproportionate to the requirement to dispose. AH is happy to take a decision to remove this exception to EMT next week if IG Leads agree. There were more discussions surrounding what should definitely be retained, with input from IG Leads who are just about to undertake the task of disposing of paper files. DL advised regarding old green and blue book cases pre CMS in 2013. Live Statutory documents must be retained as do established grounds. SE and AH will discuss prior to EMT and it is still relevant to consider the potential implications of UNCRC.	As	
<ul> <li>5. Non Disclosure Group and workstreams AH - Productive meeting on 22/02/2022 with workstreams functioning well to improve ND processes but reduce complexity. They took some concrete actions and decisions. From the four main work streams within the group: <ol> <li>Liaison and Collaboration – revisiting excellent partnership work re ND. Encouraging the taking of collective responsibility and engaging with strategic groups nationally and locally. <li>Practice processes and legislation - looking at proposals re legislative change around prospective placement of children. Clarity around that and proposed changes re court documents. Court documents should be C/O Principal Reporter and AH will take this forward through the court channels. <li>ND approach to double-checking – Structurally there was little appetite for centralising this or having a specific role within Localities. All staff need to be confident in the processes but the processes are numerous and complex. Where they are in our control, how do we simplify? HM was praised for her weekly analysis work where she checks the records for anomalies. She approaches staff members and asks questions to gain insight into what frequently goes wrong. She follows this to the hearing outcome stage and has so far looked at over 100 cases. She will produce a report to assist the improvement plan. Envelope checking is more complex as not everyone is in an office. Need to look at this long-term with agile working patterns. Is there need for a 3<sup>rd</sup> check? Agreed action to sharing lessons learned for all staff which will be a monthly task. This work will continue to reduce risk and improve ND work. With a Locality member on each group, information sharing is simplified.</li></li></li></ol></li></ul>	required	AH & SE

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6.	<b>Six monthly IG Report for Audit &amp; Risk Committee</b> JD highlighted the report that had been circulated to the IG Leads prior to the meeting. There was a significant increase in the number of ND breaches in the last 6 months but this was following a trend back to pre-covid levels. AH had presented the report to the A&R Committee and discussed what is an 'acceptable level of breaches' and what breaches are understandable. The ARC are supportive of our work and how we try to diminish risk, especially non-disclosure. AH relayed that the Committee would therefore like a 3-monthly rather than a 6-monthly report. They are re-assured by the IG Leads group and the ND focus groups. The report had highlighted financial claims which are fortunately few but also highlighted the physical and mental health effects of breaches. AH urged continued transparency and reiterated that apology and explanation usually suffice when an error has been made. Interim report to be issued by end April.	April 2022	JD
7.	Adoption & Permanence work GH – Highlighted the risk we carry where children were on a CSO and have moved on to permanence orders. CSAS has links to the natural parents. There have been past adoption cases where a child is referred again and the natural parents are sent papers/details. This can be catastrophic for a young person. This requires a CSAS and SOM change to de-link the natural parents from the child. This won't be retrospective but needs to be done to reduce the risk of harm. It is neither onerous or numerous. There followed a discussion regarding pre-adoption placements where foster parents requests have not met the non-disclosure tests. It has been decided to look at prospective adoptive cases across the country with a view to adding 'risk to placement' to ND/Rule 16 measures test. The note of proposed changes can be circulated following this meeting.	ASAP	GH
8.	<b>Conversations with Staff</b> SE – Following the Ayrshire Audit there had been a favourable response in the last meeting for similar discussions to take place in other Localities, with Janet offering to speak of the Ayrshire Locality experience to other teams. Timing may be difficult with staff coming back into offices post-Covid but the momentum should not be lost and it was very useful to the Locality and the I&R team. IG Leads to contact SE.	ASAP	All
9.	<b>Training</b> GH reminded attendees that new start and returner GDPR training for 2022 was now being rolled out by JD. Refresher training for all staff is being updated and tailored more closely to the work of SCRA and will commence in April. The aim is to have fewer sessions with bigger attendance. Complaints training is now being offered to LRMs with the intention that they will roll this out to their teams. This training will be available on March 15 <sup>th</sup> and 23 <sup>rd</sup> and will cover the overview of our process, how to deal with		

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	vexatious complaints and how to recognise a complaint. Locality teams to be made aware.		
		ASAP	All
10.	Examples of good locality practice or issues arising		
	AH would like everyone to bring something to the next meeting.	Next meeting	All
11.	New risks		
	No new risks identified		
12.	Date of Next Meeting		
	<b>Tuesday 24 May 2022 – via Microsoft Teams @ 13:30</b> AH thanked everyone for attending the meeting.		