



Kupu Taurangi Hauora o Aotearoa
Health Quality and Safety Commission

Public Records Act 2005 Audit Report

Prepared for Te Rua Mahara o te Kāwanatanga
Archives New Zealand

March 2023

Table of Contents

1. Disclaimers	3
2. Executive Summary	4
3. Introduction	5
4. Information Management Maturity Summary	6
5. Audit Findings by Category and Topic	7
Governance	7
Self-Monitoring	10
Capability	10
Creation	11
Management	13
Storage	15
Access	16
Disposal	17
6. Summary of Feedback	20

1. Disclaimers

USE OF REPORT

This report has been prepared in accordance with the Consultancy Order Services dated 1 December 2020 and variation dated 23 September 2021. We have prepared this report solely for Te Rua Mahara o te Kāwanatanga Archives New Zealand (Archives) and Health Quality and Safety Commission. It was prepared at the direction of Archives and may not include all procedures deemed necessary for the purposes of the reader. The report should be read in conjunction with the disclaimers as set out in the Statement of Responsibility section. We accept or assume no duty, responsibility, or liability to any other party in connection with the report or this engagement, including, without limitation, liability for negligence in relation to the factual findings expressed or implied in this report.

INDEPENDENCE

Deloitte is independent of Archives in accordance with the independence requirements of the Public Records Act 2005. We also adhere to the independence requirements of the New Zealand Auditing and Assurance Standards Board's Professional and Ethical Standard 1 (Revised): Code of Ethics for Assurance Practitioners. Other than this audit programme, we have no relationship with or interests in Archives.

STATEMENT OF RESPONSIBILITY

The procedures that we performed did not constitute an assurance engagement in accordance with New Zealand Standards for Assurance engagements, nor did it represent any form of audit under New Zealand Standards on Auditing, and consequently, no assurance conclusion or audit opinion is provided. The work was performed subject to the following limitations:

This assessment is based on observations and supporting evidence obtained during the review. This report has taken into account the views of Health Quality and Safety Commission and Archives, and both have reviewed this report.

Because of the inherent limitations of any internal control structure, it is possible that errors or irregularities may occur and not be detected. The procedures were not designed to detect all weaknesses in control procedures as the assessment was performed by interviewing relevant officials and obtaining supporting evidence in line with the guidelines of the Archives' Information Management (IM) Maturity Assessment.

The matters raised in this report are only those which came to our attention during the course of performing our procedures and are not necessarily a comprehensive statement of all the weaknesses that exist or improvements that might be made. We cannot, in practice, examine every activity and procedure, nor can we be a substitute for management's responsibility to maintain adequate controls over all levels of operations and their responsibility to prevent and detect irregularities, including fraud. Accordingly, management should not rely on our deliverable to identify all weaknesses that may exist in the systems and procedures under examination, or potential instances of non-compliance that may exist.

We have prepared this report solely for the use of Archives and Health Quality and Safety Commission. The report contains constructive suggestions to improve some practices which we identified in the course of the review using the instructions and procedures defined by Archives. These procedures are designed to identify control weaknesses but cannot be relied upon to identify all weaknesses.

2. Executive Summary

HEALTH QUALITY AND SAFETY COMMISSION

Kupu Taurangi Hauora o Aotearoa | Health Quality and Safety Commission New Zealand (HQSC) is a Crown Agent, governed under the New Zealand Public Health & Disability Amendment Act 2010. HQSC's overall purpose is to improve service safety, quality and provide support those engaging with these services nationally.

HQSC's core roles and responsibilities include:

- Monitoring and reporting on the quality and safety of the health and disability sector
- Building sector capability for quality and safety improvements
- Supporting clinicians to be leaders of quality and safety improvements and follow best practice
- Supporting the management and reporting of health care incidents.

HQSC's head office is located in Wellington with approximately 90 staff employed nationally. The organisation holds high-risk/high-value records such as board papers and National Health Index numbers which may be used to access an individual's health records.

The Chief Financial Manager/Business Manager is the Executive Sponsor (ES). HQSC does not have an IM team but frequently engages third-party contractors to assist with IM practices. Additional support is provided through the sharing of IM responsibilities across different teams within HQSC which include the Information and Communication Technology (ICT) team and the Corporate Services team (Office Manager and Director of Corporate Services).

The appointment of a Data Manager in November 2022 further assisted with providing IM support across HQSC.

SUMMARY OF FINDINGS

We assessed HQSC's IM maturity against the five maturity levels of Archives' IM Maturity Assessment model. The results are summarised below:

Maturity Level and Number of Findings

Beginning	0
Progressing	18
Managing	1
Maturing	0
Optimising	0
Not Applicable	1

3. Introduction

BACKGROUND

Archives provides IM leadership across the public sector. This is achieved through monitoring government organisations' IM practices to assure the New Zealand public that:

- Full and accurate records are created and maintained, improving business efficiency, accountability and government decision-making, and in turn, enhancing public trust and confidence in government;
- Government is open, transparent and accountable by making public sector IM practices known to the public.

Section 33 of the Public Records Act 2005 (PRA) requires that every public office has an independent audit of its record keeping practices every 5-10 years. The audit programme is part of Archives' monitoring and reporting on the state of public sector IM. It is one of the key components of their Monitoring Framework, which also includes an annual survey of public sector IM and the IM Maturity Assessment.

The Chief Archivist has commissioned Deloitte to undertake these audits of certain public offices and this audit was completed in October 2022.

OBJECTIVE

To identify areas of IM strengths and weaknesses within the public office, prioritising areas that need attention and what needs to be done to strengthen them. These audits are seen as an important mechanism for organisations to improve their IM maturity and to work more efficiently and effectively.

SCOPE

Deloitte has undertaken an independent point-in-time assessment of HQSC's IM practices against Archives' IM Maturity Assessment model. The IM Maturity Assessment aligns with the PRA and Archives' mandatory Information and Records Management standard. Topics 17 and 19 of the Archives IM Maturity Assessment are only applicable to local authorities and have therefore been excluded for the purposes of this audit.

The IM Maturity Assessment model classifies the maturity of IM practices from "Beginning" (least mature) to "Optimising" (highest maturity level). HQSC's maturity level for each topic area is highlighted under each of the respective areas. Ratings were based on the HQSC's officials' responses to questions during online interviews and the supporting documents provided in line with the IM Maturity Assessment guidelines.

Archives provided Deloitte with the framework including the specified audit plan, areas of focus for the PRA audits, and administrative support to Deloitte. Deloitte completed the onsite audit and audit report, which Archives reviewed before release to HQSC. Archives is responsible for following up on the report's recommendations with HQSC.

Our audit was based on a sample of IM systems, the review of selected documentation on a sample basis, and interviews conducted with a selection of staff and focus groups. As such, this audit does not relate to an Audit as defined under professional assurance standards.

The HQSC's feedback to this report is set out in Section 6.

4. Information Management Maturity Summary

This section lists the Information Management maturity level for each of the assessed topic areas. For further context refer to the relevant topic area in Section 5.

ASSESSMENT MATURITY LEVEL

Governance

No	Topic	Beginning	Progressing	Managing	Maturing	Optimising
1	IM Strategy		●			
2	IM Policy		●			
3	Governance Arrangements & Executive Sponsor		●			
4	IM Integration into Business Processes		●			
5	Outsourced Functions and Collaborative Arrangements		●			
6	Te Tiriti o Waitangi		●			

Self-monitoring

No	Topic	Beginning	Progressing	Managing	Maturing	Optimising
7	Self-monitoring		●			

Capability

No	Topic	Beginning	Progressing	Managing	Maturing	Optimising
8	Capacity and Capability			●		
9	IM Roles and Responsibilities		●			

Creation

No	Topic	Beginning	Progressing	Managing	Maturing	Optimising
10	Creation and Capture of Information		●			
11	High-value / High-risk information		●			

Management

No	Topic	Beginning	Progressing	Managing	Maturing	Optimising
12	IM Requirements Built into Technology Systems		●			
13	Integrity of Information		●			
14	Information Maintenance and Accessibility		●			
15	Business Continuity and Recovery		●			

Storage

No	Topic	Beginning	Progressing	Managing	Maturing	Optimising
16	Appropriate Storage Arrangements		●			

Access

No	Topic	Beginning	Progressing	Managing	Maturing	Optimising
18	Information Access, Use and Sharing		●			

Disposal

No	Topic	Beginning	Progressing	Managing	Maturing	Optimising
20	Current Organisation-specific Disposal Authorities		●			
21	Implementation of Disposal Decisions		●			
22	Transfer to Archives New Zealand	Not applicable				

Note: Topics 17 and 19 of the Archives IM Maturity Assessment are only applicable to local authorities and have therefore been excluded.

Audit Findings by Category and Topic

GOVERNANCE

The management of information is a discipline that needs to be owned top down within a public office. The topics covered in the Governance category are those that need senior level vision and support to ensure that government information is managed to ensure effective business outcomes for the public office, our government, and New Zealanders.

Topic 1: IM Strategy

High-level statement outlining an organisation’s systematic approach to managing information across all operational environments of an organisation.	Progressing
--	-------------

OBSERVATIONS

HQSC is currently drafting its first IM Strategy. The sighted draft IM Strategy included references to the PRA, an organisation activity plan and guidance around defining a record for the purposes of IM. However, the IM Strategy does not clearly link to HQSC’s broader strategic direction. The finalisation of the draft IM Strategy is a key priority for the new Data Manager.

HQSC advised that the recommendations from this audit will be used to guide the draft IM Strategy and roadmap for the organisation.

RECOMMENDATION

Finalise and approve the IM Strategy, ensuring that it follows Archives’ guidance and aligns with business needs.

Topic 2: IM Policy and Processes

An information management policy supports the organisation’s information management strategy and provides a foundation for information management processes.	Progressing
--	-------------

OBSERVATIONS

HQSC has an outdated IM Policy that was updated in 2016. It is a process document that contains guidance around document management processes such as retention and disposal policies.

In addition, HQSC also has an outdated ICT Policy that covers more IM Policy related content. The ICT Policy was previously updated in 2017 and contains definitions, responsibilities, information security and some alignment to HQSC’s broader strategic direction. The ICT Policy forms a key component of the induction process which staff and contractors note is a useful guide.

The new Data Manager is responsible for updating the IM Policy and ensuring it aligns with HQSC’s strategic direction and any relevant legislation (including the PRA). Staff have some awareness relating to their IM roles and responsibilities, and are aware that they can contact Corporate Services, ICT, or the Office Manager for IM support. In addition, there are business unit specific processes in place to manage information.

RECOMMENDATION

Update and approve the IM Policy and ICT Policy and ensure they align with HQSC’s broader strategic direction and any relevant legislative requirements.

Topic 3: Governance Arrangements and Executive Sponsor

The Executive Sponsor has strategic and executive responsibility for overseeing the management of information in a public sector organisation.

Progressing

OBSERVATIONS

The Data Governance group is HQSC’s IM Governance group with its own Terms of Reference which references information around data and data management but not IM specifically. The governance group consists of:

- Chief Financial Officer/Business Manager (also the ES)
- Director of Health Quality Intelligence
- Office Manager
- Data Manager
- Senior Data Analyst
- External members.

The Data Governance group is currently developing and reviewing a new IM Policy and other relevant policies. The group meets quarterly to provide recommendations to the CEO and/or board on IM matters. The ES is a member of the Data Governance group and is proactive in collaborating with the Office Manager to champion IM throughout HQSC.

An IM specific role has not been previously established at HQSC, however, the role of new Data Manager will address this to provide further IM support.

In addition, there is no regular IM reporting provided to the ES or the Data Governance group. Any reporting provided is specifically focused on IM breaches and advising the ES of any potential updates to IM systems.

RECOMMENDATION

Develop approve and implement regular reporting on IM activity to the Data Governance group through the ES.

Topic 4: IM Integration into Business Processes

All staff should be responsible for the information they create, use, and maintain. Business owners should be responsible for ensuring that the information created by their teams is integrated into business processes and activities. The IM team support business owners and staff.

Progressing

OBSERVATIONS

Staff indicated a general awareness of their IM responsibilities within their business units. Business owners also had a clear understanding of their team’s responsibility for managing information. This understanding was obtained through HQSC’s on-boarding process where staff are required to read and sign the ICT Policy before being granted system access. In comparison, staff are not required to read and sign the IM Policy.

Public Records Act 2005 Audit Report | Information Management Maturity Summary

HQSC recently transitioned to an Electronic Document Management System (EDMS) as their main digital document storage system. Staff interviewed indicated differing levels of experience and confidence in using HQSC's EDMS. It was also noted that there was some confusion around the use of some technology platforms. Further support and/or training for managing information on a regular basis was suggested to be beneficial.

RECOMMENDATION

Ensure responsibilities for managing information within business units is documented and monitored.

Topic 5: Outsourced Functions and Collaborative Arrangements

Outsourcing a business function or activity or establishing collaborative initiatives does not lessen an organisation's responsibility to ensure that all requirements for the management of information are met.

Progressing

OBSERVATIONS

HQSC has multiple third-party providers such as IM/ICT support and physical document storage. HQSC also has information sharing contracts with parties such as the University of Otago and Waitaha Canterbury.

The All of Government templates are used to draft contracts for the services that HQSC procures which ensures that all information management requirements are clearly stated. All sighted contracts and agreements referenced confidentiality, intellectual property obligations, exit strategies and mandatory PRA compliance requirements. Further details outlining guidelines around storage, privacy and security were also included.

There is no regular monitoring of current to ensure compliance to IM requirements. This was acknowledged as an area that required addressing.

RECOMMENDATION

Ensure that responsibilities and requirements for IM are clearly identified and monitored in contracts.

Topic 6: Te Tiriti o Waitangi

The Public Records Act 2005 and the information and records management standard supports the rights of Māori under Te Tiriti o Waitangi/Treaty of Waitangi to access, use and reuse information that is important to Māori.

Progressing

OBSERVATIONS

HQSC has a significant amount of sensitive information that is of importance to Māori. The new Data Manager plans to lead the identification of important information to Māori to ensure it is easily accessible and discoverable.

HQSC involves IM expertise as well as support from local Iwi-Partnership boards when creating and working on agreements with Māori. HQSC is currently working closely with these boards both locally and nationally to identify best practice in managing Māori information, with particular reference to their mortality review reports.

To support data sovereignty and sensitive information requirements, HQSC ensures all information hosted in the Cloud is located in New Zealand servers.

RECOMMENDATION

Work towards identifying and documenting information of importance to Māori.

SELF-MONITORING

Public offices are responsible for measuring and monitoring their information management performance for planning and improvement purposes. This helps to ensure that IM systems and processes are working effectively and efficiently. It also ensures that public offices are meeting the mandatory information and records management standard, as well as, their internal policies and processes.

Topic 7: Self-Monitoring

Organisations should monitor all aspects of their information management.

Progressing

OBSERVATIONS

HQSC uses a third-party legislative compliance tool to annually monitor its PRA requirements. However, compliance monitoring of its systems is not undertaken and guidance around compliance monitoring processes are also not included in the IM Policy or ICT Policy.

Staff have limited local storage on their devices to prevent overuse.

Through regular system updates, HQSC has visibility over their storage usage on local devices. While, the EDMS is not currently monitored, any security incident or breach that occurs is reported to both the Director of Corporate Services and the ES.

RECOMMENDATION

Develop regular IM monitoring to ensure compliance with internal policy, processes and legislative requirements.

CAPABILITY

Information underpins everything our public offices do and impacts all functions and all staff within the public office. Effective management of information requires a breadth of experience and expertise for IM practitioners. Information is a core asset, and all staff need to understand how managing information as an asset will make a difference to business outcomes.

Topic 8: Capacity and Capability

Organisations should have IM staff or access to appropriate expertise to support their IM programme.

Managing

OBSERVATIONS

HQSC does not have an IM team and outsources support requirements to third-party IM contractors to support the organisation. This support assists with IM matters such as systems commissioning, adding retention metadata in the EDMS and formulating the Information Data Asset Register (IDAR). The ICT team, Corporate Services and administration team also provide IM support when needed.

Staff have access to a professional development budget, but it is not IM specific.

IM capacity and capabilities within the organisation have been addressed in the short term with the addition of the new Data Manager who has also acknowledged HQSC's IM capacity requirements. In the interim, HQSC have sufficient capability and capacity to undertake their IM roles and responsibilities.

RECOMMENDATION

Ensure IM capability and capacity requirements are regularly assessed against business needs.

Topic 9: IM Roles and Responsibilities

Staff and contractors should be aware of their responsibility to manage information.

Progressing

OBSERVATIONS

Staff and contractors' IM roles and responsibilities are outlined in some job descriptions and covered off in the onboarding process.

Outside of the onboarding process, staff receive compulsory security and privacy training from the 'KnowBe4' course.

There is some IM training provided as a part of the onboarding process such as EDMS training. IM updates are provided on an as required basis through email reminders and/or updates.

Staff that were interviewed, reported that a formal and on-going programme for IM training would be beneficial. Requests for training included how to search for information in the EDMS, and other guidance around proper naming conventions.

RECOMMENDATION

Identify training needed to address IM responsibilities and deliver to all staff during onboarding.

CREATION

It is important to take a systematic approach to the management of government information, and this starts with an understanding of what information must be created and captured. It is expected that public offices create and capture complete and accurate documentation of the policies, actions, and transactions of government. Knowing what information assets are held by public offices is essential to IM practice.

Topic 10: Creation and Capture of Information

Every public office and local authority must create and maintain full and accurate information documenting its activities.	Progressing
--	-------------

OBSERVATIONS

Staff have a general understanding of their responsibility to create full and accurate information in order to support business functions. Most new information at HQSC is created and aligns with the requirements of the PRA.

Access controls and permissions ensure that the information is appropriately managed.

The use of local drives is discouraged and controlled through limited storage space on staff computers to ensure files and emails are saved to SharePoint.

Some staff reported functionality issues with the findability of information and naming conventions. There are inconsistent IM processes across business units such as informal naming conventions and filing structures in SharePoint. Generally, staff can find information when required and can access IM support from Corporate Services if needed.

RECOMMENDATION

Ensure naming conventions and file management processes are included in the updated policy and implemented across business units.

Topic 11: High-Value/High-Risk Information

Staff and contractors should be aware of their responsibility to manage information. Every public office and local authority must create and maintain full and accurate information documenting its activities.	Progressing
---	-------------

OBSERVATIONS

Staff note an awareness of what information is classified as high-value/high-risk but this is not formally documented. Staff can identify instances of when information is high-value/high-risk such as Nation Health Index numbers and other health records. Some information in SharePoint has been identified as high-value/high-risk such as mortality review information.

HQSC is currently updating its IDAR as it does not specify which information is high-value/high-risk. Additionally, the risks associated with the physical high-value/high-risk information held onsite has not been identified.

RECOMMENDATION

Finalise identifying all high-value/high-risk information assets and document in the IDAR.

MANAGEMENT

Management of information should be designed into systems to ensure its ongoing management and access over time, including following a business disruption event. The information must be reliable, trustworthy, and complete and managed to ensure it is easy to find, retrieve and use, as well as protected and secure.

Topic 12: IM Requirements built into Technology Solutions

IM requirements must be identified, designed, and integrated into all of your organisation's business systems.	Progressing
--	-------------

OBSERVATIONS

PRA and other relevant legislative requirements during most business changes are considered and outlined in some agreements such as contracts with third-party storage providers.

Information around legislative requirements including those in the PRA are provided through the onboarding process, business managers and other knowledge obtained from role specific requirements.

IM expertise is often involved in the design and configuration decisions of new or upgraded systems, as well as the commissioning or decommissioning of business systems. HQSC often uses third-party IM contractors to support these IM initiatives. This was recently evidenced when a secure information transfer platform was commissioned.

There is currently no documentation around system designs and configurations for all business systems.

RECOMMENDATION

Standardised IM requirements for new and upgraded business systems are identified and documented.

Topic 13: Integrity of Information

Information should be managed so that it is easy to find, retrieve and use, while also being secure and tamper-proof.	Progressing
---	-------------

OBSERVATIONS

The majority of HQSC's information is sensitive and actively identified and managed accordingly by staff, ensuring it is reliable and trustworthy. However, staff noted they were unclear on whether 'Teams' can be used for sharing information.

Generally, information from external parties is reviewed and managed accordingly before internal use. For example, health data from the Ministry of Health, is checked to ensure that information is received through HQSC's secure document sharing tool and personal names are removed.

Staff noted variable experiences in finding and retrieving information which includes ensuring that the information being accessed is the most current version. Information outside of each business unit can be retrieved through contacting a member of another business unit or searching the HQSC website for published data.

RECOMMENDATION

Identify issues affecting the integrity of information and create a plan to address these including standardising IM processes.

Topic 14: Information Maintenance and Accessibility

Information maintenance and accessibility cover strategies and processes that support the ongoing management and access to information over time.

Progressing

OBSERVATIONS

ICT and third-party IM contractors are aware of their requirements for managing and maintaining digital information such as undertaking system backups and recovery.

There are no risks identified and documented around the accessibility of on-site physical information, although HQSC's information is held in HQSC's EDMS. The preservation of physical information is also inconsistently identified and addressed.

The preservation and digital continuity business needs for digital information are not identified.

RECOMMENDATION

Identify the risks around the preservation of physical and digital information and document within relevant IM documentation.

Topic 15: Business Continuity and Recovery

This covers the capability of the organisation to continue delivery of products or services, or recover the information needed to deliver products or services, at acceptable pre-defined levels following a business disruption event.

Progressing

OBSERVATIONS

HQSC has a Business Continuity Plan (BCP) in place, that was reviewed in January 2022. Aspects of the BCP are regularly tested and maintained such as system back-ups, emergency contact details and the performance of core functions in staff absences. The BCP also contains information surrounding risks and recovery planning and other emergency response support agencies.

The restoration of digital information is well catered for, with internal systems backed up and reported daily to the ES.

The BCP does not indicate any requirement for it to be tested nor does it include any critical information or systems.

RECOMMENDATION

Ensure that all critical information is identified in business continuity and recovery plans.

STORAGE

Good storage is a very important factor for information protection and security. Appropriate storage arrangements for both physical and digital information ensures information remains accessible and usable for as long as it is required for business and legal purposes and for accountable government.

Topic 16: Appropriate Storage Arrangements

Appropriate storage arrangements for both physical and digital information ensures information remains accessible and usable throughout its life.

Progressing

OBSERVATIONS

Physical information is kept onsite in access-controlled storage cupboards in a large office area. The hazards, risks, and recovery plans have not been documented; however, all physical information is digitised in the EDMS.

As previously mentioned, the physical information stored with third-party storage provider is listed in an index. There is no index of physical held on-site information.

As previously mentioned, sensitive digital information such as Māori data is stored exclusively in HQSC’s local drive or in New Zealand hosted servers within third-party providers for data sovereignty purposes.

There are appropriate digital storage arrangements in place to protect digital information against unauthorised access or information loss and deletion. Access to confidential and sensitive information is restricted to specific staff. Deletions are backed-up in layers of digital recovery and protection. These layers include EDMS back-ups and deletion/recycle bin recovery, alongside appropriate disposal processes to prevent any loss of information.

HQSC’s protection and security processes are not tested regularly. HQSC advised there have been no external breaches or concerns regarding the protection and security of its information.

RECOMMENDATION

Develop a plan for regularly testing protection and security processes.

ACCESS

Ongoing access to and use of information enables staff to do their jobs. To facilitate this, organisations will need mechanisms to support the findability and usability of information. Information and data that is shared between organisations is identified and managed.

Topic 18: Information Access, Use and Sharing

Staff and contractors are able to easily find and access the information they need to do their work. Access controls for information is documented and consistently applied and managed. Metadata facilitates discovery and use of information. Information and data received or shared under information sharing agreements is managed according to IM policies and processes.

Progressing

OBSERVATIONS

All metadata meets Archives' minimum standards within HQSC's EDMS. Further work is being done with third-party IM contractors, to enable metadata related to retention and disposal requirements to be implemented in the EDMS.

Access controls for physical and digital information are approved but not documented and are well maintained for high-risk information on platforms such as the EMDS and payroll system. There is open access for information that is not high-risk.

RECOMMENDATION

Complete the work in the EDMS to enable retention and disposal processes to be implemented.

DISPOSAL

Disposal activity must be authorised by the Chief Archivist under the PRA. Public offices should have their own specific disposal authority as well as actively use the General Disposal Authorities for disposal of general or more ephemeral information. Disposal should be carried out routinely. Information of archival value, both physical and digital, should be regularly transferred to Archives (or have a deferral of transfer) and be determined as either "open access" or "restricted access" .

Topic 20: Current Organisation-Specific Disposal Authorities

This is about an organisation having its own specific disposal authority, not the implementation of the disposal actions authorised by the authority. It is not about the General Disposal Authorities.

Progressing

OBSERVATIONS

HQSC have a current DA that was approved by Archives in 2018.

The new Data Manager will be involved in reviewing and updating the DA to ensure it covers all formats and functions are included.

RECOMMENDATION

Implement a regular review cycle to ensure that the DA is kept up-to-date.

Topic 21: Implementation of Disposal Decisions

This is about the implementation of disposal decisions, whether from organisation-specific disposal authorities or the General Disposal Authorities.

Progressing

OBSERVATIONS

There have not been any disposals under their DA. There are processes and systems in place to provide guidance around deletion, recovery, retention details and system disposal notifications. These notifications alert HQSC when information has reached its disposal date and action is required.

The disposal process of digital information is secure, complete and irreversible within the EDMS. All digital information marked for deletion is reviewed and approved by the ES before permanent disposal. Similarly, the physical information disposal process is also undertaken securely, however, it was noted that digital copies of that information was retained in the EDMS until its disposal date.

RECOMMENDATION

Develop and implement a plan for the disposal of information that is consistent across all storage environments and formats.

Topic 22: Transfer to Archives New Zealand

Information of archival value, both physical or digital, should be regularly transferred to Archives or a deferral of transfer should be put in place.

N/A

OBSERVATIONS

Not applicable. HQSC has only been in existence since 2010 and has no information that is over 25 years old.

RECOMMENDATION

Not applicable.

6. Summary of Feedback

At the Commission we note the recommendations made by Deloitte in the audit and will include these recommendations in our work going forward. We will also take the recommendations to our data management group for discussion and progress planning.

We appreciate the learnings from the audit and as a small organisation will use the learnings to shape future discussion and projects in information management.

Deloitte.

Deloitte refers to one or more of Deloitte Touche Tohmatsu Limited (“DTTL”), its global network of member firms, and their related entities (collectively, the “Deloitte organisation”). DTTL (also referred to as “Deloitte Global”) and each of its member firms and related entities are legally separate and independent entities, which cannot obligate or bind each other in respect of third parties. DTTL and each DTTL member firm and related entity is liable only for its own acts and omissions, and not those of each other. DTTL does not provide services to clients. Please see www.deloitte.com/about to learn more.

Deloitte Asia Pacific Limited is a company limited by guarantee and a member firm of DTTL. Members of Deloitte Asia Pacific Limited and their related entities, each of which are separate and independent legal entities, provide services from more than 100 cities across the region, including Auckland, Bangkok, Bengaluru, Beijing, Hanoi, Hong Kong, Jakarta, Kuala Lumpur, Manila, Melbourne, Mumbai, New Delhi, Osaka, Seoul, Shanghai, Singapore, Sydney, Taipei and Tokyo.

Deloitte is a leading global provider of audit and assurance, consulting, financial advisory, risk advisory, tax and related services. Our global network of member firms and related entities in more than 150 countries and territories (collectively, the “Deloitte organisation”) serves four out of five Fortune Global 500® companies. Learn how Deloitte’s approximately 330,000 people make an impact that matters at www.deloitte.com.

Deloitte New Zealand brings together more than 1500 specialist professionals providing audit, tax, technology and systems, strategy and performance improvement, risk management, corporate finance, business recovery, forensic and accounting services. Our people are based in Auckland, Hamilton, Rotorua, Wellington, Christchurch, Queenstown and Dunedin, serving clients that range from New Zealand’s largest companies and public sector organisations to smaller businesses with ambition to grow. For more information about Deloitte in New Zealand, look to our website www.deloitte.co.nz.

This communication contains general information only, and none of Deloitte Touche Tohmatsu Limited (“DTTL”), its global network of member firms or their related entities (collectively, the “Deloitte organisation”) is, by means of this communication, rendering professional advice or services. Before making any decision or taking any action that may affect your finances or your business, you should consult a qualified professional adviser.

No representations, warranties or undertakings (express or implied) are given as to the accuracy or completeness of the information in this communication, and none of DTTL, its member firms, related entities, employees or agents shall be liable or responsible for any loss or damage whatsoever arising directly or indirectly in connection with any person relying on this communication. DTTL and each of its member firms, and their related entities, are legally separate and independent entities.

© 2023. For information, contact Deloitte Global.

14 August 2023

Te Rua Mahara o te Kāwanatanga Archives New Zealand

10 Mulgrave Street

Wellington

Phone +64 499 5595

Websites www.archives.govt.nz

www.dia.govt.nz

Peter Jansen
Chief Executive
Kupu Taurangi Hauroa o Aotearoa Health
Quality and Safety Commission
peter.jansen@hqsc.govt.nz

Tēnā koe Peter

Public Records Act 2005 Audit Recommendations

This letter contains my recommendations related to the recent independent audit of the Kupu Taurangi Hauroa o Aotearoa Health Quality and Safety Commission (HQSC) completed by Deloitte under section 33 of the Public Records Act 2005 (PRA). Thank you for making your staff and resources available to support the audit process.

Introduction

Te Rua Mahara o te Kāwanatanga Archives New Zealand (Archives) is mandated by the PRA to regulate public sector information management (IM). The audit programme is a key regulatory tool in our Monitoring Framework.

Monitoring IM practice across the public sector gives assurance that the government is open, transparent and accountable by providing visibility of public sector IM practices. Full, accurate and accessible information improves business efficiency and government decision-making and accountability, which in turn enhances public trust and confidence. Information that is well managed unlocks the value of government information for the benefit of everyone.

We are confident that you and your organisation are committed to delivering high-quality, trusted information to decision-makers, other government organisations, customers and stakeholders. We trust that the audit process will support this commitment. The audit report and this letter recommend changes to support improvement of your organisation's IM practices.

Audit findings

In the audit report, the auditor has independently assessed your information maturity against the framework of our IM Maturity Assessment. Prior to the audit, your organisation completed the Maturity Assessment. This provided a self-assessment of IM maturity for your own use and as context for the auditor about your organisation.

Kia pono ai te rua Mahara – Enabling trusted government information

Organisations that are assessed as having a maturity level of 'Managing' across all IM topics are broadly meeting the minimum requirements expected by the PRA and Archives' mandatory Information and records management standard. The HQSC is operating at the Progressing level. The organisation is well positioned to make IM improvements with the appointment of a Data Manager with responsibility for IM. This inhouse role should ensure that IM responsibilities and issues are well understood internally as well as by their external contractors.

An area for particular attention is the development of SharePoint functionality, ensuring that it is fit for purpose and staff know how to use it. Another significant area where IM maturity improvement is needed is the identification of information of importance to Māori.

Prioritised recommendations

The audit report lists 20 recommendations to improve your organisation's IM maturity.

We endorse all recommendations as appropriate and relevant. To focus your IM improvement programme, we consider that your organisation should prioritise the seven recommendations as identified in the Appendix.

What will happen next

The audit report and this letter will be proactively released on the Archives website shortly. We would be grateful if you would advise of any redactions that your organisation considers are necessary within 10 working days.

As required by the PRA, I will also provide the Minister of Internal Affairs with a report on the results of the audit programme for each financial year, which is tabled in the House of Representatives.

We will follow up this letter with a request to your Executive Sponsor that your organisation provides us with an action plan to address the prioritised recommendations. Our follow up process will track your progress against the action plan.

Thank you again for your support with the audit. We would greatly appreciate further feedback on the audit process and the value it provides to organisations. We have sent a feedback survey link for the attention of your Executive Sponsor in the accompanying email.

Nāku noa, nā



Anahera Morehu

Poumanaaki Chief Archivist

Te Rua Mahara o te Kāwanatanga Archives New Zealand

Cc Bevan Sloan, Chief Financial Officer and Business Manager (Executive Sponsor),
Bevan.Sloan@hqsc.govt.nz

APPENDIX

Category	Topic Number	Auditor's Recommendation	Archive's Comments
Governance	1: IM Strategy	<i>Finalise and approve the IM Strategy, ensuring that it follows Archives' guidance and aligns with business needs.</i>	The Strategy should support the business needs of the organisation. Considering the size of HQSC it may be useful if the Strategy is integrated with wider or related strategies.
Governance	2: IM Policy and Processes	<i>Update and approve the IM Policy and ICT Policy and ensure they align with HQSC's broader strategic direction and any relevant legislative requirements.</i>	When updating the IM Policy HQSC should consider combining Policies as there is reported crossover. The organisations requirements for use of systems such as Teams should be clearly outlined.
Governance	6: Te Tiriti o Waitangi	<i>Work towards identifying and documenting information of importance to Māori.</i>	Considering the HQSC's purpose, this is a significant area for improvement.
Governance	7: Self-Monitoring	<i>Develop regular IM monitoring to ensure compliance with internal policy, processes, and legislative requirements.</i>	This will ensure that the HQSC understands its IM activity and issues. It will also enable regular reporting to the Executive Sponsor and Data Governance group. See also the recommendation for Topic 3: <i>Governance arrangements and Executive Sponsor.</i>
Capability	9: IM Roles and Responsibilities	<i>Identify training needed to address IM responsibilities and deliver to all staff during onboarding.</i>	Staff feedback was that there are areas of IM to be addressed and that more training would be beneficial. Training around naming conventions and file management processes would make it easier to find information in other business areas as needed. See also recommendation for Topic 10: <i>Creation and capture of information.</i>

Category	Topic Number	Auditor's Recommendation	Archive's Comments
Creation	11: High-Value/High-Risk information	<i>Finalise identifying all high-value/high-risk information assets and document in the IDAR.</i>	The work that the HQSC has already done to develop a DA will support the development of an IDAR. An IDAR will increase HQSC's understanding of its information and also help to prioritise IM work.
Disposal	21: Implementation of Disposal Decisions	<i>Develop and implement a plan for the disposal of information that is consistent across all storage environments and formats.</i>	