





## Appendix 2 – Full Assessment Results

### 5. Creation and Capture


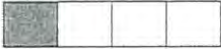

	Attribute	Level of maturity	Comments	Recommendations (Creation and Capture)
Initiation	<b>5.1.1</b> - The public office's (including relevant out-sourced) functions and business processes are reviewed or analysed to map recordkeeping requirements (including legislative requirements, business decisions and transactions).	Aware 	The Ministry has analysed its business processes to map recordkeeping requirements, but this structure has not been reviewed for some time. The Ministry's File Plan does not make provision for identifying business critical records. Plans are in place to review the File Plan.	<p>We recommend that the Ministry:</p> <ul style="list-style-type: none"> <li>Establish a process and procedures to identify business critical records</li> <li>Establish a procedure to review the business classification schema regularly</li> <li>Establish a practice of retaining prior versions of the File Plan to enable the tracking of changes</li> <li>Compile a list of critical systems and the metadata contained within those systems</li> <li>Develop disposal authorities linked to the business classification scheme so record sentencing is possible at the time of creation.</li> </ul>
	<b>5.1.2</b> - Records of all business decisions and transactions are systematically and consistently created in a records management system.	Aware 	<p>Records of most business decisions and transactions are systematically captured in a recordkeeping system, however:</p> <ul style="list-style-type: none"> <li>The electronic recordkeeping system workflow does not make mandatory capture of all documents, leaving the potential for business decisions not to be captured.</li> <li>The recordkeeping system is more complex than it needs to be. Because of the high volumes of data and complexity of systems, consistent and systematic capture does not necessarily lead to a captured document being easily retrievable.</li> </ul> <p>Plans are in place to review and refresh the electronic recordkeeping system.</p>	

## Appendix 2 – Full Assessment Results

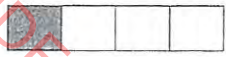
	Attribute	Level of maturity	Comments	Recommendations (Creation and Capture)
Establishment	<b>5.2.1</b> - Physical and electronic records are systematically captured as part of business as usual activities in a way which meets the public office's business requirements.	Aware 	Physical and electronic records are systematically captured as part of business as usual activities in a way which meets the public office's basic business requirements. However the quality of the system does not meet requirements in all respects, as a recent staff satisfaction survey indicated that staff felt that search was poor and the system does not identify business critical records.	
	<b>5.2.2</b> - Public office has considered and documented decisions around the application of minimum point-of-capture and process metadata elements. Specified minimums should meet at least Requirements 8 and 9 in the <i>Electronic Recordkeeping Metadata Standard</i> .	Absent 	The Ministry has not considered and documented decisions around the application of minimum point-of-capture and process metadata elements. The Ministry's databases do not meet all specified minimum elements in the <i>Electronic Recordkeeping Metadata Standard</i> .	
	<b>5.2.3</b> - Recordkeeping metadata schemas and schemes are managed as records in their own right. These are regularly updated to reflect changes in business activities and structure.	Absent 	Archives New Zealand guidance specifies that recordkeeping metadata schemas for recordkeeping systems and applications should be managed and that 'substantive' changes should be documented and recorded.  Ministry databases are at different levels of maturity for this attribute.  Hardcopy records are at a relatively high level of maturity. The RMATS system has a process to update RMATS to reflect changes in business activities and structure however it does not have a process to record and retain history of substantive changes.  Electronic records in other Ministry databases are not at such a high level of maturity. For	



## Appendix 2 – Full Assessment Results

	Attribute	Level of maturity	Comments	Recommendations (Creation and Capture)
			example, there is not a formal process to update the Filing Cabinets database to reflect organisational changes, or to record and retain history of substantive changes to the file structure.	
	<b>5.2.4</b> - The records of the public office are identified and documented within a business (records) classification scheme (or schemes where the public office has many functions and/or semi-autonomous business units).	Actioned 	The Ministry's records are identified and documented within a business (records) classification scheme, however the different recordkeeping systems have differing levels of maturity in terms of comprehensiveness of schema coverage.	
Capability	<b>5.3.1</b> - Business systems/applications are reviewed and critical business systems/applications have been identified. Mapping is undertaken between business systems/applications and the recordkeeping metadata schema (as per the <i>Electronic Recordkeeping Metadata Standard's Technical Specifications</i> ).	Absent 	<ul style="list-style-type: none"> <li>systems managers have not related critical business system functional specifications to recordkeeping metadata schema,</li> <li>mapping is not undertaken between business systems and the recordkeeping metadata schema, and</li> </ul> <p>A list of critical systems and the metadata contained within those systems does not currently exist.</p>	
	<b>5.3.2</b> - The business classification scheme/s is/are routinely reviewed for relevance.	Aware 	<p>Business classification schemes are not routinely reviewed for relevance.</p> <p>However the Ministry is aware that the business classification scheme for hard copy records needs review – plans are in place to review it.</p> <p>Other recordkeeping databases at lower levels of maturity do not have business classification schemes reviewed. There are no plans in place to review these currently.</p>	




## Appendix 2 – Full Assessment Results

	Attribute	Level of maturity	Comments	Recommendations (Creation and Capture)
	<b>5.3.3</b> - Disposal authorities linked to business classification scheme so record sentencing is possible at time of record creation.	Absent 	Disposal authorities have not been developed.	

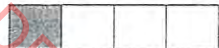



## Appendix 2 – Full Assessment Results

### 6. Retrievability and Security

	Attribute	Level of maturity	Comments	Recommendations (Retrievability and Security)
Initiation	6.1.1 - The public office manages the location of records it captures within its recordkeeping system/s over time.	Actioned 	There are sufficient record management and tracking systems across hardcopy and electronic databases to manage location of records. However, this is not centralised, due to the diverse number of databases and metadata associated with records at MOH.	<p>We recommend that the Ministry:</p> <ul style="list-style-type: none"> <li>Consider reviewing all records systems to allow for a single front end search function across all databases (electronic and hard-copy records)</li> <li>Provide additional training of Ministry staff on utilising the functionality of lotus notes to control documents and assign security levels to assist in the ability to secure and locate documents</li> <li>Create a way for staff to flag a vital record, whether through current 'information value' levels, or another means</li> <li>Monitor KPIs in relation to the ability to locate information to allow identification of trends, issues and provide a benchmark of a key records team function.</li> </ul>
	6.2.1 - Recordkeeping systems and storage facilities are protected from unauthorised access, destruction or theft, or from accidental damage by fire, flood, earthquake, volcanic eruption or vermin.	Aware 	<p>There is variation in the facilities used for storage of records at MOH. Records storage is undertaken at Molesworth St, Medsafe, Auckland, Christchurch and Dunedin facilities. Off-site storage with specialised storage companies also occurs.</p> <p>Each facility is different in terms of protection of records. Molesworth Street has the least protection from damage.</p>	
Establishment	6.2.2 - Sensitive or restricted records are identified, documented and controlled. Where applicable, access to records is provided in accordance with the Official Information Act, Privacy Act and <i>Security in the Government Sector (SIGS) Manual</i> and <i>Technical Specifications for the Electronic Recordkeeping Metadata Standard</i> .	Actioned 	<p>Sensitive or restricted records managed by specific departments with secured electronic files and secure areas for hardcopy storage are well controlled. Hardcopy documents in records team storage are also well controlled.</p> <p>The identification and control of sensitive records within the generic electronic filing system is variable, depending on staff member's knowledge of how to secure and restrict records.</p>	





## Appendix 2 – Full Assessment Results

	Attribute	Level of maturity	Comments	Recommendations (Retrievability and Security)
	<b>6.2.3</b> - The access status (either open or closed) of public records over 25 years of age (or pending transfer) is determined according to Archives New Zealand's <i>Access Standard</i> and registered with Archives New Zealand	Absent 	There are no records over 25 years of age at the Ministry of Health, and no processes to manage these types of records have been developed.	
Capability	<b>6.3.1</b> - The ability to locate records is monitored and routinely audited.	Absent 	While records staff have key performance indicators for timeframes for locating records, these are not formally monitored or audited. Anecdotal evidence suggests timeframes are met most of the time, but difficulties with locating information within multiple records systems can affect timeframes.	




## Appendix 2 – Full Assessment Results

### 7. Maintenance and Storage

	Attribute	Level of maturity	Comments	Recommendations (Maintenance and Storage)
Initiation	<b>7.1.1</b> - All records (regardless of format or media and including recordkeeping metadata) are managed so they cannot be altered or deleted without due permission.	Aware 	The ability to alter or delete records is not consistent across databases, filing systems or directorates. Some records have strong controls to prevent unauthorised alteration/deletion, while other records do not.	<p>We recommend that the Ministry:</p> <ul style="list-style-type: none"> <li>Assess compliance with the Storage Standard across all Ministry of Health records storage locations</li> <li>Review storage of Molesworth Street records when a new premises has been identified. Implement any requirements to ensure these records are stored in a location that complies with the Storage Standard</li> <li>Develop a plan for storage of documents over 25 years in age, after the Ministry retention and disposal authority has been developed</li> <li>Undertake a review of records systems and develop a plan to provide consistency across systems for classifications, value identification, security requirements and taxonomy.</li> </ul>
	<b>7.1.2</b> - Records must contain both content and sufficient contextual information necessary to ensure that a link to the applicable business activity is maintained.	Aware 	There is variation between the metadata in each database within the Ministry, with some databases having sufficient information and others lacking information to link records to business activities. Taxonomy between electronic and hardcopy systems is not consistent, preventing universal linkages between records and business activities.	
	<b>7.1.3</b> - The public office has undertaken a risk-based assessment of its records storage (based on the Archives New Zealand <i>Storage Standard</i> ) to ensure its records are stored appropriately.	Aware 	The Molesworth Street records storage facility is not fully compliant with the Storage Standard. This has been confirmed by Archives New Zealand. Offsite storage facilities are compliant with Storage Standards.  Other facilities (Auckland, Christchurch, Dunedin, Medsafe) were not visited and therefore could not be assessed.	
Establishment	<b>7.2.1</b> - Records are reviewed/appraised and stored in accordance with their value and security needs.	Aware 	Processes are in place to manage records according to security levels and value to the business. However, this is only applicable to business units which have their own storage systems (electronic and hardcopy). General filing of records may or may not have appropriate controls in place, based on whether a record has been assigned restricted or	





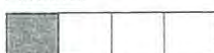


## Appendix 2 – Full Assessment Results

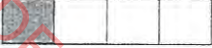

	Attribute	Level of maturity	Comments	Recommendations (Maintenance and Storage)
			secured status or not.	
Capability	7.3.1 - Public office must have a storage plan in place if it is retaining physical records of archival value over 25 years of age. Plan must meet requirements of the <i>Storage Standard</i> that apply to archival records and inactive records of archival value.	Absent 	There is no plan in place for records over 25 years in age. There are currently no records at MOH that meet this criteria.	

## Appendix 2 – Full Assessment Results

### 8. Disposal and Transfer

	Attribute	Level of maturity	Comments	Recommendations (Disposal and Transfer)
Initiation	<b>8.1.1</b> - Core functional records and associated metadata are appraised and disposal authorities developed.	Absent 	Retention and Disposal Authorities for the Ministry have not been developed.	<p>We recommend that the Ministry:</p> <ul style="list-style-type: none"> <li>Develop Retention and Disposal Authorities for Ministry of Health Records. Once this is developed, all existing records will need to be reviewed to establish their retention or disposal requirements and tagged appropriately</li> <li>Train staff to identify retention or disposal requirements when creating new records</li> <li>Establish a comprehensive transfer and disposal programme, starting with records in offsite storage, as this could significantly reduce costs for the Ministry</li> <li>Review the transfer and disposal programme on an ongoing basis.</li> </ul> <p>It is envisaged that the completion of these recommendations will take an extended period of time due to the volume of records which would need to be reviewed prior to destruction.</p>
Establishment	<b>8.2.1</b> - The public office applies disposal authorities to classes or groups of records within the recordkeeping framework.	Absent 	Retention and Disposal Authorities for the Ministry have not been developed.	
	<b>8.2.2</b> - Procedures are in place to manage disposal (including both the transfer and/or destruction) of records as soon as they are no longer needed for business use as per the authorised retention and disposal schedule. Procedures in place to ensure records are closed once no longer needed for current business purposes.	Absent 	Retention and Disposal Authorities for the Ministry have not been developed. General Disposal Authorities are utilised for standard records (financial, human resources etc).	
	<b>8.2.3</b> - Appropriate deferral agreements are in place, for records that are over 25 years of age, but are still administratively required by the public office.	Absent 	There are no arrangements in place for records over 25 years of age.	
	<b>8.2.4</b> - The minimum recordkeeping metadata associated with records as defined in the <i>Electronic Recordkeeping Metadata Standard</i> (this recordkeeping metadata is sometimes known as a metadata stub) is retained after disposal action for as long as is administratively required.	Absent 	It was unable to be determined whether metadata was kept for all electronic records in all systems if records are deleted.	

## Appendix 2 – Full Assessment Results

	Attribute	Level of maturity	Comments	Recommendations (Disposal and Transfer)
Capability	<b>8.3.1</b> - Public office disposal programme is monitored and reviewed.	Absent 	There is no disposal programme in place to monitor or review	
	<b>8.3.2</b> - Regular and efficient records disposal occurs as part of the public office's recordkeeping framework.	Absent 	Records disposal has not been regularly occurring, as no retention and disposal authority exists for the Ministry.	



INTERNAL AFFAIRS

Te Tari Taiwhenua

# PRA Audit of the Ministry of Health

Terrace

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# Introduction

Terrace Consulting

*This presentation provides a summary of Terrace Consulting's findings during the course of the work undertaken for Archives New Zealand, at Ministry of Health under the terms of the engagement letter/contract dated 6 November 2013. The contents of this presentation do not represent our conclusive findings, which will only be contained in our written report.*

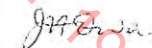
*No reliance should be placed by any additional oral remarks provided during the presentation, unless these are confirmed in writing by Terrace Consulting.*

*The presentation is provided solely for the benefit of the parties identified in the engagement letter/contract and is not to be copied, quoted or referred to in whole or in part without Ministry of Health's prior written consent.*

*Terrace Consulting accepts no responsibility to anyone other than the parties identified in the engagement letter/contract for the information contained in this presentation.*

Date: 26 June 2014

Name:



Judy Owen

Department of Internal Affairs



# Context for recordkeeping

Terrace Consulting

- The Ministry of Health is the principal advisor on health and disability, improving promoting and protecting the health of all New Zealanders
- The Ministry of Health is based in Wellington and has offices in various locations throughout New Zealand
- The Ministry has along history of paper records management that has continued into the electronic age with Lotus Notes as the main system for managing electronic documents
- The responsibility of the management of records within the Ministry of Health is with the Corporate Information Services Manager and Team Leader, Records
- A business case is currently being prepared for an Enterprise Content Management System

Department of Internal Affairs



# Key recordkeeping systems

Terrace

- Key systems that manage records at the Ministry of Health are:
  - ✓ Lotus Notes databases
  - ✓ Human Resources – Payroll
  - ✓ Concare (contract management system)
  - ✓ Oracle Financials
  - ✓ Provider Regulation and Management System (PRMS)
  - ✓ Sector Facing Systems including
    - ✓ Contract Management (CMS, CCPS, PerOrg)
    - ✓ Payment and Processing systems
    - ✓ Data warehouses supporting national collections of data
    - ✓ Health identity e.g. National Health Index
    - ✓ Health Intranet

✓

# Summary of Key Findings

Terrace Consulting

- Key findings from the audit were as follows:
  - ✓ The audit found that the Ministry of Health is aware that Lotus Notes is old technology and needs to be replaced so that the Ministry can reduce the risk of inaccurate information being disseminated
  - ✓ The Lotus Notes document management system was first installed in 1998 when it was state of the art technology; Lotus Notes has fallen behind other systems for document management and no longer meets the Ministry's needs for effective document management or the mandatory standards for records under Public Records Act
  - ✓ The Ministry uses a range of business systems to manage structured data and a document and recordkeeping system to manage unstructured data in both physical and electronic formats
  - ✓ The Ministry uses its paper records system as the official record for certain documents

Department of Internal Affairs

# Changes to the Audit Self-Assessment Ratings

Terrace Consulting

The auditor reviewed the audit self-assessment ratings completed by the Ministry of Health

- 22 criteria out of 60 were reviewed and:
  - ✓ 32% of criteria ratings reviewed were increased
  - ✓ 59% of criteria ratings reviewed remained the same
  - ✓ 9% of criteria ratings reviewed were decreased
- Evidence provided for the onsite audit was the reason that most of the ratings remained the same

Department of Internal Affairs



# Storage Standard Assessments

- Terrace Consulting conducted a Storage Standard Assessment at the Ministry of Health's Wellington site
  - ✓ Physical records at the Ministry of Health's Wellington site at 133 Molesworth Street are controlled so that they are able to be identified and retrieved easily, and to prevent damage or loss
  - ✓ The centralised records system is carefully managed to keep track of physical records
  - ✓ Security of the Records Room during working hours is based on the door being locked when no-one is present and Records team members monitoring unauthorised access
  - ✓ Work is progressing to move closed records to commercial off-site storage prior to a building move later in 2014

## Next Steps

Terrace Consulting

- Terrace Consulting will complete the report for Archives New Zealand.
- The report and all documentation gathered during the site visit will be provided to Archives New Zealand for review.
- The audit findings report and a letter from the Chief Archivist, which will summarise the findings and make recommendations (where applicable), will be sent directly to the Chief Executive of the Ministry of Health
- Archives New Zealand does not publish or disseminate audit findings reports, or make any public comment on the conduct or findings of individual audits. Please note: the audit findings report is subject to the Official Information Act (OIA).

## Closing Note

On behalf of the Archives New Zealand Audit & Monitoring team , I would like to thank you for the time and assistance you have given throughout the audit process.

Department of Internal Affairs

8 August 2014

Mr Chai Chuah  
Acting Director-General of Health and Chief Executive  
Ministry of Health  
[Chai.Chuah@MOH.govt.nz](mailto:Chai.Chuah@MOH.govt.nz)

Dear Mr Chuah

## PUBLIC RECORDS ACT AUDIT OF THE MINISTRY OF HEALTH

The attached Audit Findings Report provides the findings of the recent audit of the recordkeeping practices of the Ministry of Health undertaken in accordance with section 33 of the Public Records Act 2005.

The objectives of the Public Records Act audits are to:

- provide an independent review of your organisation's recordkeeping capability development;
- assess compliance with the requirements of the Public Records Act; and
- if necessary, identify the business risks to which your organisation may be exposed as a result of any poor recordkeeping practice.

### Circulation of Report

To ensure that the maximum value is gained from the audit process, I encourage you to circulate the Audit Findings Report and this letter to your managers with accountability for information management, records management, legal compliance reporting, risk management and business performance improvement. As noted in our first letter on 27 September 2013, the Audit Findings Report and this letter have been copied to Barbara Phillips, Deputy Director-General Corporate Services, who is your organisation's Senior Responsible Officer for this audit.

### Public Records Act requirements covered in your audit

The Public Records Act requires public offices to:

- |            |  |
|------------|--|
| Section 17 | create and maintain full and accurate records of their affairs;                                      |
| Section 17 | maintain public records in an accessible form, so as to be able to be used for subsequent reference; |
| Section 18 | ensure that they have appropriate authority to dispose of public records;                            |
| Section 21 | transfer possession and control of public records that have been in existence for 25 years; and      |
| Section 27 | comply with standards issued by the Chief Archivist.   |

Ref: 2013/4192



Under Section 27 of the Public Records Act, four mandatory standards prescribing good recordkeeping practice have been in force:

- *Create and Maintain Recordkeeping Standard*
- *Electronic Recordkeeping Metadata Standard*
- *Storage Standard*
- *Disposal Standard*

These four standards were superseded on 1 July 2014 by a single updated document, the *Records Management Standard for the New Zealand Public Sector* (for further information see <http://archives.govt.nz/advice/guidance-and-standards/recordkeeping-standards>).

### Recordkeeping Capability Development

The recordkeeping audits assess organisational maturity against eight recordkeeping capability activities. The audit found the Ministry of Health has mature recordkeeping capability in the following activities:

- Planning
- Resourcing
- Training
- Reporting
- Retrievability and Security
- Disposal and Transfer

The activities, in which recordkeeping capability is developing, but not quite fully mature, are:

- Creation and Capture
- Maintenance and Storage

### Physical Storage Inspection

The audit included a physical storage inspection of paper records stored at the Ministry of Health, 133 Molesworth Street, Wellington. A summary of the findings is:

- Physical records at the Ministry of Health are controlled so that they are able to be identified and retrieved easily, and to prevent damage or loss.
- The centralised records system is carefully managed to keep track of physical records.
- Security of the Records room during work hours is based on the door being locked when no one is present and the Records team members monitoring unauthorised access.
- Work is progressing to move closed records to commercial offsite storage prior to a building move later in 2014.

## Compliance with Public Records Act

The audit found that the Ministry of Health is making good progress with developing its recordkeeping capability.

Overall the awareness of requirements and responsibilities under the Public Records Act and mandatory standards is good. There is evidence of work being done in the records management area showing positive steps for improvement and the Ministry of Health has a sound basis for good ongoing records management.

Some of these positive steps include:

- replacement of Lotus Notes to reduce the risk of inaccurate information being disseminated; and
- the use of a range of business systems to manage structured data, and a document and recordkeeping system to manage unstructured data - in both physical and electronic formats.

The documentation seen during the audit gives confidence in the recordkeeping ability of your organisation.

The Ministry of Health's stakeholders can therefore have a measure of assurance that its recordkeeping is consistent with good practice, and contributing to broader organisational and governmental goals.

## Recommendations for Capability Development

Accordingly, I do not see the need to make any specific recommendations for capability development.

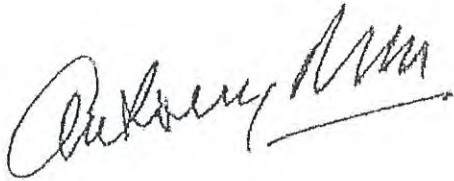
I note that plans are in place to progress the overall management of records. These plans include:

- the implementation of the Ministry of Health's draft policies and procedures document titled *Internal Policy: Information and Knowledge Management* in the Ministry-wide 2-yearly cycle of policy reviews;
- replacing Lotus Notes as a core document management system as evidenced in the Ministry of Health's draft document *Corporate Knowledge Services programme for ECMS – Project brief and Outline Business Case*;
- reviewing appropriate storage of records with the move to a new building; and
- the implementation of a new file classification structure which will include taxonomy and metadata management, as outlined in the draft business case for the Enterprise Content Management System.

I encourage you to have your staff contact Patrick Power, Manager Recordkeeping Capability ([patrick.power@dia.govt.nz](mailto:patrick.power@dia.govt.nz) – phone 04 894 6035) and Denise Williams, Manager Disposal and Acquisition ([denise.williams@dia.govt.nz](mailto:denise.williams@dia.govt.nz) – phone 04 495 6225) to support your team in progressing improvements in these areas.

If you have any questions regarding the audit and its findings, please do not hesitate to contact us.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Antony Moss', with a horizontal line underneath.

Antony Moss  
Acting Chief Archivist and General Manager  
Archives New Zealand

CC: Barbara Phillips, Deputy Director-General Corporate Services  
Attached: Audit Findings Report including Storage Standard checklist

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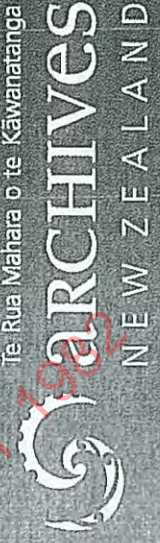
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Archives New Zealand  
Public Records Act Audit Findings Report

Ministry of Health  
June 2014

CONFIDENTIAL

Te Rua Mahara o te Kāwanatanga





## Contents

This report summarises the findings of your Public Records Act 2005 audit. The report is set out as follows:

### SUMMARY

A visual representation of your recordkeeping capabilities.

### VALIDATED RATINGS

The findings for the 50 areas/questions covered by the audit.

### BUSINESS RISK

An overview of the business risks associated with recordkeeping.

### STORAGE INSPECTION REPORT

The findings of the onsite physical storage inspection.

## How to read your report

The first four pages summarise your ratings (which were determined by validating your self-assessment through an independent audit). This summary covers eight areas of recordkeeping.

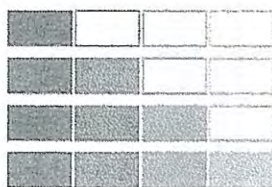
Areas of Recordkeeping	
General Business Activities (Management Activities)  1. Planning 2. Resourcing 3. Training 4. Reporting	Specific Recordkeeping Practice (Operational Requirements)  5. Creation and Capture 6. Retrievability and Security 7. Maintenance and Storage 8. Disposal and Transfer

Stages of Achievement
1. <b>Initiation</b> – needs identified, evidence of planning i.e. solutions examined, systems designed  2. <b>Establishment</b> – evidence of practical application  3. <b>Extending Capability</b> – evidence of good practice, including regular review, monitoring and continuous improvement



## Understanding the ratings

### Legend



absent

No evidence of management understanding. No systematic approach

aware

Some management understanding. Uncoordinated, incomplete approaches providing inconsistent results

actioned

Managed approach

embedded




Effective management of records is fully integrated and practicing continuous improvement

## General Business Activities - Summary

### Planning

Stage	Description	Achievement	
Initiation	Policy and planning initiated.	Uncoordinated, ad hoc, incomplete processes for the management of records.	
Establishment	Policy and plans are being implemented.	Coordinated planning, documentation and review of the management of records is evident.	
Capability	Policy and plans are regularly reviewed and updated.	Coordinated planning, documentation and review of the management of records is evident.	

### Resourcing

Stage	Description	Achievement	
Initiation	Resourcing requirements for recordkeeping identified.	Coordinated planning, documentation and review of resourcing requirements for the management of record is evident.	
Establishment	Resourcing for recordkeeping established.	Coordinated planning, documentation and review of resourcing requirements for the management of record is evident.	
Capability	Succession planning and resourcing is part of business plans.	Coordinated planning, documentation and review of resourcing requirements for the management of record is evident.	

Audit Findings Report of Ministry of Health  
Year 2013/2014

## Training

Stage	Description	Achievement	
Initiation	Training needs analysis undertaken.	Coordinated planning, documentation and review of training requirements for the management of records is evident.	
Establishment	Training programme established.	Coordinated planning, documentation and review of training requirements for the management of records is evident.	
Capability	Training programme actively monitored, reviewed and updated.	Coordinated planning, documentation and review of training requirements for the management of records is evident.	

## Reporting

Stage	Description	Achievement	
Initiation	Reporting requirements identified.	Coordinated planning, documentation and review of reporting requirements for the management of records is evident.	
Establishment	Basic operational reporting established.	Coordinated planning, documentation and review of reporting requirements for the management of records is evident.	
Capability	Recordkeeping is part of organisational risk and reporting framework.	Coordinated planning, documentation and review of reporting requirements for the management of records is evident.	




## Legend

	absent
	aware
	actioned
	embedded






## Specific Recordkeeping Practice - Summary













### Creation & Capture

Stage	Description	Achievement	
Initiation	Recordkeeping requirements have been identified.	The existence of coordinated systems and/or controls for the creation and capture of records is evident.	
Establishment	Systems and controls are implemented.	Uncoordinated, ad hoc, incomplete systems and/or controls for the creation and capture of records.	
Capability	Systems and controls are actively monitored and reviewed.	Uncoordinated, ad hoc, incomplete systems and/or controls for the creation and capture of records.	






### Retrievability & Security

Stage	Description	Achievement	
Initiation	Recordkeeping requirements have been identified.	The existence of coordinated systems and/or controls for the retrievability and security of records is evident.	
Establishment	Systems and controls are implemented.	The existence of coordinated systems and/or controls for the retrievability and security of records is evident.	
Capability	Systems and controls are actively monitored and reviewed.	The existence of coordinated systems and/or controls for the retrievability and security of records is evident.	

















## Maintenance & Storage

Stage	Description	Achievement	
Initiation	Recordkeeping requirements have been identified.	Uncoordinated, ad hoc, incomplete systems and/or controls for the maintenance and storage of records.	   
Establishment	Systems and controls are implemented.	The existence of coordinated systems and/or controls for the maintenance and storage of records is evident.	   
Capability	Systems and controls are actively monitored and reviewed.	No evidence of systems and/or controls in place for the maintenance and storage of records.	   

## Disposal & Transfer

Stage	Description	Achievement	
Initiation	Development of disposal authorities and implementation plans initiated.	The existence of coordinated systems and/or controls for the disposal of records is evident.	   
Establishment	Authorised disposal authorities and implementation plans established.	The existence of coordinated systems and/or controls for the disposal of records is evident.	   
Capability	Disposal of records actively managed.	The existence of coordinated systems and/or controls for the disposal of records is evident.	   

## Legend

   	absent
   	aware
   	actioned
   	embedded

## General Business Activities

### Planning

#### Initiation

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Recordkeeping is a directive from the Chief Executive to management and staff.	Operational	Evidence supports ratings	Under way	All	Plans in place
2 Systems used to create and manage records are identified.	Operational	Evidence supports ratings	Under way	Some	Undecided

#### Establishment

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Policies that include recordkeeping are documented, implemented and regularly reviewed.	Operational	The draft policies and procedures document for the Ministry of Health was viewed during the onsite audit and provides good coverage. It is expected to be approved as part of the Ministry-wide 2-yearly review of policies.	Under way	All	Plans in place
2 Procedures that include recordkeeping have been documented, implemented and	Operational	Procedures that include recordkeeping are in the Internal	Under way	Most	Plans in place



Audit Findings Report of Ministry of Health  
Year 2013/2014

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
regularly reviewed, including procedures for proving recordkeeping data (metadata) is captured.		Policy: Information and Knowledge Management document that "sets out the behaviours and legislative requirements of the Ministry and its staff with regard to managing public records" (sighted). This document is ready to be implemented along with other policies in the Ministry-wide 2-yearly cycle of policy reviews.			
3 Business-critical records are identified and managed.	Operational	<p>Business critical electronic records are managed by the "failover" solution for Disaster Recovery, i.e. if one server fails, operations are automatically changed to another server.</p> <p>Failover occurs out of Auckland for payment and other business critical systems should a major event in Wellington happen.</p> <p>RATING CHANGE</p> <p>Progress changed from 'Under way' to 'Completed and up to date'</p> <p>Coverage changed from 'Most' to 'All'</p> <p>Intentions to Progress changed from 'Plans in place' to 'Completed'</p>	Completed and up to date	All	Completed
4 A Disaster Recovery Plan and/or Business Continuity Plan includes the management of records.	Operational	Evidence supports ratings	Under way	All	Plans in place

Audit Findings Report of Ministry of Health  
Year 2013/2014

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
5 Core business systems are designed ensuring recordkeeping principles are met.	Operational	The Ministry of Health has not implemented any new systems in recent years. They recently upgraded their Data warehouse which includes metadata and data libraries. There are no unique identifiers for Lotus Notes documents so it is difficult to identify duplicates and latest versions. The draft document Corporate Knowledge Services programme for ECMS - Project brief and Outline Business Case sets out parameters for replacement of Lotus Notes as a core document management system. This document includes business objectives to be compliant with legislation and to improve creation and storage of documents.	Under way	All	Plans in place

Capability

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Recordkeeping risks are included in risk management planning.	Compliance	The Corporate Services risk register cites risks and the likely impact of loss of key knowledge / intelligence within the Ministry of Health. The register	Under way	All	Plans in place

Audit Findings Report of Ministry of Health  
Year 2013/2014

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
		<p>was sighted during the onsite audit. Future amendment/revision will be addressed if the business case for the Enterprise Content Management System (ECMS) is accepted.</p> <p>RATING CHANGE Intentions to Progress changed from 'Undecided' to 'Plans in place'</p>			
2 Organisational strategy/business plan includes recordkeeping objectives.	Strategic	Evidence supports ratings	Under way	All	Completed
3 The Disaster Recovery Plan and/or Business Continuity Plan is regularly tested and reviewed.	Operational	Evidence supports ratings	Under way	Most	Plans in place



## Resourcing

### Initiation

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Management of records is assigned to a position in order to meet recordkeeping requirements.	Strategic	<p>A trainer position has now been filled and assigned to meet recordkeeping requirements within the Ministry of Health.</p> <p>RATING CHANGE Progress changed from 'Under way' to 'Completed and up to date'</p>	Completed and up to date	All	Completed
2 All staff are aware of the recordkeeping requirements of the organisation.	Compliance	<p>There is good documentation for all staff including self paced online learning modules. There is however, no monitoring of how often or how well staff take this up. Anecdotal evidence from users indicates that not everyone gets access to induction training and documentation. The draft policy provides guidance on filing processes. The Ministry of Health's Code of Conduct sets out how and when employees must comply with Ministry policies and business rules.</p> <p>RATING CHANGE Progress changed from 'Under way'</p>	Completed - some out of date	Most	Plans in place

Audit Findings Report of Ministry of Health  
Year 2013/2014

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
		to 'Completed - some out of date' Coverage changed from 'All' to 'Most'			

Establishment

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Staff assigned to recordkeeping have been given the appropriate records management training.	Operational	Some staff have no qualifications but have worked at the Ministry of Health for up to 30 years. Attendance at Archives New Zealand courses were confirmed in documentation provided during the onsite audit.	Under way	All	Plans in place

Capability

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Resourcing and development of staff assigned to recordkeeping is documented and implemented.	Operational	Two performance development plans (sighted) have general statements regarding gaining knowledge and experience in their work. Suggested these are made more specific in future performance development plans to ensure staff have up-to-date knowledge and understanding of legislative and technological changes,	Completed - some out of date	All	Plans in place

Audit Findings Report of Ministry of Health  
Year 2013/2014

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
		especially around the new Public Records Act mandatory standard.			
		RATING CHANGE Progress changed from 'Under way' to 'Completed - some out of date' Intentions to Progress changed from 'Completed' to 'Plans in place'			
2 Annual budget planning considers resourcing and improvement for the recordkeeping requirements within the organisation.	Operational	Evidence supports ratings	Under way	All	Completed



## Training

### Initiation

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 An analysis of training needs and skills of staff assigned to recordkeeping has been conducted.	Operational	Evidence supports ratings	Approved - but not yet started	All	Plans in place

### Establishment

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Staff training is carried out by skilled trainers.	Operational	Evidence supports ratings	Approved - but not yet started	All	Plans in place
2 A training plan which includes recordkeeping is implemented and maintained.	Operational	Evidence supports ratings	Under way	All	Plans in place
3 Staff receive recordkeeping training in: <ul style="list-style-type: none"> <li>• policies, procedures and practices</li> <li>• organisation specific tools and systems</li> <li>• relevant legislation and standards.</li> </ul>	Operational	Evidence supports ratings	Under way	All	Plans in place

### Capability

Question	Risk	Audit Findings	Progress	Coverage	Intentions to
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Audit Findings Report of Ministry of Health  
Year 2013/2014

					Progress
1	Staff recordkeeping training and skills are regularly reviewed.	Operational	Two performance development plans (sighted) showed that training and development is reviewed annually.	Completed - some out of date	Completed
<p>RATING CHANGE</p> <p>Progress changed from 'Under way' to 'Completed - some out of date'</p> <p>Intentions to Progress changed from 'Plans in place' to 'Completed'</p>					
2	Staff are trained to protect and salvage records in an emergency.	Operational	There are no plans to train in-house staff on salvaging records. In an emergency, external salvage experts are used. Staff have a process that includes who to call and what to do. The imminent move to a new building will give the opportunity to review potential for storage away from natural and man-made hazards.	Under way	Plans in place

## Reporting

### Initiation

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 An internal monitoring and compliance programme that includes recordkeeping is developed and implemented.	Reporting	The Legislative Compliance Report for the period 1-7-13 to 31-12-13 was sighted during the onsite audit. It notes the plans for compliance with the Public Records Act in 2014-15.	Under way	All	Plans in place

### Establishment

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Monitoring of recordkeeping compliance is documented and reported.	Reporting	The draft document Corporate Knowledge Services Programme for the Enterprise Content Management System - Project Brief and Outline Business Case (sighted) is a major part of the plan to meet Public Records Act compliance. Progress will be monitored in future Legislative Compliance reports.	Under way	All	Plans in place
2 Managers are accountable for recordkeeping requirements being met and ensuring performance levels are reported.	Reporting	The draft information management policy provides guidance on filing processes. The Ministry of Health's	Under way	All	Plans in place



Audit Findings Report of Ministry of Health  
Year 2013/2014

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
		Code of Conduct sets out how and when employees must comply with Ministry policies and business rules. Accountability needs to be included in managers' performance development plans.			
3 Creation and capture of records is routinely monitored and corrective action taken.	Compliance	The planned Enterprise Content Management System will enable monitoring of creation and capture of electronic records. The physical records are already carefully managed and controlled. The Ministry of Health plans to go digital by 2017.	Under way	All	Plans in place

Capability

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 A systematic assessment of recordkeeping capability is undertaken.	Operational	Evidence supports ratings	Approved - but not yet started	All	Plans in place

## Specific Recordkeeping Practice

### Creation and capture

#### Initiation

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Recordkeeping requirements are identified in business processes and functions.	Compliance	The Policy document (sighted) includes the Public Records Act definition of a record and the statement "all staff ... must create and maintain full and accurate records of the Ministry's business activities in accordance with normal prudent business practice."	Under way	Most	Plans in place
2 Records of all business activities are managed within the appropriate systems.	Compliance	The hardcopy file classification (sighted) reflects the Ministry's past business functions and processes. A new file classification structure has been developed but has not yet been implemented. The draft business case for the Enterprise Content Management System and enterprise search includes taxonomy and metadata management, including auto classification.	Under way	Most	Plans in place

Audit Findings Report of Ministry of Health  
Year 2013/2014

Establishment

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Physical and digital records are captured routinely, documented and organised according to the organisation's business requirements.	Compliance	Evidence supports ratings	Under way	All	Plans in place
2 Decisions around the application of recordkeeping data has been documented.	Operational	Evidence supports ratings	Under way	Most	Plans in place
3 Recordkeeping data describing the context, content and structure of records is documented, communicated, maintained and reviewed.	Operational	Evidence supports ratings	None	All	Plans in place

Capability

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Critical business systems/applications have been identified and mapped to recordkeeping data.	Strategic	Evidence supports ratings	None	All	Plans in place
2 The business classification structure is routinely reviewed for relevance.	Strategic	A new file classification structure has been developed but not yet implemented. The old version will be maintained for historical purposes including the physical files.	Approved - but not yet started	All	Plans in place
3 Disposal authorities are linked to the business classifications structure to enable	Strategic	Evidence supports ratings	Under way	All	Plans in place



Audit Findings Report of Ministry of Health  
Year 2013/2014

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
record sentencing at the time of creation.					

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## Retrievability and security

### Initiation

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Accessibility, usability, retrievability and retention of records is managed within the appropriate systems.	Operational	Accessability, usability and retrievability is limited in Lotus Notes. There is no unique identifier for Lotus Notes documents so it is hard to identify duplicates and any latest versions. The draft document Corporate Knowledge Services programme for the Enterprise Content Management System - Project Brief and Outline Business Case sets out parameters for replacement of Lotus Notes as the core document management system. This document includes business objectives to be compliant with legislation and to improve creation and storage of documents. Plans for Enterprise Search include ability to search across multiple repositories, including shared drives.	Under way	Most	Plans in place

### Establishment

Audit Findings Report of Ministry of Health  
Year 2013/2014

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Recordkeeping systems and storage facilities for physical records are protected from unauthorised access, destruction, theft, fire, flood, earthquake, volcanic eruption and vermin.	Strategic	Physical records are held in a lockable room. Access to the room is restricted when members of the records team are present, and locked when no-one is there. Building security means that there is no unauthorised access out of hours.	Under way	All	Plans in place
2 Sensitive and restricted records are identified, documented and controlled.	Compliance	Secure cabinets for sensitive physical records were sighted during the onsite audit, and a document which showed work that was being done on security in Lotus Notes was also sighted.	Under way	Most	Plans in place
3 Access to sensitive and restricted records is provided in accordance with the: - Official Information Act - Privacy Act - Security in Government Sector (SIGS) Manual - Technical Specifications for the Electronic Recordkeeping Metadata Standard	Compliance	Evidence supports ratings	Under way	Most	Plans in place
4 Records 25 years of age or older are covered by an Access Authority.	Strategic	Evidence supports ratings	Under way	All	Plans in place

Capability

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
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Audit Findings Report of Ministry of Health  
Year 2013/2014

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 The ability to locate records is monitored and routinely audited.	Operational	Evidence supports ratings	Under way	Most	Plans in place

## Maintenance and storage

### Initiation

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 All records and recordkeeping data are managed so they cannot be altered, deleted or disposed of without permission.	Operational	Evidence supports ratings	Under way	Most	Plans in place
2 A risk-based assessment of records storage has been undertaken to ensure records are stored appropriately.	Strategic	Evidence supports ratings	None	All	Plans in place

### Establishment

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Records are reviewed/appraised and stored in accordance with their value and security needs.	Strategic	Evidence supports ratings	Under way	All	Plans in place

### Capability

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 There is a plan for the storage of physical archival value records that meets the	Strategic	A retention and disposal schedule will determine what is of archival value.	None	None	Plans in place

Audit Findings Report of Ministry of Health  
Year 2013/2014

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
requirements of the storage standard.		<p>The retention and disposal schedule has been submitted and is awaiting further consultation.</p> <p>RATING CHANGE Coverage changed from 'All' to 'None' Intentions to Progress changed from 'Undecided' to 'Plans in place'</p>			



## Disposal and transfer

### Initiation

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Core functional records and associated recordkeeping data (metadata) have been appraised and disposal authorities agreed.	Compliance	Evidence supports ratings	Under way	Most	Plans in place

### Establishment

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Classes or groups of records have disposal authorities applied.	Compliance	Evidence supports ratings	Under way	Most	Plans in place
2 Disposal procedures are implemented and reviewed.	Compliance	Evidence supports ratings	Under way	Most	Plans in place
3 All records 25 years of age and over which are still required by the organisation are covered by a deferral of transfer agreement.	Compliance	Evidence supports ratings	Under way	All	Plans in place

### Capability

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
1 Regular and efficient disposal of the	Operational	Evidence supports ratings	Under way	Most	Plans in place

Audit Findings Report of Ministry of Health  
Year 2013/2014

Question	Risk	Audit Findings	Progress	Coverage	Intentions to Progress
organisation's records is planned and documented.					
2 All necessary and practical steps have been taken to ensure the destruction of records is complete.	Compliance	Evidence supports ratings	Under way	All	Plans in place

## RISKS

### Compliance

- Failure to meet legislative and regulatory requirements
- Unlawful disposal of records
- Inability to provide assurance of legislative compliance
- Inability to provide records or provide evidence

### Reporting

- Inability to provide reliable evidence summarising activities or undertakings
- Reduced capability to demonstrate good performance
- Misleading the minister or other key stakeholders

### Strategic

- Loss of records which support New Zealand's cultural and national identity
- Poor strategic planning and poor decisions made on inaccurate information
- Inability to use organisational information and knowledge to full potential
- Constrained business and information management strategies
- Inability to automate processes and to secure efficiency benefits

### Operational

- Inability to transfer data across organisational systems
- Inability to deliver services due to the loss of information
- Inability to retrieve and interpret records in obsolete formats or systems
- Information is inaccessible or unsuitable for the conduct of business
- Inability to provide a record of specific transactions
- Inconsistent, ineffective and inefficient conduct of business

### Reputation

- Embarrassment to the chief executive, minister, the government and individuals
- Damage to reputation, loss of credibility, lowered public confidence



## Storage Standard Checklist for Onsite Audit

Client: Ministry of Health SRO: Barbara Phillips Date: 25 June 2014

This checklist is a tool for managing risks to records in storage. It can be used to assess compliance with the standard. Where a requirement is not met, an organisation must assess and treat the storage risks involved over time.

	YES	NO	Comments
<b>Identification and Control</b> (Applies to all records and archives)			
Records are controlled so that they are able to be identified and retrieved easily, and to prevent damage or loss.	✓		Physical records are stored in a dedicated records room in colour coded folders that are labelled according to the need for access.
Records are identified and registered in a system which controls and allows efficient retrieval.	✓		There is a records tracking system on Lotus Notes
Records are arranged in a meaningful sequence to be easily located and retrieved.	✓		Clearly labelled colour coded folders
Procedures are in place for retrieving, handling and re-shelving of records (including returning records to offsite storage).	✓		Records team use the tracking system to retrieve and re-shelve all records held in the records room
Inactive records of archival value must be identified so that they can be stored appropriately.	✓		MOH is working through the GDAs and using the business DA to identify inactive records of archival value. These records are stored in a separate area of the records room prior to removal to Online Security for off-site storage.
<b>Facilities</b> (Applies to inactive records and archives)			
Records not in active use are stored in a dedicated storage area.	✓		These records are stored in a separate area of the records room prior to removal to Online Security for off-site storage.
Storage areas allow ongoing access to the records by authorised users.	✓		Only the Records team are authorised to access the Records Room
Records are stored in locations which reflect the characteristics of their format and their retention period.	✓		These records are stored in a separate area of the records room prior to removal to Online Security for off-site storage.
The building in which records are stored comply with the New Zealand Building Code that applied at the time of construction and associated codes and standards, and is appropriate for use in storing records. (Building Warrant of fitness)	✓		Current building WOF sighted



# INTERNAL AFFAIRS

Te Tari Taiwhenua

	YES	NO	Comments
The building in which records are stored must have adequate drainage systems to prevent flooding.	✓		Records Room is in the basement and has good drainage. A previous flood on a higher level created a water hazard in the basement but water did not get into the records room. As a precaution a separate audit has recommended that the lower shelves are kept empty of records. I reiterated this recommendation as there are some files still on the bottom shelves as they are being prepared for off-site storage prior to the pending move.
The storage area must be insulated from the climate outside.	✓		Air conditioning unit in the Records room
Storage areas must be protected against internal hazards.	✓		Shelves are bolted to prevent falling
A building maintenance programme must be in place.	✓		This building is about to be vacated for refurbishment
<b>Protection against Disaster</b> (Applies to all records and archives)			
Disaster management programmes are established and maintained to minimise risks.		✓	No disaster recovery plan
Records are located as far as possible from natural and man-made hazards.	✓		
Disaster management plans and procedures are in place, kept current and known to staff.		✓	No disaster recovery plan. There is a process in place to notify Office Services and the Corporate Information Manager if there is a disaster in the records room
Staff who are responsible for records are trained in emergency procedures to protect and salvage the records	✓		The records team has a notification process to use and would call external salvage experts if necessary
There is a comprehensive fire protection system and equipment for the building, in compliance with the New Zealand Building code.	✓		There is a good sprinkler system that is positioned so that it would damage the records if activated.
<b>Security</b> (Applies to inactive records and archives)			
Records are secure against theft, vandalism, misuse, or inadvertent release.	✓		The records room is secure when staff are working in there and locked when no-one is present. Technically an unauthorised person could get into the room but this hasn't ever happened. Given the low risk and as the building will be vacated later in 2014 I didn't recommend that any additional security be added at this time.
Records which contain sensitive or classified information are identified and protected.	✓		File covers are marked with the access authority and written approval. Stored on shelves and accessed via the tracking system. Patient records are stored in unmarked locked cabinets.



# INTERNAL AFFAIRS

Te Tari Taiwhenua

	YES	NO	Comments
Access to records storage are controlled and restricted to authorised staff.	✓		Only the Records team are authorised to access the Records Room. It would be difficult for an unauthorised person to access the records if someone without authority did enter the room
Storage areas are intruder resistant and have an intruder alarm system.	✓		The records room is not totally intruder resistant during working hours. No recommendation for improvement made given that building will soon be vacated for refurbishment. The interim accommodation has intruder resistant records storage (Verbal assurance)
<b>Shelving and Packaging</b> (Applies to inactive records and archives)			
Records are protected through appropriate packaging and shelving or storage equipment.	✓		Lundia shelving and colour coded folders
Records are to be stored using shelving or equipment appropriate to the format and size of the items.	✓		Lundia shelving and colour coded folders
Inactive records of archival value are packaged in containers which are clean, in good condition and appropriate to the format and retention period of the records.	✓		Held at Online Society Services in Archives Security boxes
<b>Environmental Control</b> (Applies to inactive records and archives)			
Records are stored in environmental conditions which will ensure they are preserved for as long as they are required.	✓		Onsite in basement room dedicated to records. Off site at Online Security Services
Records must be stored away from light	✓		Basement room with high windows. No direct sunlight. Records stored in folders on shelves – light cannot get into the actual records
Magnetic media must be stored away from magnetic fields			n/a
Storage areas must be kept clean.	✓		Clean and tidy
Records of short-term value must be stored in conditions which ensure preservation until they are no longer required.	✓		Onsite in basement room dedicated to records in appropriate folders and shelving in a room with low natural light
Inactive records of archival value must be stored in conditions where the relative humidity is never above 60% or below 30%.	✓		At Online Security Services
Inactive records of archival value must be stored in conditions where the temperature is never above 25 degrees centigrade.	✓		At Online Security Services



# INTERNAL AFFAIRS



Te Tari Taiwhenua

	YES	NO	Comments
Archives must be stored in conditions where the relative humidity does not fluctuate by more than 10% in a 24 hour period, or 20% in a year.	✓		At Online Security Services
Archives must be stored in conditions where the temperature does not fluctuate by more than 4 degrees centigrade over a 24 hour period, or 10 degrees centigrade over a year.			At Online Security Services
Environmental conditions for records of archival value must be regularly monitored and records of monitoring must be kept.			At Online Security Services

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Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
<b>1. Governance</b>							
This class covers the records relating to the advising the Minister, development of government policy and providing policy advice, servicing ministerial advisory committees and internal Ministry decision making.							
1.1	<b>Policy / Strategy Development</b> Covers the development, review and providing input into health policy and strategy						
	1.1.1	<b>Policy / strategy development</b> - records relating to the development of government policy, strategy and standards relating to health	White papers, Research papers, National policy statements Strategy documents National standards Includes working papers, discussion documents, think pieces, drafts, legal advice and finals	Date of last action	10 years	A - Transfer to Archives NZ	DA399
	1.1.2	<b>Consultation</b> - with external parties / stakeholders as part of the policy / strategy development and review process	Public consultation documents, Submissions received (whether from other government agencies, stakeholders or members of the public)	Date of last action	10 years	A - Transfer to Archives NZ	DA399
	1.1.3	<b>Research and analysis</b> - records collected for research and analysis which support the development of policy / strategy	Background research material gathered specifically for the purpose of policy development activities	Date of last action	10 years	D - Destroy	DA399
	1.1.4	<b>Policy / strategy development other agency lead</b> - policy development and/or review records where another agency is the lead agency, but the Ministry provides input	Copies of policy / strategy documentation from other agencies Ministry of Health submissions	Date of last action	5 years	D - Destroy	DA399
1.2	<b>Legislation Development</b> Covers the development and / or review of legislation and regulations						



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	1.2.1	<b>Legislation development process</b> - documenting the process of creating or designing legislation or revising existing legislation either within the Ministry or with external stakeholders	Reports Consultation drafts Working papers Legal advice and finals Related correspondence Drafting instructions	When legislation enacted or regulations and deemed regulations accepted	10 years	A - Transfer to Archives NZ	DA399
	1.2.2	<b>Legislation consultation</b> - records created during consultation for legislation, which is conducted by the Health Minister	Submissions Correspondence with submitters	Date of last action, e.g.: When project is completed	5 years	D - Destroy	DA399
	1.2.3	<b>Legislation consultation summaries and reports</b>	Advisory group minutes Submission logs/registers Summaries of submissions Final reports and recommendations	Date of last action, e.g.: When project is completed	10 years	A - Transfer to Archives NZ	DA399
<b>1.3 Advising the Ministers</b>							
	1.3.1	<b>Reports to Ministers</b> - including portfolio reporting, health reports and weekly reports to the Minister (excludes Parliamentary and Cabinet office records which are covered by GDA6 2.0.0)	Development of Cabinet papers Ministerial briefing papers Portfolio reports Health reports Weekly reports to the Minister Aides memoire	Date of last action	10 years	A - Transfer to Archives NZ	DA539
	1.3.2	<b>Responses to queries</b> - Provide responses in relation to queries from the Minister and Government	Ministerial queries (excluding routine queries on behalf of the public - refer 1.3.4) Briefing requests Waitangi Tribunal claims	Date of last action	10 years	A - Transfer to Archives NZ	
	1.3.3	<b>Crown entity oversight</b> - Oversight of health related crown entities including Pharmac and New Zealand Blood Service	Reports to Minister Correspondence with agencies Comments on and reviews of Statements of Intent, annual plans, etc. Board membership	Date of last action	10 years	A - Transfer to Archives NZ	
	1.3.4	<b>Routine ministerials and parliament questions</b>	Public enquiries via the Minister Questions from Parliament	Date of last action	2 years	D - Destroy	



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
1.4	<b>Committee Management</b> Covers records relating to Ministerial Committees, and attendance at committees where MoH is not the lead agency						
	1.4.1	<b>Committee meetings where the Ministry is lead agency</b> - Covers substantive papers. Includes Ethics Committees, National Health Board, Health regulatory authorities	Agendas and minutes Papers High level committee correspondence	Date of last action	10 years	A - Transfer to Archives NZ	DA399
	1.4.2	<b>Committee meetings where the Ministry is not the lead agency</b> - Covers substantive papers	Agendas and minutes Papers	Date of last action	2 years	D - Destroy	
	1.4.3	<b>Applications processed by a Ministry led Committee</b>	Applications that are considered by the Committee (e.g. Ethics Committee) Subsequent amendments to the application	Date of last action	10 years	A - Transfer to Archives NZ	
1.5	<b>Executive and Group Management</b> Covers records related to executive meeting and committees that make decisions on internal MoH matters						
	1.5.1	<b>Meeting documents</b> Documentation that provides and official record of all Executive leadership, committees and group management meetings	Agendas Minutes Reports and decisions	Date of last action	10 years	A - Transfer to Archives NZ	DA339
	1.5.2	<b>Accountability tracking</b>	Databases tracking that accountabilities are being fulfilled Quality monitoring of outputs created	Date of last action	2 years	D - Destroy	
1.6	<b>International Relations</b> Covers records that cover working with strategic international bodies, including attendance at conferences, conventions and forums						

Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	1.6.1	<b>Attendance / visits administration</b> records of attendance at conferences and visits to New Zealand by international delegates	Travel arrangements Itineraries Conference brochures Register of gifts given to delegates or visitors Presentations by non-ministry delegates	End of calendar year	10 years	D - Destroy	DA339
	1.6.2	<b>Attendance / visits activities</b> - records of attendance at conferences and visits to New Zealand by international delegates	Correspondence with delegates Reports of visits Briefing notes Meeting minutes Presentations by Ministry staff	End of calendar year	10 years	A - Transfer to Archives NZ	DA339
	1.6.3	<b>International body participation</b> - records of the establishment and membership of the international body	Terms of reference Nominations and appointments Correspondence with other member bodies or organisations	End of calendar year	10 years	A - Transfer to Archives NZ	DA339
<b>1.7 Ministry Planning and Accountability</b> Covers reporting on Ministry performance, including the preparation and distribution of accountability documents.							
	1.7.1	<b>The Ministry's strategy and business plan</b> Strategic documentation relating to directional positioning of the Ministry	Strategic plans Scoping documents Briefings Official correspondence with the Minister	Date of last action	10 years	A - Transfer to Archives NZ	DA399
	1.7.2	<b>The Ministry's performance reports</b> - for ELT consideration	Monthly reports Four monthly reports Business plans	Date of last action	10 years	A - Transfer one copy to Archives NZ (Note: destroy duplicate copies except where these have been extensively annotated by Ministry staff)	



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
<b>2. Administration &amp; Corporate</b>							
Includes those records managed Corporately that are not covered by the Archives NZ GDAs. Also covers those records that support the general administration and operation of the Ministry.							
<b>2.1</b>	<b>Relationship Management and Liaison</b> This class covers records documenting high-level relationships, liaison and collaboration with other agencies and/or organisations where it is not covered by other classes						
	2.1.1	<b>Relationships and partnerships</b> - high-level strategic records documenting the relationship with Crown agencies and other organisations (New Zealand and international)	High level strategic relationship management records only Memorandum of understanding Services agreement	Date of last action	10 years	A - Transfer to Archives NZ	DA539
	2.1.2	<b>Routine relationship management</b> - records of a routine administrative nature	Routine administrative records Routine internal memos Contact details	Date of last action	2 years	D - Destroy	DA539
	2.1.3	<b>Communities of practice</b> - collaboration on topics e.g. regional training hubs	Agendas Meeting minutes	Date of last action	5 years	D - Destroy	
	2.1.4	<b>Cross government agency meeting papers where the Ministry is lead agency</b> - formal records of the cross government agency meetings including those related to programmes	Agendas Meeting minutes	Date of last action	10 years	A - Transfer to Archives NZ	DA539
	2.1.5	<b>Cross government Agency Meeting Papers where the Ministry is not the lead agency</b> - formal records of the cross government agency meetings	Agendas Meeting minutes	Date of last action	5 years	D - Destroy	
	2.1.6	<b>Meeting administration</b> - records that relate to the administration of meetings.	Meeting schedules Meeting invitations Organising travel	Date of last action	1 year	D - Destroy	



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
2.2	<b>Project Management (projects over \$500,000)</b> This class covers records documenting the project management activities that are carried out within the Ministry as part of health policy, legislation, programme, development or implementation projects, where the total cost of the project exceeds \$500,000.						
	2.2.1	<b>Project development, design and methodology</b> - in developing / implementing health policy, legislation,	Project conceptual framework Project terms of reference Pilot/trial design	Date of last action e.g. when project completed and	10 years	A - Transfer to Archives NZ	DA399
	2.2.2	<b>Project administration</b>	Project financial monitoring Project budget management Project and meeting/working	Date of last action e.g. when project completed and	7 years	D - Destroy	DA399
	2.2.3	<b>Project deliverable development</b> - records created as part of the process to develop the final deliverable	Discussion documents Briefing papers Reports to Board	Date of last action e.g. when project completed and	10 years	A - Transfer to Archives NZ	DA399
	2.2.4	<b>Project deliverable finals</b> - final versions of the project output	Final documentation for project deliverable, e.g. reports, recommendations,	Date of last action e.g. when project completed and	10 years	A - Transfer to Archives NZ	DA399
2.3	<b>Project Management (projects under \$500,000)</b> This class covers records documenting the project management activities that are carried out within the Ministry as part of health policy, legislation, programme, development or implementation projects, where the total cost of the project is under \$500,000.						
	2.3.1	<b>Project development, design and methodology</b> - in developing / implementing health policy, legislation, programmes	Project conceptual framework Project terms of reference Pilot/trial design Communication strategy Budget bids	Date of last action e.g. when project completed and signed off	10 years	D - Destroy	
	2.3.2	<b>Project administration</b>	Project financial monitoring Project budget management Project and meeting/working group/project group administrative arrangements and correspondence	Date of last action e.g. when project completed and signed off	7 years	D - Destroy	

Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	2.3.3	<b>Project deliverable development</b> - records created as part of the process to develop the final deliverable	Discussion documents Briefing papers Reports to Board Working papers Legal advice and opinions	Date of last action e.g. when project completed and signed off	10 years	D - Destroy	
	2.3.4	<b>Project deliverable finals</b> - final versions of the project output	Final documentation for project deliverable, e.g. reports, recommendations, programme, and implementation plans	Date of last action e.g. when project completed and signed off	10 years	D - Destroy	
<b>2.4 Ministry Publications</b> This class applies to all Ministry operational publications, which are released to a limited audience, unless they are separately described under another class. It does not apply to publications which are deposited with the National Library under the Legal Deposit programme							
	2.4.1	<b>Publications developed as part of policy, research, design, development or implementation projects</b>	Official discussion documents, final reports etc.	Date of last action	10 years	A - Retain one copy as Public Archive (Note: Destroy duplicate copies except where these have been extensively annotated by MOH staff)	
<b>2.5 Emergency Management within the Ministry</b> Covers emergency management planning, including business continuity management, incidents and exercises, and operating the National Health Coordination Centre within the Ministry.							
	2.5.1	<b>Emergency management - Administration</b>	Routine correspondence Routine internal memos Routine meetings Contact lists	Date of last action	2 years	D - Destroy	DA262



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	2.5.2	Emergency management and Contingency planning - working	Working papers for: - the Ministry's emergency plans - Business continuity plans Needs analysis	Date of last action	2 years	D - Destroy	DA262
	2.5.3	Emergency management and Contingency planning - finals	Final Ministry emergency plans Business continuity plans National Health processes and procedures	Once superseded	5 years	D - Destroy	
	2.5.4	Emergency management - Incidents and exercises	Ministry emergency incidents, (e.g. pandemic incidents managed at a national level) Ministry emergency exercises to prepare for national incidents	Date of last action	7 years	D - Destroy	



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
<b>3. MANAGE AND SUPPORT HEALTH SECTOR</b>							
Covers records related to the Ministry acting on behalf of the Minister to advise, fund, monitor and improve the performance of health sector Crown entities and District Health Boards (DHBs), which are responsible for the health of their local communities							
<b>3.1</b>	<b>DHB Planning and Guidance</b>						
	This class covers records related to the Ministry providing guidance and setting annual expectations for District Health Boards (DHBs).						
	3.1.1	<b>DHB board membership</b> - nominations sent to the Minister	Nominated appointments High level correspondence with nominators and nominees	Date of last action	10 years	A - Transfer to Archives NZ	
	3.1.2	<b>DHB board issues monitoring</b> - raised and dealt with by the DHB Boards	Issue tracking	Date of last action	7 years	D - Destroy	
	3.1.3	<b>Service planning for DHBs</b> - modelling and planning around the services to be delivered by the DHBs	Capacity modelling Long term Planning Framework National Service Improvement Plan Regional planning Guidance Service level planning Service Simulation modelling	Date of last action	10 years	A - Transfer to Archives NZ	
	3.1.4	<b>DHB planning and accountability</b> - planning and reporting documents created by DHBs	DHB Annual Plans Statement of intent DHB Annual Reports Letters of expectation	Date of last action	10 years	D - Destroy	Belong to DHB
	3.1.5	<b>Guidance and processes for planning and funding</b> - processes and guidelines issued to DHBs around planning, funding, monitoring and analysis of services	Planning package, Accountability documents such as Crown Funding Agreement, Financial Information guidelines, standards and templates, Data dictionary and governance, Service charge rules, principles and processes for DHBs	Date of last action	10 years	A - Transfer to Archives NZ	
	3.1.6	<b>DHB service coverage and specifications</b> - created by the Ministry for each DHB	Service specifications Service coverage	Date of last action	10 years	A - Transfer to Archives NZ	

Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	3.1.7	Statutory monitoring of DHBs & crown entities bargaining	Agreements Checklists Reports	Date of last action	10 years	A - Transfer to Archives NZ	
3.2	DHB Funding						
	3.2.1	DHB funding management - Records documenting the administration and the distribution of funds to DHBs	Electives initiatives funding Private Public partnership Allocating funding to the DHBs	Date of last action	10 years	A - Transfer to Archives NZ	
	3.2.2	DHB pricing and benchmarking - records of reviews of the costs incurred and how this impacts productivity and efficiency. Includes modelling and analysis work	Cost utilisation model results / reporting Productivity and efficiency analysis results / reporting	Date of last action	10 years	A - Transfer to Archives NZ	
3.3	DHB Reporting, Monitoring and Performance Management						
	This class covers the monitoring and reporting on DHB performance against health priorities, including						
	3.3.1	Performance monitoring of DHBs - covers performance monitoring of each DHB as well as the services provided by DHBs	Published reports on the performance of DHBs (not deposited with National Library under legal deposit)  Reporting on performance of DHB provided services Analysis of services results / reporting	Date of last action	10 years	A - Transfer to Archives NZ	DA399
	3.3.2	Performance monitoring of DHBs - source data only	Source data that was used to create the reports in 3.3.1	Date of last action	10 years	D - Destroy	
	3.3.3	Performance management of DHBs- Records that cover the performance management undertaken for DHBs not performing	Reports	Date of last action	10 years	A - Transfer to Archives NZ	



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
3.4	<b>Data Collections</b> This class covers records including raw data collected, processes for managing the data, the raw media used to collect the data and the management of classification tables.						
	3.4.1	Data collections - data collected from and about Health sector	Hard-copy datasets, registers Data held in databases National collections Database specifications Installation documentation Metadata information Code books Information about samples	Until no longer required for research or analysis	When superseded	D - Destroy	DA399
	3.4.2	Data collection management and processing policies and procedures	Policies Procedures Standards Specifications User requirements Business rules Technical documentation	Until no longer required for research or analysis	When superseded	A - Transfer to Archives NZ	DA399
	3.4.3	Raw media for collecting data - completed collection instruments/returns of data from or about health sector (electronic or paper)	Survey returns Questionnaire returns Online form returns	Once entered in database and verified and analysis completed	5 years	D - Destroy	DA399
	3.4.4	Management of code tables - used for classifying data for the national collections	Purchase Unit Data Dictionary Common counting standards	Date of last action	10 years	A - Transfer to Archives NZ	DA399
3.5	<b>Analysis of Health Data</b> This class covers analysing health data, including national population health surveys. Also includes the epidemiology of health-events, health-characteristics and their causes or influences in specific populations.						
	3.5.1	Adhoc requests and responses - for health related data	Enquiries and responses	Date of last action	1 year	D - Destroy	DA399



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	3.5.2	<b>Data analysis working records</b> - includes customised and standing order requests	Extracted datasets Spread sheets Database reports / output Data models Data cubes	When final report produced	Until no longer required for research or analysis	D - Destroy	DA399
	3.5.3	<b>Data analysis documentation</b> - records of how analysis is carried out	Rules, guidelines, and documentation created to support the analysis	When datasets no longer in use	10 years	A - Transfer to Archives NZ	
	3.5.4	<b>Data analysis reports</b> - development	Drafts and iterations Peer review	When final report produced	2 years	D - Destroy	DA399
	3.5.5	<b>Data analysis reports</b> - finals (excluding publications - see Administration & Corporate class)	Fact sheets Reports	Date of last action	10 years	A - Transfer to Archives NZ	DA399
	3.5.6	<b>Quality control of coding and data</b>	High level correspondence regarding quality issues Review reports	Date of last action	2 years	D - Destroy	
<b>3.6 Programme Establishment and Monitoring</b> This class covers the records relating to the establishment of Ministry run health programmes as well as the on-going monitoring and evaluation of them.							
	3.6.1	<b>Programme establishment</b> - records documenting the establishment of a new health programme	Discussion documents White papers Research papers, think pieces, Related correspondence	Date of last action	10 years	A - Transfer to Archives NZ	DA539
	3.6.2	<b>Formal monitoring and evaluation</b> - formal reports covering the monitoring and evaluation of services / programmes	Formal monitoring reports Independent external monitoring reports Programme audit reports.	Date of last action	10 years	A - Transfer to Archives NZ	DA539
	3.6.3	<b>Adhoc reporting</b> - occasional reporting records prepared to support internal inquiries, policy development or monitoring	Adhoc programme monitoring and evaluation reports. Statistical reports or analysis.	Date of last action	10 years	D - Destroy	DA539

Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
<b>3.7 Implement Health Services</b> This class covers implementing strategies, policies and legislation/regulations based on specific health and disability topics, programmes or projects, including those for ethnic and population groupings, (e.g. Maori, older people), and disease types (e.g. communicable diseases, cardiovascular diseases)							
	3.7.1	<b>Clinical leadership</b> - providing clinical input, advice, guidelines, codes and network meetings	Correspondence relating to the provision of advice and guidance Network meeting records Code tables	Date of last action	10 years	A - Transfer to Archives NZ	
	3.7.2	<b>Overview clinical issues</b>	Issues papers Meeting records	Date of last action	10 years	A - Transfer to Archives NZ	
	3.7.3	<b>Complaints, issues and enquiries specific to service</b>	Complaints correspondence including responses, Reporting against complaints Issues identified for a service Enquiries from the public about a service	Date of last action	5 years	D - Destroy	DA539
<b>3.8 Implement National Health IT</b> This class covers providing leadership for the health and disability sector on the implementation and use of information systems.							
	3.8.1	<b>Grant administration</b> - of grants that support the implementation of a number of primary healthcare, and integrated care, health IT solutions	Records of the process Calculating payments Making payments	When proposal round completed	7 years	D - Destroy	DA399
	3.8.2	<b>Grant successful proposals</b>	Successful proposals Related correspondence	When proposal round completed	7 years	D - Destroy	DA399
	3.8.3	<b>Grant unsuccessful proposals</b>	Unsuccessful proposals Related correspondence	When proposal round completed	6 months	D - Destroy	DA399
	3.8.4	<b>Grant procedures and guidelines</b>	Procedures, guidelines and standards Criteria for selection	When superseded	10 years	A - Transfer to Archives NZ	DA399
	3.8.5	<b>Grant selection</b> - records of the selection process for selecting the grant recipient	Evaluation documents Report on selection process Report on successful applicants	When proposal round completed	10 years	A - Transfer to Archives NZ	DA399



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	3.8.6	<b>Review business cases for investments</b> - review business cases for IT investment over \$500,000 in the health sector, submitted by the Ministry, DHBs and subsidiaries	Business case submitted by applicant Decisions and approvals	Date of last action	10 years	A - Transfer to Archives NZ	DA399
	3.8.7	<b>Review advanced notice for investments</b> - receiving advance notices and providing advice for investments in Health sector	Advanced notice received from applicant Advice provided to applicant Related correspondence	Date of last action	7 years	D - Destroy	
	3.8.8	<b>Reviewing investments in health sector</b> - Updates and review of approved projects	Project update reports Review reports	Date of last action	7 years	D - Destroy	
	3.8.9	<b>National and regional IT planning</b> - finals (excluding publications - see Administration & Corporate class)	National Health IT Plan Regional service plans	Date of last action	10 years	A - Transfer to Archives NZ	
<b>3.9 Health Sector Emergency Management</b>							
This class covers provision of support to the health sector for emergency management planning and coordination of incident							
	3.9.1	<b>Emergency management Administration</b>	Routine internal memos Contact lists	Date of last action	2 years	D - Destroy	DA262
	3.9.2	<b>Health sector capability training</b> , Training provided to sector	Training materials Correspondence regarding training provision Training plans	Date of last action	7 years	D - Destroy	
	3.9.3	<b>Emergency management plans</b> - working papers where the Ministry is the lead	Working papers for national health emergency plans	Date of last action	2 years	D - Destroy	DA262
	3.9.4	<b>Emergency management plans</b> - finals where the Ministry is the lead	National health emergency plans	Once superseded	10 years	A - Transfer to Archives NZ	
	3.9.5	<b>Other emergency management plans</b> - where the Ministry is not the lead	Emergency plans - these would be copies held for reference purposes	When superseded	2 years	D - Destroy	
	3.9.6	<b>Emergency Management</b> - Incidents and exercises with the sector	Health sector exercises Interagency exercises Incident records	Date of last action	7 years	D - Destroy	



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
3.10	<b>Processing and Payments</b> This class covers agreement administration, entitlement management, registration management, claims and invoice processing, customer enquiry and payment processing services						
	3.10.1	<b>Agreement administration</b> - creation and administration of funding agreements between health funding organisations and health providers	Funding agreements created on behalf of health funder and health providers	End of financial year	7 years	D - Destroy	DA399
	3.10.2	<b>Entitlements administration</b> – capture and tracking health care users' health care entitlement and usage.	Forms received Related correspondence	End of financial year	7 years	D - Destroy	DA399
	3.10.3	<b>Claims, invoice and register processing</b> – receipt, validation and calculation of claims, invoices and registers, and the capture of clinical data from claims	Claims Invoices Registers Clinical data	End of financial year	7 years	D - Destroy	
	3.10.4	<b>Payments processing</b> – manage the payment of funds on behalf of the Ministry and the District Health Boards	Payment records	End of financial year	7 years	D - Destroy	
	3.10.5	<b>Auditing and investigations of payments</b>	Audits of payments made Correspondence relating to audit, Related material	End of financial year	7 years	D - Destroy	DA262
	3.10.6	<b>Customer service management</b> – handling queries and service requests from funders, providers and health care users	Related correspondence Contact details	Date of last action	2 years	D - Destroy	
	3.10.7	<b>Analysis and reporting</b> - contract, clinical, performance analysis and financial reporting to funders and health providers, and to the National Health Information and Data collections	Performance analysis Financial reporting	End of financial year	7 years	D - Destroy	

Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
3.11	<b>Workforce Planning and Development</b> This class covers records in relation to leading and co-ordinating the planning and development of initiatives to recruit, retain and develop the health workforce in all specialities and other areas.						
	3.11.1	<b>Workforce development planning and forecasting</b> - working papers	Drafts Data analysis Data models	Date of last action	3 years	D - Destroy	DA399
	3.11.2	<b>Workforce development planning and forecasting</b> - finals	Reports Briefing notes/papers	Date of last action	10 years	A - Transfer to Archives NZ	DA399
	3.11.3	<b>Research and evaluation</b> - Records created as a result of researching new possibilities. E.g. Innovative placements, new roles and scopes	Submissions Meeting minutes	Date of last action e.g. when project completed and signed off	5 years	D - Destroy	DA399
	3.11.4	<b>Research and evaluation</b> - Summaries and reports	Summaries of feedback/consultation Final reports and recommendations	Date of last action e.g. when project completed and signed off	10 years	A - Transfer to Archives NZ	DA399
	3.11.5	<b>Successful applications for training schemes</b> - Advanced Training Fellowship (ATF) scheme, etc.	Successful applications Related correspondence	When applicants training is complete	7 years	D - Destroy	DA399
	3.11.6	<b>Unsuccessful applications for training schemes</b> - Advanced Training Fellowship (ATF) scheme, etc.	Unsuccessful applications Related correspondence	When training commences	1 year	D - Destroy	DA399
	3.11.7	<b>Training scheme selection and administration</b> - Advanced Training Fellowship (ATF) scheme, etc.	Evaluation of applications Report on selection process Report on successful applicants Enquiries regarding scheme	Date of last action	2 years	D - Destroy	DA399
	3.11.8	<b>Voluntary bonding scheme</b> - administration	Meeting documents Financial records Membership Processing registrations Correspondence with bonded individuals	Date of last action e.g., end of round	7 years	D - Destroy	



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	3.11.9	Voluntary bonding scheme - registrations of interest	Completed registration of interest forms Related correspondence	Date of last action e.g., end of round	5 years	D - Destroy	
	3.11.10	Education and training initiatives - covers the deliverables from education and training initiatives (excludes collaboration which is covered by class 2.1)	Reports Regional training plans Resources developed for rollout Research outcomes	Date of last action	7 years	D - Destroy	



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
<b>4. PURCHASE HEALTH SERVICES</b>							
Covers records related to purchasing health support services on behalf of the Crown, including public health interventions, disability support, and screening, maternity and ambulance services							
4.1	<b>Contract Management and Purchasing</b> This class covers records regarding managing contracts and purchasing for services and initiatives within the health sector, including service development and procurement plans.						
	4.1.1	<b>Planning</b> - records of the planning to procure the service	Procurement plans Issues planning	Date of last action	10 years	A - Transfer to Archives NZ	
	4.1.2	<b>Procurement</b> - records of the specification and purchase documentation issued to potential providers	Service specifications Purchase documentation	Date of last action	10 years	D - Destroy	
	4.1.3	<b>Evaluation of providers</b> - selection of provider to provide the service	Evaluations Report on selection process Report on successful provider	Date of last action	10 years	A - Transfer to Archives NZ	DA539
	4.1.4	<b>Provider Contracts Significant</b> - records covering the set up and on-going management of provider contracts that are assessed as exposing the Ministry to high risk or have a value of \$15m+ over their life	Substantive drafts and final signed version of contracts, correspondence about the contract, variations to contracts with providers	From date when provider ceases to be actively engaged /contracted	10 years	A - Transfer to Archives NZ	
	4.1.5	<b>Provider Contracts Ordinary</b> - records covering the set up and on-going management of provider contracts not assessed as high risk and have a value less than \$15m over their life	Drafts and signed version of contracts, correspondence about the contract, variations to contracts with providers	From date when provider ceases to be actively engaged /contracted	10 years	D - Destroy	
	4.1.6	<b>Provider relationship management</b> - records documenting the on-going working relationship between the provider and the Ministry	Meeting minutes Directives High level relationship management records Issue resolution	From date when provider ceases to be actively engaged /contracted	10 years	D - Destroy	DA539

Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	4.1.7	<b>Provider routine operational records</b> - records of a routine nature managing day today operations with providers	Routine Correspondence with the provider	From date when provider ceases to be actively engaged /contracted	10 years	D - Destroy	DA539
	4.1.8	<b>Performance monitoring</b> - records that document the monitoring of the providers performance	Performance management reports Quality management	From date when provider ceases to be actively engaged /contracted	10 years	D - Destroy	
	4.1.9	<b>Contract renewal</b> - renew the contract with the existing provider	Records document the agreement to renew the contract	From date when provider ceases to be actively engaged /contracted	10 years	D - Destroy	
	4.1.10	<b>Complaints about providers</b>	Complaints received from the public Disability complaints Reports	From date when provider ceases to be actively engaged /contracted	10 years	D - Destroy	
	4.1.11	<b>Complaints to Health Commissioner</b>	Health commissioner complaints Reports	From date when provider ceases to be actively engaged /contracted	10 years	A - Transfer to Archives NZ	
	4.1.12	<b>Provider quality management and auditing</b> - Quality investigations and audit records prepared by Ministry staff of providers as part of formal auditing activities	Reports prepared as part of formal auditing programme Investigation reports	Date of last action	10 years	A - Transfer to Archives NZ	DA539
	4.1.13	<b>Notification of events</b> - records that document events requiring attendance by Ministry officials and / or further investigation (see also 4.2.9)	Notifications of events by providers	From date when provider ceases to be actively engaged /contracted	10 years	D - Destroy	



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
<b>5. IMPLEMENT AND ENFORCE LEGISLATION</b>							
Covers records related to administering, implementing and enforcing legislation and regulations on behalf of the Crown.							
<b>5.1</b>	<b>Legislation Advice</b>						
	Covers providing advice in relation to legislation and associated regulations						
	5.1.1	<b>Legislation advice - significant</b> process of providing advice in relation to legislation and associated regulations that affects policy	Briefing notes Minutes Reports related, high level correspondence	Date of last action	10 years	A - Transfer to Archives NZ	DA399
	5.1.2	<b>Legislation advice - routine</b> process of providing advice in relation to legislation and associated regulations that is routine and does not affect policy	Briefing notes Minutes Reports	Date of last action,	5 years	D - Destroy	DA399
	5.1.3	<b>Providing internal advice</b>	Reports	Date of last action	5 years	D - Destroy	
<b>5.2</b>	<b>Provider Regulations</b>						
	This class covers certification of health care services, overseeing the distribution chain of medicines and controlled drugs, as well as radiation and radioactivity.						
	5.2.1	<b>Regulatory instruments (e.g. licences, certificates, designations, consents) -</b> including applications, decisions, notifications and copies of the regulatory instruments	Applications for a regulatory instruments or a change to a regulatory instrument and supporting documentation, Assessments of applications, including correspondence Decisions by regulatory authorities Notifications of approval of rejection Copies of regulatory instrument documents (e.g. licences, certificates) Records relating the designations of auditing agencies	Licence or approval expires or is revoked	10 years	D - Destroy	DA399



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	5.2.2	Audit of regulated health care providers - working records	Working records related to the audit of regulated health care providers, which will feed into the creation of a final audit report.		Until no longer administratively required	D - Destroy	DA399
	5.2.3	Audit of regulated health care providers - final audit report	Audit report (final) of regulated health care providers Documentation that forms a part of the final audit report	Date of last action	10 years	D - Destroy	
	5.2.4	Reports and correspondence with regulated providers - reports or notifications required under legislation, regulation or as a condition of the regulatory instrument	Incident reports Notifications of change Controlled drug registers Related correspondence from regulated providers	Date of last action	10 years	D - Destroy	
	5.2.5	Complaints about health care providers	Complaints received from the public about domestic health care providers and the actions that were taken	Date the complaint was closed	10 years	D - Destroy	
	5.2.6	Drug abuse containment - investigations, decisions, and reports relating to patients or practitioners with respect to drug abuse containment	Reports in prescribing and dispensing history Correspondence relating to investigations of drug abuse containment Requests for restriction notices Restriction notices Liaising with other authorities (e.g. Police) Copies of authorisations issued by gazetted drug treatment clinics	Date of last action	10 years	D - Destroy	
	5.2.7	Controlled drug prescription and controlled drug destruction forms - ref Misuse of Drugs Regulations 33(20) and 42(1)	Controlled drug prescription forms Reports from providers on the destruction of controlled drugs	Date of the prescription or report	4 years	D - Destroy	
5.3	<b>Mental Health</b> This class covers records documenting the implementation and enforcement of mental health legislation						

Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	5.3.1	Mental health sector monitoring -	Reports to Minister Comments on and reviews of strategic plans, purchase/output Agreements etc. Letters of expectation	Date of last action	10 years	A - Transfer to Archives NZ	
	5.3.2	<b>Special patients</b> - Managing special patients detained under the Mental Health (Compulsory Assessment and Treatment) Act and the Intellectual Disability (Compulsory Care and Rehabilitation) Act	All records regarding detention of patients under forensic circumstances. Includes reports, Leave request forms, Section 45 notices, Court orders, Clinical evaluations, Mental health review tribunal, Transfers Regulatory documents	Date of last action e.g. last date services were provided to individual	20 years	D - Destroy	DA262
	5.3.3	<b>Patient issues (not special patients)</b> - Records documenting significant patient issues and matters of concern	Reportable events reports Coroner's reports Ombudsmen reports & investigations Legal issues Section 95 inquiries, Patient correspondence, PRIMHD data	Date of last action e.g. last date services were provided to individual	20 years	D - Destroy	DA262
5.4	<b>Regulatory functions</b> This class covers administering environmental and border health legislation and regulations, including where roles have been defined in other legislation and for international compliance. Covers regulatory functions such as Public Health, Environmental and Border						
	5.4.1	Survey - raw data	Raw monitoring data Data analysis Correspondence Reviews of drafts	Date of last action	5 years	D - Destroy	DA399
	5.4.2	Survey - summaries and reports	Summaries of data Final reports and recommendations	Date of last action	10 years	A - Transfer to Archives NZ	DA399



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	5.4.3	<b>Licences</b> - Applications, approvals, and Licences covering aspects such as air quality, burial & cremations, medicines control, rest homes, and noise control	Applications Assessments Licences Notification of approval or rejection	Licence expires or is revoked	10 years	D - Destroy	DA399
	5.4.4	<b>Accreditation</b> - Appointment governed by the Health Act	Accreditation of roles such as Health Protection Officers and Water Protection officers. Includes add-ons for biosecurity and hazardous substances. Applications	Date of last action	7 years	D - Destroy	DA325
	5.4.5	<b>Drug evaluation files (non-exceptional)</b>	Correspondence about, and technical enclosures for approved drugs	Date of last action	70 years	D - Destroy	DA166
	5.4.6	<b>Drug evaluation files - withdrawn or not approved</b>	Correspondence about and technical enclosures for drug applications withdrawn or not approved	Date of last action	15 years	D - Destroy	DA166



Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
	5.4.7	Drug evaluation files of exceptional importance	Drug evaluation files that fulfil at least one of the criteria: 1) The drug concerned had been the subject of legal class actions in New Zealand or overseas 2) The drug concerned had been the subject of widespread media attention 3) Approval for marketing the drug in New Zealand was withdrawn by the Ministry of Health on the advice of overseas regulatory authorities 4) Approval for marketing the drug in New Zealand was withdrawn by the Ministry of Health in response to adverse reaction reporting 5) The drug had been administered to a wide cross-section of the population, e.g. meningococcal vaccine	Date of last action	25 years	A - Transfer to Archives NZ	DA166
	5.4.8	Proprietary Ingredients - specific form that include details of colorants or flavours used in formulations of a medicine	Form containing the formulation details of proprietary ingredients used in medicines	When ingredient no longer in use	10 years	A - Transfer to Archives NZ	
	5.4.9	Investigations and reports on issues - where an issue has been raised and needs to be investigated	Reporting on quality issues on medical devices Post market surveillance	Date of last action	10 years	A - Transfer to Archives NZ	
	5.4.10	Complaints and recalls	Correspondence with the public Recall of a medicine, cosmetic or medical device	Date of last action	5 years	A - Transfer to Archives NZ	
	5.4.11	Implement international guidelines	High level correspondence with guideline developers and implementers Reports	Date of last action	10 years	A - Transfer to Archives NZ	

Class	Sub-class	Description of types of records in class	Examples of Records	Trigger Point when retention begins	Minimum Retention period	Disposal Action	Precedent
		Precedents used					
		Precedent Id	Organisation				
		DA539	National Screening Unit				
		DA399	Ministry of Education				
		DA325	Ministry for the Environment				
		DA262	DHB GDA				

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# Appraisal Report

## Functions, Activities and Records Evaluation

### Appraisal Report

#### Functions, activities and records evaluation for Ministry of Health

File/Document ID	
Agency	Ministry of Health
Contact Name and Details	[name removed]
Date	February 2016

#### Purpose

The Ministry of Health (The Ministry) has several existing one-off disposal authorities and records-specific retention and disposal schedules, but no current disposal authority covering all records created, received and maintained. The Ministry has recognised the need for an ongoing disposal authority covering both hard copy and electronic records and has initiated a project to develop an organisation-wide retention and disposal schedule.

In addition, there is wide recognition within the Ministry that the ways in which records are managed over time, to support effective and efficient information access and retrieval of information, need to be documented. There is also a growing need to develop agreed ways in which to identify retention periods for records, with plans to implement new systems for content management in the future.

## Scope

This appraisal report and disposal schedule cover records of all formats created and used by the Ministry, including the regional offices. This schedule will supersede the current New Zealand Medicines and Medical Devices Safety Authority (Medsafe) schedule Disposal Authority (DA) 166, and disposal schedules OP 99/58 for the Crown Company Monitoring Unit, Hospital and Health Services Records, and OP 99/116 for the Health Funding Authority.

A detailed disposal schedule is attached as Appendix 2 to this report, and covers all hard copy and electronic records created, received and maintained by the Ministry.

The scope also covers the those records transferred from the Crown Health Financing Agency, Public Health Commission and Ministry of Youth & Development, as they had no current disposal authorities in place.

The Ministry of Education and District Health Board (DHB) disposal authorities (DA399 and DA262) were considered in developing this report. In addition, the disposal criteria in the Appraisal Statement published by Archives New Zealand were applied.

### Out of Scope

The records for the National Screening Unit are already covered by disposal authority DA539 and are therefore not included within the attached schedule.

## Format

All physical (hard copy) and electronic records created, received and maintained by the Ministry have been considered in the development of this appraisal report.

## Agency and System Information

### Agency information

**Agency name:** Ministry of Health  
**Physical location(s)** Head office in Wellington, in addition to offices in Auckland, Hamilton, Wanganui, Christchurch and Dunedin.  
**Year established:** 1993  
**Year disestablished:** Current

The Ministry is the Government's primary agent in New Zealand's health and disability system, and has overall responsibility for the management and development of that system. As such, the Ministry's job is to improve, promote and protect the health of New Zealanders. Through the Ministry's leadership of the health and disability system it will help ensure New Zealanders live longer, healthier and more independent lives, while delivering on Government priorities.

The Ministry seeks to improve, promote and protect the health of New Zealanders through the following core

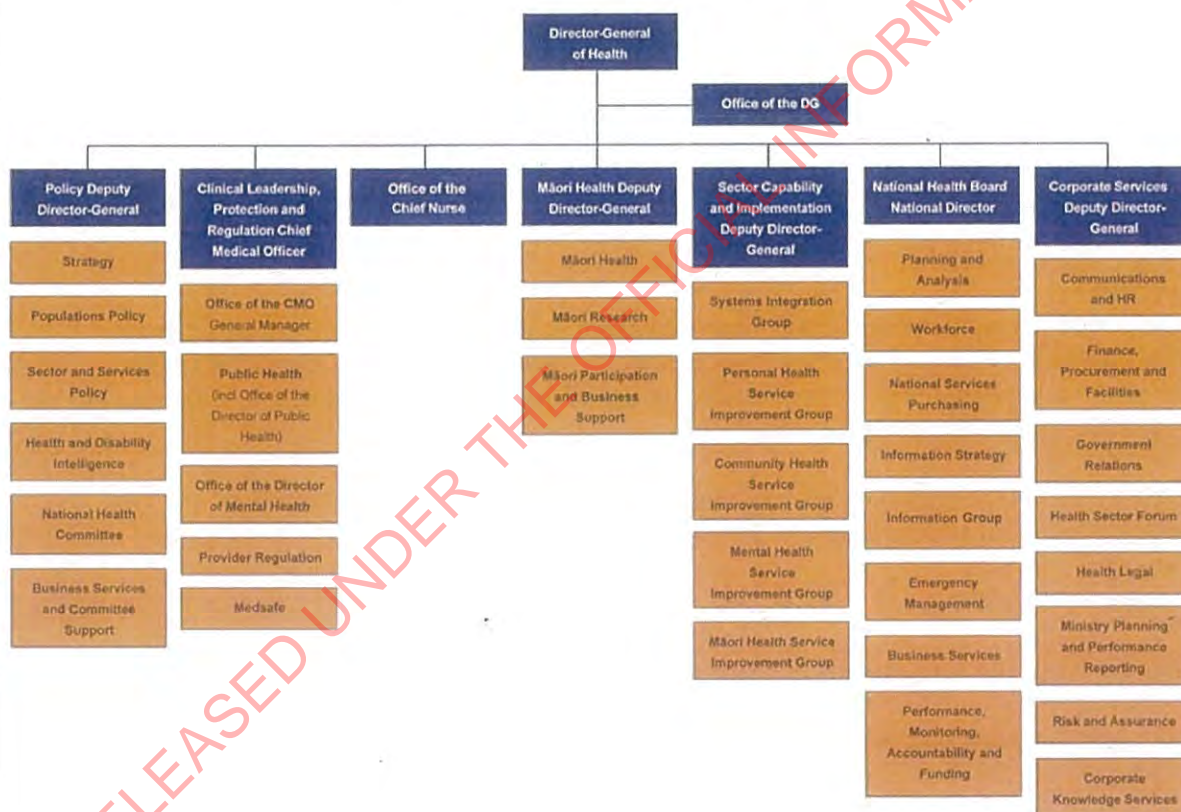


activities and outputs of the Ministry:

- advising the Minister on policy, including advice on improving health outcomes, reducing disparities, ensuring fairness and increasing participation; nationwide planning, co-ordination and collaboration across the sector; and the implementation of the four key strategies currently in place (Health, Disability, Maori Health and Primary Health Care)
- acting on behalf of the Minister to advise, fund, monitor and improve the performance of health sector Crown entities and District Health Boards (DHBs), which are responsible for the health of their local communities
- purchasing health support services on behalf of the Crown, including public health interventions, disability support, and screening, maternity and ambulance services administering, implementing and enforcing legislation and regulations on behalf of the Crown, and meeting legislative requirements
- providing key infrastructural support to the health and disability system, especially through the provision of national information systems and a payments service
- servicing Ministers' offices and ministerial advisory committees.

The following chart shows the way in which the Ministry is organised:

Ministry of Health Organisation Chart



In fulfilling the roles described above, the Ministry draws on internal expertise to provide clinical and technical advice to the Minister, and to the Ministry and the wider sector. Some of these Ministry functions have clinical decision-making and/or statutory responsibilities (such as those that rest with the Director of Public Health).

## System information

### Hardcopy records

Most hard copy records are sent to the Ministry Records team (part of Corporate Knowledge Services (CKS)) for filing, but there will be some records that are held in unofficial repositories (i.e. those which have not been established by, or that are not maintained by CKS. These will be in work areas, or team storage areas within



Ministry offices. Non-current hard copy records are stored with specialist storage providers off-site. The hard copy records are in good condition.

#### **Commercial Storage by linear metres**

The estimated quantity of records held by external storage providers:

Recall = 281 linear metres

Crown = 3,316 linear metres

Online Security Services = 14,832 linear metres

Total estimated hard copy records held offsite: 18,429 linear metres

#### **Onsite by linear metres**

The quantity of records held onsite at Ministry offices:

The Terrace, Wellington = 41 linear metres

Provider Regulations, Wellington = 350 linear metres

Freyberg Building, Wellington = 568 linear metres

Auckland Office = 72 linear metres

Hamilton Office = 68 linear metres

Christchurch Office = 48 linear metres

Dunedin Office = 628 linear metres

Total estimated hardcopy records held onsite (excluding those held in unofficial repositories) = 1,703 linear metres.

#### **Electronic records**

Electronic records are managed within a Lotus Notes database document management system, and in shared drives. The Ministry is currently exploring the update or replacement of their current document management system to a system that is more intuitive to use, and easier for CKS staff to manage, as well as meeting Archives NZ standards.

The estimated quantity of electronic records, including duplicated and housekeeping records:

Lotus Notes and Domino databases = 7915 GB

Mail server = 1135 GB

Web servers = 236 GB

Total estimated electronic records (excluding those stored in unofficial repositories) = 3322 GB

Total estimated electronic records (including those stored in unofficial repositories) = 3.8 TB

## Methodology

### Approach

The following activities were undertaken:

#### Review of Existing Ministry of Health Disposal Authorities

The following Disposal Authorities have already been approved by the Chief Archivist and are in use by the Ministry:

Schedule		Expiry
DA539	National Screening Unit (NSU)	2022
DA526	Mental Health Commission (records created pre 2010)	2017
DA527	Mental Health Commission (records post 2010 and Ongoing)	2017

These schedules have been studied and some cases used as a precedent, along with the following expired schedules:

Schedule		Expiry
OP 99/0116	Health Funding Authority	Expired
OP 99/0058	Crown Company Monitoring Advisory Unit	Expired

### Inventory conducted

An inventory of the records being created and managed by the Ministry was created. This was used in the development of the schedule and appraisal report.

### Taxonomy developed

A foundation taxonomy was developed for the Ministry. The taxonomy was created based on the inventory and was reviewed and validated with Ministry staff. The taxonomy was used to help structure the disposal schedule record classes.

### Examination of existing schedules

An examination was carried out of existing disposal authorities covering the Ministry's functions and activities, and the records resulting from those. In addition, existing schedules of other crown entities, such as the Ministry of Education, were used as a guide in how to deal with legislation, policy, and implementation related records.

The disposal authority was developed in close consultation with Ministry staff. A precedent-based approach was taken in order to benefit from, and be consistent with, existing approved disposal authorities.

### Use of Archives New Zealand's Appraisal Statement

Finally, the Archives New Zealand's Appraisal Statement, 2014 was used in making the evaluation statements for each subclass, to reflect the criteria set in the Appraisal Statement. Those criteria include:

1. **Business value** – records that are fundamental to the ability of a public office or local authority to carry out its business and enable continuity of services to the New Zealand public.
2. **Accountability** – records that are fundamental to providing citizens with trust in government; providing evidence of the well-being of the community and the impact of government activities on them, in compliance with relevant



legislation and regulations.

3. **Rights and Entitlements** – records providing evidence of the legal status and fundamental rights and entitlements of individuals and groups.
4. **Legitimacy of Authority** – records that identify and document the source of authority and foundation of the machinery of government of New Zealand and its public sector bodies.
5. **Te Tiriti o Waitangi / Treaty of Waitangi** – records that provide evidence of recognition and respect for, fulfilment of or aspirations to Te Tiriti o Waitangi / Treaty of Waitangi principles and the Crown's obligations, or in absence of this, evidence of failure to fulfil obligations and/or principles
6. **Knowledge** – Records that will substantially contribute to knowledge and understanding of New Zealand, its history, geography, society, culture and achievements, and New Zealanders' sense of their national identity.

## Consultation

### Internal Consultation

A series of workshops were held in 2012 (when work began on this appraisal report) with Ministry staff based at head office and in the Wanganui and Dunedin offices, to identify the records created and used within the Ministry's processes, including the value of those records to the organisation.

Key staff members were consulted about the disposal actions identified within the draft R&D schedule. This was achieved by holding a series of workshops and individual meetings. Sessions with key staff went well, with good questions being posed and staff being satisfied with the answers provided. As a result of the consultation there were two changes to the draft schedule:

- DHB membership, this record class was changed to having archival value as it includes the justification for membership provided by the Ministry, not just the list of DHB members (see subclass 3.1.1).
- Provider contracts, The volume of contracts with providers is very high and the unit was very comfortable with retaining the majority for only 10 years. However the business suggested that there are a small number of contracts that pose a high potential risk to the Ministry or that are of a high value, and are therefore worth retaining as an archive (see subclass 4.2.1).

### External Consultation

The Ministry's Records team sent the draft schedule and report to external stakeholders for feedback. The external stakeholders consulted can be found in Appendix 1.

The feedback that was received was taken into consideration and where appropriate incorporated into the schedule. As a result the following significant change was made to the schedule:

Analysis Guidelines, this record class was changed to archival value as the records provide context to the analysis reports (see subclass 3.1.5)



Class or class grouping - General
Description
<p>The Ministry's records are held in either hard-copy or electronic format and are administered by the CKS team. Hard-copy and electronic records are managed in formal recordkeeping systems by a common classification structure. The top level headings are:</p> <ul style="list-style-type: none"> <li>• Governance</li> <li>• Corporate Support</li> <li>• Implement and enforce legislation</li> <li>• Manage and support health sector</li> <li>• Purchase health services</li> </ul> <p>However, there are unknown quantities of records (both hard copy and electronic) which reside in unofficial records systems and repositories. Many electronic records are duplicated within Lotus Notes databases, and potentially also in shared drives. It has therefore not been possible to express the quantities or percentages of records for retention or destruction with any confidence, at this time.</p> <p>The Ministry is currently implementing initiatives to improve its recordkeeping processes and systems. This has been initiated because without an approved retention and disposal schedule, it would be very difficult to commence work on sentencing large quantities of records for disposal or transfer.</p> <p>The Ministry's disposal schedule for core records is attached as Appendix 2.</p>
Class or class grouping – MOH1 Governance
Description
<p>The Ministry leads the health sector, providing leadership for health providers and the direction of health in New Zealand.</p> <p>This class covers those records concerning advising the Minister, developing government policy and providing policy advice, servicing ministerial advisory committees and internal Ministry decision-making.</p> <p>Subclasses include:</p> <p><b>Policy / strategy development</b></p> <p>The Ministry provides a service to the Minister in setting policy for the health sector. The records in this class cover the development, review and advice of health policy and strategy. Also included are records documenting consultation with external parties.</p> <p><b>Legislation development</b></p> <p>The Ministry works with the Parliamentary Counsel office to develop and amend acts and regulations. The Ministry also provides key advice to the Health Minister about new health legislation, and captures the reasons that certain characteristics should be included or excluded in legislation reviews.</p> <p><b>Advising the Ministers</b></p> <p>A number of sub-classes contain records of the Ministry providing advice to Ministers including portfolio reporting, health reports (Briefings for the Minister) and weekly management reports. The Weekly Report is free and frank advice provided to the Minister and Associate Ministers of Health. It includes: hot topics, operational issues, regular reporting, cabinet papers overview, ministry publications to be released, OIA requests and new publications from WHO / OECD. The Ministry also has oversight of health related crown entities including Pharmac and New Zealand Blood Service, and a variety of monitoring activities are included.</p>



## Committee management

A number of sub-classes cover records relating to Ministerial health committees, and attendance at committees where the Ministry is the lead agency. Health committees provide the Minister of Health with independent expert advice and offer a forum for representatives of the sector to have a role in decision-making.

Health legislation requires the Minister of Health to establish a number of committees (compulsory committees), and allows for the establishment of other committees (discretionary committees). The Ministry of Health provides secretariat support for the following Ministerial health advisory committees and councils.

- **Advisory Committee on Assisted Reproductive Technology (ACART)** is an independent advisory committee that formulates advice and guidelines for the regulation of assisted human reproduction. ACART is required to undertake extensive public consultation before issuing advice or finalising guidelines.
- **Ethics Committee on Assisted Reproductive Technology** considers and determines applications for assisted reproductive procedures or human reproductive research, and keeps under review approvals previously given. In addition, ECART liaises with ACART and other relevant ethics committees on matters relating to assisted reproductive procedures and human reproductive research.
- **Cancer Control New Zealand** is responsible for making sure New Zealand's Cancer Control Strategy is turned into action. Appointed by the Minister of Health, Cancer Control New Zealand gives strategic advice directly to the Minister and to the wider cancer control community.
- **National Ethics Advisory Committee (NEAC)** provides advice to the Minister of Health on ethical issues of national significance regarding health and disability research and services, and to determine nationally consistent ethical standards and provide scrutiny for research and services.
- **National Health Committee (NHC)** provides the Minister of Health with independent advice on a broad spectrum of health and disability issues. The NHC incorporates the Public Health Advisory Committee, which provides the Minister with public health advice.
- **Mortality review committees** New Zealand's four mortality review committees operate under the umbrella of the Health Quality and Safety Commission (HQSC). They don't report directly to the Minister of Health, but contribute to the wider goals of the HQSC as statutory committees with particular defined quality functions.
- **Child and Youth Mortality Review Committee (CYMRC)** reviews the deaths of children and young people aged 28 days up to 25 years, in order to learn how to prevent such deaths.
- **Family Violence Death Review Committee (FVDRC)** reviews all deaths related to family violence in New Zealand.
- **Perinatal and Maternal Mortality Review Committee (PMMRC)** reviews the deaths of babies and mothers in New Zealand.
- **Perioperative Mortality Review Committee (POMRC)** reviews deaths following any invasive procedure and deaths following anaesthesia (local, regional or general).

## Executive and group management

Records related to executive meeting and committees that make decisions on internal Ministry matters.

## International Relations

The Ministry helps the Government comply with certain international obligations. These records include attendance at conferences, conventions and forums as well as recording international delegations visiting New Zealand.

## Ministry planning and accountability

These sub-classes cover the business planning, internal Ministry strategy and reporting on Ministry performance, including the preparation and distribution of accountability documents.

## Value statement

### Policy / strategy development

As the Ministry is the primary health agency in New Zealand, the records of policy, strategy and legislation development are largely of long term archival value as they provide evidence of core functions and activities performed by the Ministry in the development of public policy.



The records created during the development of policy and strategy are also of long term value as they capture the thinking that led to the development of public policy.

The policy, strategy and legislation consultation records provide evidence of how the Ministry interacted with other health agencies, external parties and stakeholders, in performing its role, and are therefore of long term value because they document the performance of the Ministry.

Records in this subclass which have been recommended for retention as public archives, meet the Appraisal Statement criteria for Accountability and Knowledge.

#### **Legislation development**

The records created as key documents for this advisory role are unique within the New Zealand public service and are therefore considered of long term value. No other agency has this role relating to the development of health legislation. The records contain information relating to: the changing roles and responsibilities within the health sector; the management of public health for New Zealand, and the relationship with territorial authorities in this; managing and containing communicable and non-communicable diseases; the management of conditions posing health risks; managing health emergencies, Border Health protection; and regulated activities.

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, Rights and Entitlements, Legitimacy of Authority, and Knowledge.

#### **Advising the Ministers**

Reporting to ministers and oversight of crown entities provide evidence of the Ministry's involvement in government initiatives, and are therefore considered to be of long term value. Weekly reports are produced for the minister as an alert of upcoming issues, of media interest, and of upcoming cabinet papers etc. The Weekly Report is free and frank advice provided to the Minister and Associate Ministers of Health. It includes: hot topics, operational issues, regular reporting, cabinet papers overview, ministry publications to be released, QIA requests and new publications from WHO / OECD. Records in this subclass which have been recommended for retention as public archives, meet the Appraisal Statement criteria for Accountability, and Legitimacy of Authority.

#### **Committee management**

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability.

#### **Executive and group management**

The substantive executive leadership meeting records and committee meeting records where the Ministry is the lead agency are of long term value as they document the performance of functions of the Ministry.

Records in this subclass which have been recommended for retention as public archives, meet the Appraisal Statement criteria for Accountability.

#### **International Relations**

The substantive records of the Ministry's involvement with strategic international bodies in the health sector contribute to an understanding of the Ministry's interaction with international health authorities and the resulting position on health issues, and are of long term value.

Records in this subclass which have been recommended for retention as public archives, meet the Appraisal Statement criteria for Legitimacy of Authority, and Knowledge.

#### **Ministry planning and accountability**

The strategy, business plans and accountability records are of long term value as they provide evidence of the planning of the Ministry.

Consultations on legislation are managed by the Health Minister and therefore the Ministry only holds duplicates of the original records. Duplicates hold no long term value.

Records in this subclass which have been recommended for retention as public archives, meet the Appraisal Statement criteria for Accountability.

Records recommended for destruction in this class are of operational business value or are captured in summaries elsewhere.



## Retention and disposal recommendation

### Recommended for retention as public archives

Class #	Record class	Description	Trigger Point	Retention Period	Disposal Action
1.1.1	<b>Policy / strategy development</b> - records relating to the development of government policy, strategy and standards relating to health	White papers, Research papers, National policy statements Strategy documents National standards Includes working papers, discussion documents, think pieces, drafts, legal advice and finals	Date of last action	10 years	Transfer to Archive New Zealand
1.1.2	<b>Consultation</b> - with external parties/ stakeholders as part of the policy / strategy development and review process	Public consultation documents, Submissions received (whether from other government agencies, stakeholders or members of the public)	Date of last action	10 years	Transfer to Archive New Zealand
1.2.1	<b>Legislation development process</b> - documenting the process of creating, or designing legislation or revising existing legislation either within the Ministry or with external stakeholders	Reports, Consultation drafts, Working papers, Legal advice and finals, Related correspondence, Drafting instructions	Date of last action	10 years	Transfer to Archive New Zealand
1.2.3	<b>Legislation consultation summaries and reports</b>	Advisory group minutes, Submission logs/registers, Summaries of submissions, Final reports and recommendations	Date of last action	10 years	Transfer to Archive New Zealand
1.3.1	<b>Reports to Ministers</b> - including portfolio reporting, Health Reports and weekly reports to the Minister. (Excludes Parliamentary and Cabinet office records which are covered by GDA 6 2.0.0)	Development of Cabinet papers, Ministerial briefing papers, Portfolio reports, Health reports, Weekly reports to the Minister, Aides memoire	Date of last action	10 years	Transfer to Archive New Zealand
1.3.2	<b>Responses to queries</b> - Provide responses in relation to queries from the Minister and Government	Ministerial queries (excluding routine queries on behalf of the public - refer 1.3.4), Briefing requests, Waitangi Tribunal claims	Date of last action	10 years	Transfer to Archive New Zealand
1.3.3	<b>Crown entity oversight</b> - Oversight of health related crown entities including Pharmac and New Zealand Blood Service	Reports to Minister, Correspondence with agencies, Comments on and reviews of Statements of Intent (SOIs), annual plans, etc. Board membership	Date of last action	10 years	Transfer to Archive New Zealand
1.4.1	<b>Committee meetings where the Ministry is lead agency</b> - Covers substantive papers, includes Ethics committees, National Health Board, Health regulatory authorities	Agendas and minutes, Papers, High level committee correspondence	Date of last action	10 years	Transfer to Archive New Zealand
1.4.3	<b>Applications processed by a Ministry led Committee</b>	Applications that are considered by the Committee (e.g. Ethics Committee) Subsequent amendments to the application	Date of last action	10 years	Transfer to Archive New Zealand

1.5.1	<b>Meeting documents</b> Documentation that provides an official record of all Executive leadership, committees and group management meetings	Agendas, Minutes, Reports and decisions	Date of last action	10 years	Transfer to Archives New Zealand
1.6.2	<b>Attendance / visits activities</b> - records of attendance at conferences and visits to New Zealand (NZ) by international delegates	Correspondence with delegates, Reports of visits, Briefing notes, Meeting minutes, Presentations by Ministry staff	End calendar year	10 years	Transfer to Archives New Zealand
1.6.3	<b>International body participation</b> - records of the establishment and membership of the international body	Terms of reference, Nominations and appointments, Correspondence with other member bodies or organisations	End calendar year	10 years	Transfer to Archives New Zealand
1.7.1	<b>Ministry Strategy and business plan</b> Strategic documentation relating to directional positioning of the Ministry	Strategic plans, Scoping documents, Briefings, Official correspondence with the Minister	Date of last action	10 years	Transfer to Archives New Zealand
1.7.2	<b>The Ministry's Performance reports</b> – for ELT consideration	Monthly reports, Four monthly reports, Business plans.	Date of last action	10 years	Transfer one copy to Archives New Zealand (Note: destroy duplicate copies except where these have been extensively annotated by Ministry staff)

#### Recommended for destruction

Class #	Record class	Description	Trigger Point	Retention Period	Disposal Action
1.1.3	<b>Research and analysis</b> - records collected for research and analysis which support the development of policy / strategy	Background research material gathered specifically for the purpose of policy development activities	Date of last action	10 years	Destroy
1.1.4	<b>Policy / strategy development other agency lead</b> - policy development and/or review records where another agency is the lead agency but Ministry provides input	Copies of policy / strategy documentation from other agencies, Ministry submissions	Date of last action	5 years	Destroy
1.2.2	<b>Legislation consultation</b> - records created during consultation for legislation, which is conducted by the Health Minister	Submissions, Correspondence with submitters	Date of last action	5 years	Destroy
1.3.4	<b>Routine ministerials and parliamentary questions</b>	Public enquiries via the Minister, Questions from Parliament	Date of last action	2 years	Destroy
1.4.2	<b>Committee meetings where the Ministry is not the lead agency</b> - Covers substantive papers	Agendas and minutes, Papers,	Date of last action	2 years	Destroy



1.5.2	<b>Accountability tracking</b>	Databases tracking that accountabilities are being fulfilled, Quality monitoring of outputs created.	Date of last action	2 years	Destroy
1.6.1	<b>Attendance / visits administration</b> records of attendance at conferences and visits to NZ by international delegates	Travel arrangements, Itineraries, Conference brochures, Register of gifts given to delegates or visitors, Presentations by non-Ministry delegates	End of calendar year	10 years	Destroy

## Class or class grouping – MOH2 Administration and Corporate

### Description

This class covers records managed corporately that are not covered by the Archives NZ GDAs 6 and 7. This class also provides generic coverage of records generated by most of the operational areas of the Ministry.

Subclasses include:

#### Relationship Management and Liaison

Covers records documenting high-level relationships, liaison and collaboration with other agencies and/or organisations where it is not covered by other classes

#### Project Management

Much of the Ministry's work is project based, both in the development of policy, strategy and legislation as well as in its implementation. Most project records are associated with specific health programmes or initiatives. These can be created by any of the health functions of the Ministry and cover:

- Project development, design and methodology
- Project oversight and reporting
- Project administration
- Project deliverable development
- Project deliverable finals

The projects covered in this subclass related to high level investments by the Ministry over \$500,000. Projects where the total cost is less than \$500,000 are not covered by this subclass, but are instead covered by class 2.3 and are recommended for destruction.

#### Ministry publications

The Ministry creates hard-copy and electronic publications as part of its operations. In addition to the publication records, the Ministry creates records relating to the development, requests, marketing and distribution of the publications. These can be managed under GDA6.

Many of the publications are deposited through the National Library's Legal Deposit programme. A number are not distributed widely, and these are the subject of this subclass, as they are available to a limited audience, and not deposited with the National Library.

#### Emergency Management within the Ministry

These sub-classes cover emergency management planning, including business continuity management, incidents and exercises within the Ministry, and operating the National Health Coordination Centre.

### Value statement

#### Relationship Management and Liaison

Records of high-level relationships, partnerships and meetings with other organisations and with New Zealand Crown Agencies are of long term archival value as they provide evidence of how the Ministry interacts with external groups and bodies at a high level as well as evidence of how the Ministry operates (sometimes in partnership with other agencies and organisations) to provide health leadership to the community.



Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, and Legitimacy of Authority.

#### Project Management (subclass 2.2 Projects over \$500,000, and subclass 2.3 Projects under \$500,000)

It is recommended that most project records (where the total cost of the project is over \$500,000) other than those of administrative nature, are retained as long term archives on the basis that they provide:

- Evidence of the performance of a substantive function of the Ministry and the manner in which the Ministry performed this function
- Evidence and information of interest to researchers into the history of health management and policy in New Zealand

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, and Knowledge.

#### Ministry publications

For publications not deposited with Legal Deposit it is recommended that one copy should be retained as a public archive. They are often the product or final deliverable of a project, encapsulating the work of the project, and therefore meet the Appraisal Statement criteria for Accountability.

#### Emergency Management within the Ministry

None of the records in this subclass have been recommended for retention as public archives as they are of operational or administrative value only.

Emergency management and contingency management plans have a very strong business value but are not considered to have any archival value.

The emergency incident and exercises records are part of a larger civil defence records set and therefore these records are recommended for destruction as they have no long term value in isolation of the wider records set.

Records recommended for destruction in this class are of operational business value or are captured in summaries elsewhere.

### Retention and disposal recommendation

#### Recommended for retention as public archives

Class #	Record class	Description	Trigger Point	Retention Period	Disposal Action
2.1.1	Relationships and partnerships – high level strategic records documenting the relationship with Crown agencies and other organisations (NZ and International)	High Level strategic relationship management records only, Memoranda of understanding, Services agreements	Date of last action	10 years	Transfer to Archives New Zealand
2.1.4	Cross government agency meeting papers where the Ministry is lead agency - formal records of the cross government agency meetings including those related to programmes	Agendas, Meeting minutes	Date of last action	10 years	Transfer to Archives New Zealand
2.2.1	Project development, design and methodology (Projects over \$500,000) - in developing / implementing health policy, legislation, programmes	Project conceptual framework, Project terms of reference, Pilot/trial design, Communication strategy, Budget bids	Date of last action e.g. when project completed and signed off	10 years	Transfer to Archives New Zealand

2.2.3	<b>Project deliverable development (Projects over \$500,000)</b> - records created as part of the process to develop the final deliverable	Discussion documents, Briefing papers, Reports to project boards, Working papers, Legal advice and opinions	Date of last action e.g. when project completed and signed off	10 years	Transfer to Archives New Zealand
2.2.4	<b>Project deliverable finals (Projects over \$500,000)</b> - final versions of the project output	Final documentation for project deliverable, e.g. report, recommendations, programme, implementation plans	Date of last action e.g. when project completed and signed off	10 years	Transfer to Archives New Zealand
2.4.1	<b>Publications developed as part of policy, research, design, development or implementation projects</b> - that are NOT deposited with National Library Legal Deposit	Official discussion documents, final reports etc	Date of last action	10 years	Transfer one copy to Archives New Zealand (Note: destroy duplicate copies except where these have been extensively annotated by Ministry staff)

#### Recommended for destruction

Class #	Record class	Description	Trigger Point	Retention Period	Disposal Action
2.1.2	<b>Routine relationship management</b> - records of a routine administrative nature	Routine administrative records, Routine internal memos, Contact details	Date of last action	2 years	Destroy
2.1.3	<b>Communities of practice</b> - collaboration on topics e.g. regional training hubs	Agendas, Meeting minutes	Date of last action	5 years	Destroy
2.1.5	<b>Cross government Agency Meeting Papers where the Ministry is not the lead agency</b> - formal records of the cross government agency meetings	Agendas, Meeting minutes	Date of last action	5 years	Destroy
2.1.6	<b>Meeting administration</b> - records that relate to the administration of meetings.	Meeting schedules, Meeting invitations, Organising travel.	Date of last action	1 year	Destroy
2.2.2	<b>Project administration (projects over \$500,000)</b>	Project financial monitoring, Project budget management, Project and meeting/working group/project group administrative arrangements and correspondence	Date of last action	7 years	Destroy
2.3.1	<b>Project development, design and methodology (Projects under \$500,000)</b> - in developing / implementing health policy, legislation, programmes	Project conceptual framework, Project terms of reference, Pilot/trial design, Communication strategy, Budget bids	Date of last action e.g. when project completed and signed off	10 years	Destroy
2.3.2	<b>Project administration (projects under \$500,000)</b>	Project financial monitoring, Project budget management, Project and meeting/working group/project group administrative arrangements and correspondence	Date of last action	7 years	Destroy
2.3.3	<b>Project deliverable development (Projects under \$500,000)</b> - records created as part of the process to develop the final deliverable	Discussion documents, Briefing papers, Reports to project boards, Working papers, Legal advice and opinions	Date of last action e.g. when project completed and signed off	10 years	Destroy



2.3.4	<b>Project deliverable finals (Projects under \$500,000)</b> - final versions of the project output	Final documentation for project deliverable, e.g. report, recommendations, programme, implementation plans	Date of last action e.g. when project completed and signed off	10 years	Destroy
2.5.1	<b>Emergency management</b> - Administration	Routine correspondence Routine internal memos Routine meetings Contact lists	Date of last action	2 years	Destroy
2.5.2	<b>Emergency management and Contingency planning - working</b>	Working papers for: - the Ministry's emergency plans - Business continuity plans Needs analysis	Date of last action	2 years	Destroy
2.5.3	<b>Emergency management and Contingency planning - finals</b>	Final Ministry emergency plans Business continuity plans National Health processes and procedures	Once superseded	5 years	Destroy
2.5.4	<b>Emergency management</b> - Incidents and exercises	Ministry emergency incidents, (e.g. pandemic incidents managed at a national level) Ministry emergency exercises to prepare for national incidents	Date of last action	7 years	Destroy

## Class or class grouping – MOH3 Manage and Support Health Sector

### Description

This class covers records generated by the Ministry when acting on behalf of the Minister to advise, fund, monitor and improve the performance of health sector Crown entities and District Health Boards (DHBs), which are responsible for the health of their local communities

Subclasses include:

#### DHB Planning and Guidance

Covers records related to the Ministry providing guidance and setting annual expectations for DHBs around planning.

#### DHB Funding

The Ministry provides the funding to the DHBs on behalf of the Government. The records created cover the way funding is distributed, as well as the pricing and benchmarking of the services provided by the DHBs.

#### DHB Reporting, Monitoring and Performance Management

The Ministry has a role in monitoring and reporting on DHB performance against health priorities. The Ministry may also be involved in performance managing the DHB.

#### Data Collections

This subclass provides generic coverage of the health data collected by the Ministry. Included are the raw data collected, processes for managing the data, the raw media used to collect the data and the management of classification tables.

#### Analysis of Health Data

Covers the analysis of health data, including national population health surveys. Also includes the epidemiology of health events, health characteristics and their causes or influences in specific populations.

#### Programme Establishment and Monitoring

This subclass covers the records relating to the establishment of Ministry-run health programmes as well as the ongoing monitoring and evaluation of them.

#### Implement Health Services

This subclass covers implementing strategies, policies and legislation/regulations based on specific health and disability topics, programmes or projects, including those for ethnic and population groupings, (e.g. Maori, older people), and



disease types (e.g. communicable diseases, cardiovascular diseases).

#### **Implement National Health IT**

The Ministry is charged with providing leadership in the implementation and use of information systems across the health and disability sector. Ensuring that health sector policy is supported by appropriate health information and IT solutions is also a priority.

#### **Health Sector Emergency Management**

Covers the provision of support to the health sector for emergency management planning and the coordination of incident responses.

#### **Processing and Payments**

The following support services are provided to the health sector:

Agreements Administration – creation and administration of funding agreements between health funding organisations and Health Providers

Entitlements Administration – capture and tracking health care users' health care entitlement and usage. Entitlement is established via criteria assessments, which includes Needs Assessments performed by agency organisations within the health sector

Claims, Invoice and Register Processing – receipt, validation and calculation of claims, invoices and registers, and the capture of clinical data from claims

Payments Processing – manage the payment of funds on behalf of the Ministry and the District Health Boards

Customer Service Management – handling queries and service requests from Funders, Providers and Health Care Users

Analysis and Reporting – provision of contract, clinical, performance analysis and financial reporting to Funders and Health Providers, and to the National Health Information and Data collections.

#### **Workforce Planning and Development**

The Ministry provides leadership, co-ordination and oversight of planning and development of the workforce across the country's health and disability sector. Currently this activity is provided by Health Workforce New Zealand (HWNZ).

A range of work programmes have been developed and rolled out designed to recruit, retain and develop the workforce in all specialities and in all areas, ensuring that New Zealand has the right mix and numbers of people to provide world-class healthcare.

### **Value statement**

#### **DHB Planning and Guidance**

The substantive DHB planning and guidance records, including the nominated positions to the DHB boards in addition to the health service coverage and specification created by the Ministry for each DHB are of long term archival value as they provide evidence of the Ministry's interaction with the DHBs and how this shaped the health services provided.

Records of the procedures and processes to be followed by the health sector are considered to be of long term archival value as they are evidence of how the Ministry directed DHBs and the sector to carry out their responsibilities, as well as of the application of health policy to health and disability management in New Zealand.

The substantive records of sector leadership activities, including planning and monitoring, provide evidence of the Ministry's stated purpose of "whole-of-sector leadership for New Zealand's complex health and disability system".

Records in this subclass which have been recommended for retention as public archives, meet the Appraisal Statement criteria for Accountability, Legitimacy of Authority, and Knowledge.

#### **DHB Funding**

The substantive records around the funding of DHBs, including the pricing and benchmarking of services provide evidence of how the health budget was allocated. They also provide a summary view of the actual spend on, and cost of health that will be of value to researchers into health.

Records in this subclass which have been recommended for retention as public archives, meet the Appraisal Statement criteria for Accountability, and Knowledge.

#### **DHB Reporting, Monitoring and Performance Management**

Records documenting the reporting, monitoring and performance management of the DHBs are recommended for



retention as public archives. These records provide evidence of the performance of the DHB. These records meet the Appraisal Statement criteria for Accountability, Legitimacy of Authority, and Knowledge.

#### **Data Collections (3.4) and Analysis of Health Data (3.5)**

The raw data collected, and the analysis of this data to measure the performance of the health and disability system, is not of archival value. The results and summaries of the data analysis and the final reports are of archival value as they provide evidence of the Ministry's impact on the health system of New Zealand, and are also of research value in the future. The data analysis protocols documentation provides context to the analysis, and will also need to be retained.

Records in these two subclasses which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, Rights and Entitlements, Legitimacy of Authority, and Knowledge.

#### **Programme Establishment and Monitoring**

The implementation of policy and strategy is demonstrated by the development of specific programmes for use by health services. This subclass covers generic coverage for all health programme records. It also covers the establishment of Ministry run health programmes as well as the on-going monitoring and evaluation of those programmes.

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, Legitimacy of Authority, and Knowledge.

#### **Implement Health Services**

The Ministry provides whole-of-sector leadership of the health and disability system. Records in this subclass have a focus on delivering clinical leadership, implementing policies and strategies based on specific health and disability topics nationally, including the implementation of specific services, projects or programmes for population-based and ethnic groups, or for particular diseases. There is a high degree of business value and accountability against agreed performance of the Ministry and service delivery agents captured in these records. It is therefore recommended that as these records are unique within the New Zealand government environment, they be retained as public archives. The exception is the subclass containing complaints issues and enquiries, and it is therefore recommended that as these records have no long term value, they be destroyed following the stated retention periods.

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, Rights and Entitlements, Legitimacy of Authority, and Knowledge.

#### **Implement National Health IT**

Major capital investment in IT for positive national health outcomes is of considerable research value, as are the reviews of business cases put forward by the Ministry and DHBs (to which grants applications may or may not apply). The retention of this information will provide a useful set of information to enhance any research into IT development for the health sector in New Zealand. These records also provide evidence of the Ministry's interaction with external groups in the development of health IT.

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, Rights and Entitlements, Legitimacy of Authority, and Knowledge.

#### **Health Sector Emergency Management**

Records in this subclass are of long term value for evaluating effectiveness and transparency, and determining what can be used as precedents in future planning. Those that have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, Rights and Entitlements, , and Knowledge.

#### **Processing and Payments**

All records in this subclass are deemed to be of limited operational or administrative value, and have been recommended for destruction at appropriate intervals from the stated trigger points.

#### **Workforce Planning and Development**

Providing professional development for the health sector workforce is a core function of the Ministry. The development information is also of value for health and social research purposes in the future.

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, Rights and Entitlements, Legitimacy of Authority, and Knowledge.

Records recommended for destruction in this class are of operational business value or are captured in summaries elsewhere.

### **Retention and disposal recommendation**

**Recommended for retention as public archives**



Class #	Record class	Description	Trigger Point	Retention Period	Disposal Action
3.1.1	DHB board membership - nominations sent to the Minister	Nominated appointments, High level correspondence with nominators and nominees	Date of last action	10 years	Transfer to Archives New Zealand
3.1.3	Service planning for DHBs - modelling and planning around the services to be delivered by the DHBs	Capacity modelling, Long term planning framework, National Service Improvement Plan, Regional planning guidance, Service level planning, Service simulation modelling	Date of last action	10 years	Transfer to Archives New Zealand
3.1.5	Guidance and processes for planning and funding - processes and guidelines issued to DHBs around planning, funding, monitoring and analysis of services.	Planning package, Accountability documents such as Crown Funding Agreements, Financial Information guidelines, standards and templates, Data dictionary and governance, Service charge rules, principles and processes for DHBs	Date of last action	10 years	Transfer to Archives New Zealand
3.1.6	DHB service coverage and specifications - created by the Ministry for each DHB	Service specifications, Service coverage	Date of last action	10 years	Transfer to Archives New Zealand
3.1.7	Statutory monitoring of DHBs and Crown Entities bargaining	Agreements, Checklists, Reports	Date of last action	10 years	Transfer to Archives New Zealand
3.2.1	DHB funding management - Records documenting the administration and the distribution of funds to DHBs	Electives initiatives funding, Private Public partnership, Allocating funding to the DHBs Reporting and accountability documents	Date of last action	10 years	Transfer to Archives New Zealand
3.2.2	DHB pricing and benchmarking - records of reviews of the costs incurred and how this impacts productivity and efficiency. Includes modelling and analysis work.	Cost utilisation model results / reporting, Productivity and efficiency analysis results / reporting	Date of last action	10 years	Transfer to Archives New Zealand
3.3.1	Performance monitoring of DHBs - covers performance monitoring of each DHB as well as the services provided by DHBs.	Published reports on the performance of DHBs (not deposited with National Library under legal deposit), Source data that was used, Reporting on performance of DHB provided services, Analysis of services results / reporting	Date of last action	10 years	Transfer to Archives New Zealand
3.3.3	Performance management of DHBs- Records that cover the performance management undertaken for DHBs not performing.	Reports	Date of last action	10 years	Transfer to Archives New Zealand
3.4.2	Data collection management and processing policies and procedures	Policies, Procedures, Standards, Specifications, User requirements, Business rules, Technical documentation	Until no longer required for research or analysis	When superseded	Transfer to Archives New Zealand



3.4.4	<b>Management of code tables</b> - used for classifying data for the national collections	Purchase Unit Data Dictionary, Common counting standards	Date of last action	10 years	Transfer to Archives New Zealand
3.5.3	<b>Data analysis documentation</b> - records of how analysis is carried out	Rules, guidelines, and documentation created to support the analysis	When datasets no longer in use	10 years	Transfer to Archives New Zealand
3.5.5	<b>Data analysis reports</b> - finals (excluding publications - see Administration & Corporate class)	Fact sheets, Reports	Date of last action	10 years	Transfer to Archives New Zealand
3.6.1	<b>Programme establishment</b> - records documenting the establishment of a new health programme	Discussion documents, White papers, Research papers, think pieces, Related correspondence	Date of last action	10 years	Transfer to Archives New Zealand
3.6.2	<b>Formal monitoring and evaluation</b> - formal reports covering the monitoring and evaluation of services / programmes	Formal monitoring reports, Independent external monitoring reports, Programme audit reports	Date of last action	10 years	Transfer to Archives New Zealand
3.7.1	<b>Clinical leadership</b> - providing clinical input, advice, guidelines, codes and network meetings	Correspondence relating to the provision of advice and guidance, Network meeting agendas and minutes records, Code tables, Guidelines	Date of last action	10 years	Transfer to Archives New Zealand
3.7.2	<b>Overview clinical issues</b>	Issues papers, Meeting agendas and minutes	Date of last action	10 years	Transfer to Archives New Zealand
3.8.4	<b>Grant procedures and guidelines</b>	Procedures, guidelines and standards Criteria for selection	When superseded	10 years	Transfer to Archives New Zealand
3.8.5	<b>Grant selection</b> - records of the selection process for selecting the grant recipient	Evaluation documents Report on selection process Report on successful applicants	When proposal round completed	10 years	Transfer to Archives New Zealand
3.8.6	<b>Review business cases for investments</b> - review business cases for IT investment over \$500,000 in the health sector submitted by the Ministry, DHBs and subsidiaries	Business case submitted by applicant Decisions and approvals	Date of last action	10 years	Transfer to Archives New Zealand
3.8.9	<b>National and regional IT planning</b> - finals (excluding publications - see Administration & Corporate class)	National Health IT Plan, Regional service plans	Date of last action	10 years	Transfer to Archives New Zealand
3.9.4	<b>Emergency management plans</b> - finals where the Ministry is the lead agency	National health emergency plans	Date of last action	10 years	Transfer to Archives New Zealand
3.11.2	<b>Workforce development planning and forecasting</b> - finals	Reports, Briefing notes/papers	Date of last action	10 years	Transfer to Archives New Zealand

3.11.4	<b>Research and evaluation</b> - Summaries and reports	Summaries of feedback/consultation, Final reports and recommendations	Date of last action e.g. when project completed and signed off	10 years	Transfer to Archives New Zealand
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#### Recommended for destruction

Class #	Record class	Description	Trigger Point	Retention Period	Disposal Action
3.1.2	DHB Board issues monitoring - raised and dealt with by the DHB Boards	Issue tracking	Date of last action	7 years	Destroy
3.1.4	DHB planning and accountability - planning and reporting documents created by DHBs	DHB Annual Plans, Statements of intent, DHB Annual Reports, Letters of expectation	Date of last action	10 years	Destroy
3.3.2	Performance monitoring of DHBs - source data only	Source data that was used to create the reports in 3.3.1	Until no longer required for research or analysis	10 years	Destroy
3.4.1	Data collections - data collected from and about Health sector	Hard-copy datasets, registers, Data held in databases, National collections, Database specifications, Installation documentation, Metadata information, Code books, Information about samples	Until no longer required for research or analysis	When superseded	Destroy
3.4.3	Raw media for collecting data - completed collection instruments / returns of data from or about health sector (electronic or paper)	Survey returns, Questionnaire returns, Online form returns	Once entered in database, verified, and analysis completed	5 years	Destroy
3.5.1	Adhoc requests and responses - for health related data	Enquiries and responses	Date of last action	1 year	Destroy
3.5.2	Data analysis working records - includes customised and standing order requests	Extracted datasets, Spread sheets, Database reports / output, Data models, Data cubes	When final report produced	Until no longer required for research or analysis	Destroy
3.5.4	Data analysis reports - development	Drafts and iterations, Peer review	When final report produced	2 years	Destroy
3.5.6	Quality control of coding and data	High level correspondence regarding quality issues Review reports	Date of last action	2 years	Destroy
3.6.3	Adhoc reporting - occasional reporting, records prepared to support internal inquiries, policy development or monitoring	Ad hoc programme monitoring and evaluation reports, Statistical reports or analysis	Date of last action	10 years	Destroy



3.7.3	<b>Complaints, issues and enquiries specific to service</b>	Complaints correspondence including responses, Reporting against complaints, Issues identified for a service, Enquiries from the public about a service	Date of last action	5 years	Destroy
3.8.1	<b>Grant administration - of grants that support the implementation of a number of primary healthcare, and integrated care, health IT solutions</b>	Records of the process, Calculating payments, Making payments	When proposal round completed	7 years	Destroy
3.8.2	<b>Grant successful proposals</b>	Successful proposals, Related correspondence	When proposal round completed	7 years	Destroy
3.8.3	<b>Grant unsuccessful proposals</b>	Unsuccessful proposals, Related correspondence	When proposal round completed	6 months	Destroy
3.8.7	<b>Review advanced notice for investments - receiving advance notices and providing advice for investments in the health sector</b>	Advanced notice received from applicant, Advice provided to applicant, Related correspondence	Date of last action	7 years	Destroy
3.8.8	<b>Reviewing investments in health sector - Updates and review of approved projects</b>	Project update reports, Review reports	Date of last action	7 years	Destroy
3.9.1	<b>Emergency management administration</b>	Routine internal memos, Contact lists/	Date of last action	2 years	Destroy
3.9.2	<b>Health sector capability training, Training provided to sector</b>	Training materials, Correspondence regarding training provision	Date of last action	7 years	Destroy
3.9.3	<b>Emergency management plans - working papers - where the Ministry is the lead agency</b>	Training plans, Working papers for national health emergency plans	Date of last action	2 years	Destroy
3.9.5	<b>Other emergency management plans - where the Ministry is not the lead agency</b>	Emergency plans – i.e. be copies held for reference purposes	Date of last action	2 years	Destroy
3.9.6	<b>Emergency Management - Incidents and exercises with the sector</b>	Health sector exercises, Interagency exercises, Incident records	Date of last action	7 years	Destroy
3.10.1	<b>Agreement administration - creation and administration of funding agreements between health funding organisations and health providers</b>	Funding agreements created on behalf of health funder and health providers	End of financial year	7 years	Destroy
3.10.2	<b>Entitlements administration – capture and tracking health care users' health care entitlement and usage</b>	Forms received, Related correspondence	End of financial year	7 years	Destroy
3.10.3	<b>Claims, invoice and register processing – receipt, validation and calculation of claims,</b>	Claims, Invoices, Registers, Clinical data	End of financial year	7 years	Destroy

	invoices and registers, and the capture of clinical data from claims				
3.10.4	<b>Payments processing</b> – manage the payment of funds on behalf of the Ministry and the District Health Boards	Payment records	End of financial year	7 years	Destroy
3.10.5	<b>Auditing and investigations of payments</b>	Audits of payments made, Correspondence relating to audit, Related material.	End of financial year	7 years	Destroy
3.10.6	<b>Customer service management</b> – handling queries and service requests from funders, providers and health care users	Related correspondence, Contact details	Date of last action	2 years	Destroy
3.10.7	<b>Analysis and reporting</b> – contract, clinical, performance analysis and financial reporting to funders and health providers, and to National Health Information and Data collections	Performance analysis, Financial reporting	End of financial year	7 years	Destroy
3.11.1	<b>Workforce development planning and forecasting</b> - working papers	Drafts, Data analysis, Data models	Date of last action	3 years	Destroy
3.11.3	<b>Research and evaluation</b> - Records created as a result of researching new possibilities. E.g. Innovative placements, new roles and scopes	Submissions Meeting minutes	Date of last action e.g. when project completed and signed off	5 years	Destroy
3.11.5	<b>Successful applications for training schemes</b> - Advanced Training Fellowship (ATF) scheme, etc	Successful applications, Related correspondence	When applicant's training is complete	7 years	Destroy
3.11.6	<b>Unsuccessful applications for training schemes</b> - Advanced Training Fellowship (ATF) scheme, etc	Unsuccessful applications, Related correspondence	When training scheme commences	1 year	Destroy
3.11.7	<b>Training scheme selection and administration</b> - Advanced Training Fellowship (ATF) scheme, etc	Evaluation of applications, Report on selection process, Report on successful applicants, Enquiries regarding scheme	Date of last action	2 years	Destroy
3.11.8	<b>Voluntary bonding scheme</b> - administration	Meeting agendas and minutes, Financial records, Membership, Processing registrations, Correspondence with bonded individuals	Date of last action	7 years	Destroy
3.11.9	<b>Voluntary bonding scheme</b> - registrations of interest	Completed registration of interest forms, Related correspondence	Date of last action, e.g. end of last round	5 years	Destroy



3.11.10	<b>Education and training initiatives</b> - covers the deliverables from education and training initiatives (excludes collaboration which is covered by subclass 2.1)	Reports, Regional training plans, Resources developed for rollout, Research outcomes	Date of last action	10 years	Destroy
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## Class or class grouping – MOH4 Purchase Health Services

### Description

This class covers records created by the Ministry for making sure the national programmes linked to the achievement of Health Targets and related priority areas, are designed and implemented efficiently and effectively. Subclasses include:

#### Contract Management and Purchasing

One of the Ministry's prime roles is directly purchasing a range of important national health and disability support services. This subclass covers the records created while managing contracts and the planning and purchasing of health services, including service development and procurement plans.

#### Manage service providers

Providers must be monitored for quality and assessed for their ongoing ability to provide the services specified. This subclass covers the records created while managing service providers, including the monitoring of their performance and records around the renewal of existing contracts.

### Value statement

#### Contract Management and Purchasing

The records covering the planning of the procurement of these services, as well as the selection and evaluation of the service providers, deliver evidence of the performance of this substantive function.

Provider contracts that are considered to be exposing the Ministry to high risk / liability or which have incurred the Ministry to more than \$15m<sup>1</sup> expenditure over the life of the contract are recommended for retention as public archives. These records provide evidence of the Ministry's obligations to external parties delivering significant health services on the Ministry's behalf.

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, Rights and Entitlements, and Knowledge.

#### Manage service providers

Records documenting the quality monitoring and auditing of the health service are recommended for retention as public archives. These records provide evidence of the performance of the service providers.

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, Rights and Entitlements, and Knowledge.

Records recommended for destruction in this class are of operational business value or are captured in summaries elsewhere.

### Retention and disposal recommendation

#### Recommended for retention as public archives

Class #	Record class	Description	Trigger Point	Retention Period	Disposal Action
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<sup>1</sup> Recommended as an appropriate value by the Ministry's procurement team.



4.1.1	<b>Planning</b> - records of the planning to procure the service.	Procurement plans, Issues planning	Date of last action	10 years	Transfer to Archives New Zealand
4.1.3	<b>Evaluation of providers</b> - selection of provider to provide the service	Evaluations, Report on selection process, Report on successful provider	Date of last action	10 years	Transfer to Archives New Zealand
4.1.4	<b>Provider Contracts Significant</b> - records covering the set up and on-going management of provider contracts that are assessed as exposing the Ministry to high risk or have a value of \$15m+ over their life.	Substantive drafts and final signed version of contracts, Correspondence about the contract, Variations to contracts with providers	From date when provider ceases to be actively engaged / contracted	10 years	Transfer to Archives New Zealand
4.1.11	<b>Complaints to Health Commissioner</b>	Health Commissioner complaints Reports	From date when provider ceases to be actively engaged / contracted	10 years	Transfer to Archives New Zealand
4.1.12	<b>Provider quality management and auditing</b> - Quality investigations and audit records prepared by Ministry staff of providers as part of formal auditing activities	Reports prepared as part of formal auditing programme, Investigation reports	Date of last action	10 years	Transfer to Archives New Zealand

#### Recommended for destruction

Class #	Record class	Description	Retention Period	Trigger Point	Disposal Action
4.1.2	<b>Procurement</b> - records of the specification and purchase documentation issued to potential providers	Service specifications, Purchase documentation	10 years	Date of last action	Destroy
4.1.5	<b>Provider Contracts Ordinary</b> - records covering the set up and on-going management of provider contracts not assessed as high risk and have a value less than \$15m over their life	Significant drafts and signed version of contracts, correspondence about the contract, variations to contracts with providers	10 years	From date when provider ceases to be actively engaged / contracted	Destroy
4.1.6	<b>Provider relationship management</b> - records documenting the on-going working relationship between the provider and the Ministry	Meeting agendas and minutes, Directives, High level relationship management records, Issue resolution	10 years	From date when provider ceases to be actively engaged / contracted	Destroy
4.1.7	<b>Provider routine operational records</b> - records of a routine nature managing day to day operations with providers	Routine correspondence with the provider	10 years	From date when provider ceases to be actively engaged / contracted	Destroy



4.1.8	<b>Performance monitoring</b> - records that document the monitoring of the providers performance	Performance management reports, Quality management documentation	10 years	From date when provider ceases to be actively engaged / contracted	Destroy
4.1.9	<b>Contract renewal</b> - renew the contract with the existing provider	Records documenting the agreement to renew the contract	10 years	From date when provider ceases to be actively engaged / contracted	Destroy
4.1.10	<b>Complaints about providers</b>	Complaints received from the public, Disability complaints, Reports	10 years	From date when provider ceases to be actively engaged / contracted	Destroy
4.1.13	<b>Notification of events</b> - records that document events requiring attendance by Ministry officials and / or further investigation (see also 4.2.9)	Notifications of events by providers	10 years	From date when provider ceases to be actively engaged / contracted	Destroy

## Class or class grouping – MOH5 Implement and Enforce Legislation

### Description

This class covers records related to the creation of health legislation and associated advice. This class also covers records related to the enforcement of health legislation. Subclasses include:

#### Legislation Advice

The Ministry administers a number of laws made by Parliament, and also has roles defined in other legislation and in international compliance. This role includes providing advice based on legislation and associated regulations. The Ministry is also responsible for enforcement of legislation through collaborative efforts with district health boards, and for the administration of mental health legislation.

#### Provider Regulations

Records cover certification of health care services, overseeing the distribution chain of medicines and controlled drugs, as well as radiation and radioactivity.

#### Mental Health

Covers records documenting the implementation and enforcement of mental health legislation. This includes mental health protection records such as records for special patients detained in secure forensic mental health facilities under the Mental Health (Compulsory Assessment and Treatment) Act, and the Intellectual Disability (Compulsory Care and Rehabilitation) Act. Patient records documenting significant patient issues and matters of concern are also managed by the Ministry.

DA262 is used as the precedent for this destruction action, as the summaries are captured by DHBs.

#### Regulatory Functions

The Ministry has regulatory responsibilities in the health sector, these include:

- Environmental and border health  
Key work to limit and respond to the international spread of diseases and other public health threats. Protection measures seek to prevent harm to human health, including the health and wellbeing of international travellers, aircraft and ship crew, and the general public.
- Medicines and medical devices



Medsafe (New Zealand Medicines and Medical Devices Safety Authority), a business unit of the Ministry that is responsible for the regulation of therapeutic products in New Zealand. It operates in accordance with the Medicines Act and Regulations, and parts of the Misuse of Drugs Act and Regulations. These files document the process of Medsafe's regulation of pharmaceutical drugs, medical devices and therapeutic products in the New Zealand market.

## Value statement

### Legislation Advice

As the primary agency in New Zealand to provide health sector leadership, the records of legislation-based advice provide evidence of the Ministry's role in managing health in New Zealand.

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, Legitimacy of Authority, and Knowledge.

### Provider Regulations

Provider regulations are generally of a routine operational nature and are of short or medium term value to the Ministry only, and have been recommended for destruction.

### Mental Health

Information on individual mental health client files are not recommended for transfer to Archives NZ.

It is recommended that the mental health client files are retained by the Ministry for a minimum period of 20 years (as documented in the DHBs disposal authority DA262). The retention period is appropriate because health clients require treatment over extended periods of time. Past legal cases demonstrate that there are strong legal reasons to retain these files for longer periods. However, the content of mental health patient files are no more significant than for other patient files, and it is recommended that they be destroyed at the end of the 20 year period.

Mental Health protection guidelines have significance as these may change over time, and it is recommended that these be retained as public archives. In addition, the records relating to monitoring of Mental Health providers are recommended for archiving, as these historical records may be called on in the event that individuals and organisations are investigated and/or request investigation into past events.

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability.

### Regulatory Functions

Public health registers that are owned by the Ministry (may be stored externally at third party storage facilities), as well as environmental and border survey data summaries, are of social research value and are therefore recommended for retention as public archives.

Records relating to the accreditation of roles governed by the Health Act are of operational value and only of short to medium term value.

Records of the guidelines, manuals and procedures produced by the Ministry and issued to providers are considered to be of long term archival value as they are evidence of how the Ministry directs the health sector to carry out their responsibilities as well as of the application of health legislation to health and disability management in New Zealand.

Both the National Archives of Canada and the National Archives of Australia determined that drug evaluation files for the most part had little archival value but need to be kept for a considerable time. The National Archives of Australia made the decision to destroy all drug evaluation files after a retention period of 70 years in the case of drugs that were approved, and 15 years in the case of drugs that were not approved or were withdrawn. The long retention period is because there is the "difficulty over time of proving that a particular condition was caused by a specific drug or a combination of drugs, and the difficulty of identifying that drug and determining its long-term effects without detailed medical documentation on the patient".

There is a set of high profile drug evaluation records that the Ministry of Health considers to be of archival value. High profile cases considered to be of exceptional importance are selected based on the following criteria:

- 1) The drug concerned had been the subject of legal class actions in New Zealand or overseas
- 2) The drug concerned had been the subject of widespread media attention
- 3) Approval for marketing the drug in New Zealand was withdrawn by the Ministry of Health on the advice of overseas

<sup>2</sup> MedSafe Appraisal report DA166



regulatory authorities

4) Approval for marketing the drug in New Zealand was withdrawn by the Ministry of Health in response to adverse reaction reporting

5) The drug had been administered to a wide cross-section of the population, e.g. meningococcal vaccine

The archival value of such files would lie in documentary evidence of the agency's actions in response to concerns about the safety of drugs in fulfilment of its statutory obligations.

The records around the implementation of international guidelines are evidence of the Ministry's engagement with other Public Health organisations internationally.

Records in this subclass which have been recommended for retention as public archives meet the Appraisal Statement criteria for Accountability, Rights and Entitlements, Legitimacy of Authority, and Knowledge.

Records recommended for destruction in this class are of operational business value or are captured in summaries elsewhere.

## Retention and disposal recommendation

### Recommended for retention as public archives

Class #	Record class	Description	Trigger Point	Retention Period	Disposal Action
5.1.1	Legislation advice - significant process of providing advice in relation to legislation and associated regulations that affects policy	Briefing notes, Minutes, Reports, Related high level correspondence	Date of last action	10 years	Transfer to Archives New Zealand
5.3.1	Mental health sector monitoring -	Reports to Minister, Comments on and reviews of strategic plans, purchase/output, Agreements etc, Letters of expectation	Date of last action	10 years	Transfer to Archives New Zealand
5.4.2	Survey - summaries and reports	Summaries of data, Final reports and recommendations	Date of last action	10 years	Transfer to Archives New Zealand
5.4.7	Drug evaluation files of exceptional importance	Drug evaluation files that fulfil at least one of the following criteria: 1) The drug concerned had been the subject of legal class actions in New Zealand or overseas 2) The drug concerned had been the subject of widespread media attention 3) Approval for marketing the drug in New Zealand was withdrawn by the Ministry of Health on the advice of overseas regulatory authorities 4) Approval for marketing the drug in New Zealand was withdrawn by the Ministry of Health in response to adverse reaction reporting 5) The drug had been administered to a wide cross-section of the population, e.g. meningococcal vaccine	Date of last action	25 years	Transfer to Archives New Zealand
5.4.8	Proprietary ingredients - specific form that include details of colorants or flavours used in formulations of a medicine	Form containing the formulation details of proprietary ingredients used in medicines	Date of last action	25 years	Transfer to Archives New Zealand

5.4.9	<b>Investigations and reports on issues -</b> where an issue has been raised and needs to be investigated	Reporting on quality issues on medical devices, Post market surveillance	When ingredient no longer in use	10 years	Transfer to Archives New Zealand
5.4.10	<b>Complaints and recalls</b>	Correspondence with the public, Recall of a medicine, cosmetic or medical device	Date of last action	5 years	Transfer to Archives New Zealand
5.4.11	<b>Implement international guidelines</b>	High level correspondence with guideline developers and implementers, Reports	Date of last action	10 years	Transfer to Archives New Zealand

#### Recommended for destruction

Class #	Record class	Description	Trigger Point	Retention Period	Disposal Action
5.1.2	<b>Legislation advice - routine</b> process of providing advice in relation to legislation and associated regulations that is routine and does not affect policy	Briefing notes, Minutes, Reports, High level correspondence	Date of last action	5 years	Destroy
5.1.3	<b>Providing internal advice</b>	High level correspondence, Reports	Date of last action	5 years	Destroy
5.2.1	<b>Regulatory instruments (e.g. licences, certificates, designations, consents)</b> - including applications, decisions, notifications and copies of the regulatory instruments.	Applications for a regulatory instruments or a change to a regulatory instrument and supporting documentation, Assessments of applications, including correspondence, Decisions by regulatory authorities, Notifications of approval of rejection, Copies of regulatory instrument documents (e.g. licences, certificates), Records relating the designations of auditing agencies	Licence or approval expires or is revoked	10 years	Destroy
5.2.2	<b>Audit of regulated health care providers -</b> working records.	Working records related to the audit of regulated health care providers, which will feed into the creation of a final audit report	Until no longer administratively required	1 month	Destroy
5.2.3	<b>Audit of regulated health care providers -</b> final audit report	Audit report (final) of regulated health care providers. Documentation that forms a part of the final audit report	Date of last action	10 years	Destroy
5.2.4	<b>Reports and correspondence with regulated providers -</b> reports or notifications required under legislation, regulation or as a condition of the regulatory instrument	Incident reports, Notifications of change, Controlled drug registers, Related correspondence from regulated providers	Date of last action	10 years	Destroy
5.2.5	<b>Complaints about health care providers</b>	Complaints received from the public about domestic health care providers and the actions that were taken	Date the complaint was closed	10 years	Destroy



5.2.6	<b>Drug abuse containment</b> - investigations, decisions, and reports relating to patients or practitioners with respect to drug abuse containment	Reports in prescribing and dispensing history, Correspondence relating to investigations of drug abuse containment, Requests for restriction notices, Restriction notices, Liaising with other authorities (e.g. Police), Copies of authorisations issued by gazetted drug treatment clinics	Date of last action	10 years	Destroy
5.2.7	<b>Controlled drug prescription and controlled drug destruction forms</b> - ref Misuse of Drugs Regulations 33(20) and 42(1)	Controlled drug prescription forms, Reports from providers on the destruction of controlled drugs	Date of the prescription or report	4 years	Destroy
5.3.2	<b>Special patients</b> - Managing special patients detained under the Mental Health (Compulsory Assessment and Treatment) Act and the Intellectual Disability (Compulsory Care and Rehabilitation) Act	All records regarding detention of patients under forensic circumstances. Includes reports, Leave request forms, Section 45 notices, Court orders, Clinical evaluations, Mental health review tribunal, Transfers, Regulatory documents	Date of last action e.g. last date services were provided to an individual	20 years	Destroy
5.3.3	<b>Patient issues (not special patients)</b> - Records documenting significant patient issues and matters of concern	Reportable events reports, Coroner's reports, Ombudsmen reports & investigations, Legal issues, Section 95 inquiries, Patient correspondence, PRIMHD data	Date of last action e.g. last date services were provided to individual	20 years	Destroy
5.4.1	<b>Survey - raw data</b>	Raw monitoring data, Data analysis, Correspondence, Reviews of drafts	Date of last action	5 years	Destroy
5.4.3	<b>Licences</b> - Applications, approvals, and Licences covering aspects such as air quality, burial & cremations, medicines control, rest homes, and noise control	Applications, Assessments, Licences, Notification of approval or rejection	Licence expires or is revoked	10 years	Destroy
5.4.4	<b>Accreditation</b> - Appointment governed by the Health Act	Accreditation of roles such as Health Protection Officers and Water Protection Officers. Includes add-ons for biosecurity and hazardous substances. Correspondence, Applications	Date of last action	7 years	Destroy
5.4.5	<b>Drug evaluation files (non-exceptional)</b>	Correspondence about, and technical enclosures for approved drugs	Date of last action	70 years	Destroy
5.4.6	<b>Drug evaluation files - withdrawn or not approved</b>	Correspondence about, and technical enclosures for drug applications withdrawn or not approved	Date of last action	15 years	Destroy
<b>Access Recommendations</b>					

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## Appendices

### Appendix 1 – Consultation list

#### List of stakeholders consulted

The list of external stakeholders that have a vested interest in the disposal actions outlined in this schedule are listed below and were consulted during the development of the schedule:

All District Health Boards  
Te Puni Kokiri  
Ministry of Pacific Island Affairs  
New Zealand Blood Service  
Pharmac  
Health Research Council  
Health and Disability Commission  
Privacy Commission  
Health Quality and Safety Commission  
Health Benefits Ltd  
Health Promotion Agency  
Health Research Council of New Zealand  
Medical Council of New Zealand  
Accident Compensation Corporation  
Ministry of Social Development  
Ministry of Business, Innovation and Employment  
Environmental Science and Research  
Statistics New Zealand

Appendix 2 - Ministry of Health Disposal Schedule (in a separate document)

### Caveat

Refer to any sentencing guidelines accompanying this report for specific recommendations:

- records must be kept for the minimum period specified
- records may be destroyed at any point once the minimum retention periods have passed. Records do not have to be destroyed; the agency may keep them for longer if required.

This authority is valid for a period of 10 years from date of signing, unless previously agreed with the Chief Archivist.