ARCHIVES NEW ZEALAND

Functional Disposal Authority

FDA2 – Health Administration

Disposal Authority Reference: DA- - -
Issued: -/-/20- -

This Disposal Authority is issued under section 20(1) of the Public Records Act 2005.

Te Rua Mahara o te Kāwanatanga
ARCHIVES NEW ZEALAND

New Zealand Government

Document details

Version	Date	Description	Revision due
0.1	15/08/2018	Internal stakeholder consultation reflected	
0.2	06/09/2018	Minor editorial changes	
0.3	23/11/2018	Further feedback from DHBs reflected	
0.4	21/03/2019	Methodology updated; caveat and new classes added	
0.5	25/10/2019	Updated to reflect internal consultation feedback	

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INTRODUCTION

This functional disposal authority 2 (hereafter FDA2) has been developed to identify those records created and maintained by public offices which are required as public archives and to approve destruction of certain records which are administratively no longer required.

FDA2 covers classes of records created and maintained by the public offices which perform administrative functions to support the management and delivery of the health and disability services to patients/clients:

- Governance, Accountability, Strategic Management
- Health Service Complaints and Incident Management
- Audits, Reviews and Evaluations
- Māori stakeholder relationship management under the Treaty of Waitangi
- Risk Management
- Quality Management
- Health Workforce Management
- Programmes/Project Management
- Pharmaceutical Supply and Administration
- Human Tissue Supply and Management (Human Tissue Act 2008)
- Sterilisation of Medical Equipment
- Service Provisions for Patients
- Mortuary Management

For a list of public offices covered by this functional disposal authority, see Appendix 1.

Purpose

This FDA authorises disposal of records in accordance with Section 20(1) of the Public Records Act 2005.

About the Functional Disposal Authority

The functional disposal authority (FDA) is designed to cover a function carried out by and/or common to more than one public office, but not all-of-government. The latter is covered by the general disposal authorities.

This FDA covers records controlled by the public office and applies only to the classes of records described in the authority.

Application of this Functional Disposal Authority

1. Minimum retention period: The retention periods outlined in the FDA are minimum retention periods that start only after the record is no longer used or is closed. When the records reach the minimum retention period and are not required for business or legal reasons, they may be destroyed, discharged (if applicable) or transferred under this FDA.

2. Trigger point: The trigger points outlined in the FDA are the points at which the minimum retention period starts.

3. Format of records: This FDA applies to records in any format (e.g. paper, digital).

4. Retention and disposal requirements:
    - A public office may extend the minimum retention periods if it is required for administrative reasons or legal requirements. This does not require further authorisation from the Chief Archivist.
    - Disposal actions for records in this FDA may only occur once a public office has ensured that business or other legal requirements for the records are met, such as Health (Retention of Health Information) Regulations 1996.
    - Records approved for **retaining as public archives**[1] in this FDA only should be transferred to Archives New Zealand. Contact Archives New Zealand before doing any work to prepare the records for transfer.

5. Administrative change: This FDA has been developed to link records to the functions they document rather than to organisational structure. When a function moves between organisations, this FDA still applies to the receiving organisation. This FDA is designed to be less affected by administrative change and provides stability for organisations to implement this FDA. Contact Archives New Zealand to discuss when functions move from one organisation to another organisation.

6. Review of this FDA: This FDA is a continuing functional disposal authority. However, to remain relevant and appropriate for use, it will be reviewed on a regular basis. Archives New Zealand or an organisation covered by this FDA can initiate a review of this FDA, if required for business reasons.

   Depending on the outcome of such a review, the review may involve consultation between Archives New Zealand and relevant organisations. If an amendment is required as a result of the review, the FDA will be updated and the changes approved by the Chief Archivist, Archives New Zealand.

[1] i.e. transfer to the control of the Chief Archivist as per s.21 of the PRA

Methodology

1. Appraisal criteria: The Appraisal Statement (2014) and Public Sector Archival Selection Statement (2019) were used to identify public archives.

   Principles for selecting public archives:

Principles	Description
New Zealand public sector authority, functions and activities	Information and records that provide evidence of the authority and performance of the New Zealand public sector (including all public offices and local authorities as well as public/private partnerships and outsourced providers). This includes information and records that illustrate and provide clarity on the functions of governing New Zealand, such as the development and implementation of public policies and programmes in response to national as well as international issues. Particularly where the information and records: • set a legal precedent and/or impact the development and/or implementation of legislation • generate public interest, debate and/or controversy due to the costs involved, risks taken and/or impact created • affect the obligations, responsibilities and/or liabilities of a public organisation • document the development and implementation of innovative, unique or precedent-setting practices, techniques or methods.
Treaty of Waitangi/Te Tiriti o Waitangi	Information and records that provide evidence of recognition and respect for, or fulfilment of the Treaty of Waitangi/Te Tiriti o Waitangi (the Treaty) principles and the Crown's obligations, or in the absence of this, evidence of failure to fulfil these principles and/or obligations. Particularly where the information and records: • provide evidence of negotiations and settlements between the Crown and iwi Māori in relation to the Treaty principles • detail how the principles of the Treaty are being acknowledged and embedded • document strategies to identify opportunities for partnerships with tangata whenua
Individual and community knowledge, identity and memory	Information and records that contribute to the knowledge and understanding of New Zealand, its history, geography, society, culture and achievements, and to all New Zealanders' sense of their local, regional and national identity and legal status, their Māori iwi/hapū and whānau, ethnic or other communities. Particularly where the information and records: • involve land and/or resources considered to have community, cultural, Māori, environmental or heritage significance • enable connections across generations or communities, providing links between the past and the present • contribute to an understanding of New Zealand's history and the health, well-being and development of its society.

2. Gap analysis: DHBs General Disposal Authority (DA262) was reviewed by DHBs and Archives New Zealand to identify areas for changes. The functions have remained the same since DA262 had been issued in 2007.

   The main changes identified were:

   - removing records covered by General Disposal Authorities (GDA6 and GDA7)
   - amending description of classes of records to make them more inclusive
   - adding classes of records that were identified as not covered by DA262

3. Precedent: Disposal decisions made in the previous DHBs General Disposal Authority DA262 remained the same in this new FDA. To inform the decision, other relevant disposal authorities have also been looked at, such as Ministry of Health DA643, National Screening Unit DA539, ESR (the Institute of Environmental Science and Research) DA346, Health Research Council of New Zealand DA512. Other jurisdictions such as Australian health sector records authorities were also examined to provide greater context of the function and to identify classes and possible disposal recommendations.

4. Scheduling: Is designed to simplify the disposal schedule to make it inclusive for easier implementation by grouping classes with like retention periods and disposal actions together where possible.

5. Consultation: Internal consultation was conducted to identify and clarify classes, retention periods and disposal actions via teleconference, workshops, meetings and emails.

   External consultation was conducted to check the proposed disposal recommendations as well as to identify and include agencies that may benefit from being covered by this FDA.

   Feedback and recommendations were incorporated into this document where appropriate.

   A list of those consulted can be found in Appendix 2.

Functional Disposal Authority (FDA2) – Health Administration

Caveat: The disposal actions must only occur after business and legal requirements are met.

Ref.	Class	Description/Examples	Retention period	Disposal action
FDA02.01.00	**Governance, Accountability, Strategic Management** High-level governance records relating to the top-level decision-making processes within a DHB or health sector organisation, and how the decisions are carried out.			
FDA02.01.01	Ministerial approvals and rejections (non-financial), high-level correspondence, and delegations	Records of Ministerial decisions, high-level correspondence and powers delegated by the Minister Examples include but are not limited to: - proposals put up to the Minister - ministerial decision approvals or rejections - high-level correspondence about key ministerial decisions or recommendations, changes in government policies or decision-making, or areas of major public interest, debate and/or controversy - delegations such as a written authority	Retain for a minimum of 10 years after date of last action	Retain as public archives
FDA02.01.02	Board, sub-committees - significant	Records of correspondence, meetings and/or reports about subjects with significant impact and/or influence on key strategies and plans, policies, procedures, and services, and/or have compliance / business ramifications such as reports from special inquiries Examples include but are not limited to: - correspondence to/from the District Health Board, or Executive Committees about significant corporate / health service issues - official records of all meetings such as agendas, signed minutes, and associated reports - final reports - reviews such as significant organisational reviews and business process re-engineering - proposals to establish or disestablish core agency functions - change management proposals	Retain for a minimum of 10 years after date of last action	Retain as public archives

Ref.	Class	Description/Examples	Retention period	Disposal action
FDA02.01.03	Board, sub-committees - short-term value	Records of District Health Boards, or Executive Committees, about subjects with short-term impact / low influence on strategies and plans, policies and procedures or services and which have low compliance / business ramifications Examples include but are not limited to: - correspondence - meetings - reports - reviews - membership - low-level board activities (e.g. delegations, training)	Retain for a minimum of 10 years after date of last action	Destroy
FDA02.01.04	Chief Executive Officer correspondence - significant	Correspondence to/from the District Health Board, Executive committees, key external agencies that are related to high-level corporate and/or health service issues	Retain for a minimum of 10 years after date of last action	Retain as public archives
FDA02.01.05	Establishment of agency	Significant governance / high-level corporate records relating to the establishment of the agency or any predecessor agencies. Examples include but are not limited to: - letters of establishment from Minister	Retain for a minimum of 10 years after date of last action	Retain as public archives
FDA02.01.06	Executive groups	Records outlining the decision-making process of high level executive groups on areas that have significant impact on agency policies, processes, clients and business. Examples include but are not limited to: - official records of meetings and reports	Retain for a minimum of 10 years after date of last action	Retain as public archives
FDA02.01.07	Māori governance	Records that outline the decision-making process of Māori Executive / Governance Groups that have significant impact on agency policies, processes, clients and business; and significant decisions relating to Te Korowai Oranga. Examples include but are not limited to: - official records of Māori Governance meetings and reports	Retain for a minimum of 10 years after date of last action	Retain as public archives

Ref.	Class	Description/Examples	Retention period	Disposal action
FDA02.01.08	Relationship management - significant	Records documenting high-level corporate / stakeholder relationship issues, discussions, meetings, negotiations, agreements, inquiries and reports relating to key agency functions or services Examples include but are not limited to: - correspondence outlining high level discussions with other agencies	Retain for a minimum of 10 years after date of last action	Retain as public archives
FDA02.01.09	Statutory and regulatory appointments	Records outlining statutory and regulatory appointments made by the agency or on its recommendation Examples include but are not limited to: - summary information on persons appointed - appointment terms of reference - official record of appointment decisions	Retain for a minimum of 10 years after date of last action	Retain as public archives
FDA02.02.00	**Health Service Complaints and Incident Management** Records that document medical accidents or "unusual" events (i.e. clinical and non-clinical) relating to individual patients that occurred in the agency providing a health and disability service to report such incidents internally and externally, including subsequent legal matters			
FDA02.02.01	Health service complaints and incident management - significant	Records relating to the management of significant complaints, incidents, investigations, assessment or litigation involving health and disability service and its patients/clients that have major public interest or are controversial, precedent setting in nature or result in significant changes to the agency's service provision, policy or procedures Examples include but are not limited to: - incident report - assessment/investigation report - legal advice - decisions - correspondence	Retain for a minimum of 10 years after date of last action	Retain as public archives

Ref.	Class	Description/Examples	Retention period	Disposal action
FDA02.02.02	Health service complaints and incident management – short-term value	Low-level records relating to the management of complaints, incidents, investigations or litigation involving health and disability services and patients/clients that are not covered by class FDA02.01.01 Examples include but are not limited to: - summaries of patient injuries such as register of patient injuries, index of complaints - incident reports - serious events reports - legal advice - correspondence - final reports	Retain for a minimum of 10 years after date of last action	Destroy
FDA02.03.00	**Audits, Reviews and Evaluations** Records that document audits, reviews and evaluations (both internal and external) relating to clinical and non-clinical (i.e. corporate) processes that do not relate to individual patients.			
FDA02.03.01	Audits, reviews and evaluations - significant	Audits, reviews and evaluations relating to clinical, non-clinical, public health and/or Health and Safety policies and processes that significantly impact on planning, policies, procedures, services, and operational delivery. Examples include but are not limited to: - risk management analysis - final reviews/evaluation reports - quality improvement policy and reports	Retain for a minimum of 10 years after date of last action	Retain as public archives
FDA02.03.02	Audits, reviews, and evaluations – short-term value	Audits, reviews and evaluations relating to clinical, internal and Health and Safety policies and processes that are low risk and/or do not result in changes to agency policy. This also includes routine facilitative records. Examples include but are not limited to: - periodic reports where summarised/consolidated information is documented elsewhere - performance reviews - internal control registers - contractor reviews and evaluations - correspondence	Retain for a minimum of 7 years after date of last action or until administratively no longer required, whichever is longer	Destroy

Ref.	Class	Description/Examples	Retention period	Disposal action
	Cross reference to other Disposal Authorities: • For public health assessment, surveillance and monitoring see *FDA3 Population Health and Wellbeing*.			
FDA02.04.00	**Māori stakeholder relationship management under the Treaty of Waitangi** Records documenting the management of Māori stakeholder relationship and government's obligations under the Treaty of Waitangi			
FDA02.04.01	Treaty of Waitangi and relationships with Māori - significant	Records documenting significant obligations under the Treaty, and relationships with Māori that result in substantial changes or impact on agency policy or direction; profound changes to lives of Māori and their communities Examples include but are not limited to: - Te Urupare Rangapu Partnership Response - claims and settlements involving agency - Māori input into organisational planning and policy (Māori consultative / advisory group) - agreement/memorandum of understanding with iwi and other Māori groups / bodies - official meeting records - major service contracts with Māori, Māori development funding and initiative programmes - terms of reference of agency's Māori Advisory Group - correspondence	Retain for a minimum of 10 years after date of last action	Retain as public archives
FDA02.04.02	Treaty of Waitangi and relationships with Māori - short-term value	Records documenting inputs for Māori stakeholder management under the Treaty of Waitangi and interactions with Māori stakeholders that have low risk and/or do not result in changes to agency policy or to lives of Māori and their communities. This also includes routine facilitative records. Examples include but are not limited to: - meeting records - correspondence - background information	Retain for a minimum of 7 years after date of last action or until administratively no longer required, whichever is longer	Destroy

Ref.	Class	Description/Examples	Retention period	Disposal action
FDA02.05.00	**Risk Management** Records that cover the monitoring and management of issues raised within the compliance and risk management requirement process (both internal and external) relating to clinical and non-clinical processes that do not relate to individual patients			
FDA02.05.01	Issues management - significant	Records documenting incidences, issues, and complaints (unrelated to individual patients) monitored or addressed by the agency that result in significant precedent setting for agency strategies, policies, and business practices, ministerial intervention, major changes in government or agency policies and procedures, high-level discussion, legal action, public concern, or wide media coverage. For example, issues relating to: environmental concerns such as contamination of land or water; general public health concerns such as disease outbreak management; high level employee grievances. These examples are not exhaustive. Examples include but are not limited to: - initial complaints - associated correspondence - investigation/assessment - agency reports - legal advice - records of decisions - records outlining resolution	Retain for a minimum of 10 years after event resolved and all legal and administrative requirements are completed	Retain as public archives
FDA02.05.02	Issues management – short-term value	Records documenting reportable issues, events, and incidents that do not have an ongoing / significant effect on agency policy, practice, precedent, or strategy. Examples include but are not limited to: - documentation and associated contextual information outlining the identification and resolution of an issue, event, or complaint	Retain for a minimum of 7 years after date of last action or when no longer legally required to be retained, whichever is longer	Destroy
FDA02.05.03	Issues monitoring - significant	Records outlining the ongoing monitoring of issues that result in significant changes to agency policies, procedures and strategy for risk and compliance. Examples include but are not limited to: - consolidated final monitoring reports	Retain for a minimum of 10 years after last action	Retain as public archives

Ref.	Class	Description/Examples	Retention period	Disposal action
FDA02.05.04	Issues monitoring – short-term value	Records outlining the ongoing monitoring of issues that do not impact on agency policies, procedures and strategy for risk and compliance. Examples include but are not limited to: - periodic monitoring reports - final reports not covered by class FDA02.05.03	Retain for a minimum of 2 years after date of last action or until administratively no longer required, whichever is longer	Destroy
FDA02.05.05	Emergency management and contingency planning	Records outlining the development, administration, and facilitation of emergency management and contingency planning procedures, standards, and activities.	Retain for a minimum of 2 years after date of last action or until administratively no longer required, whichever is longer	Destroy
FDA02.06.00	**Quality Management** Records documenting the process of compliance with external standards and/or regulations			
FDA02.06.01	Standards and regulations - monitoring and administration	Records of the monitoring and administration of external voluntary and mandatory standards and regulations for organisations in the health sector as well as the facilitation and administration of these standards. Examples include but are not limited to: - compliance with external codes and standards such as ISO standards - standards - resource consents applications - low-level discussion	Retain for a minimum of 7 years after standard / regulation superseded / completed and no longer required for administrative purposes	Destroy
FDA02.06.02	Resource consents	Consents applied for by the DHB and monitored under the Resource Management Act 1991, and other acts, or international regulations relating to environmental compliance. Also includes any significant documentation relating to the application or ongoing maintenance of the resource consent.	Retain for a minimum of 20 years after the consent expires* *Note: If there is no expiry date, retain until business requirements are met	Destroy

Ref.	Class	Description/Examples	Retention period	Disposal action
FDA02.07.00	**Health Workforce Management** Records relating to the recruitment, monitoring, training and support of DHB employees and volunteers			
FDA02.07.01	Personnel files - District Health Boards employees	Personnel files of employees who are: - dismissed for serious misconduct or major criminal offences - non-clinical staff - clinical staff This excludes Chief Executive Officers (or equivalent) and 2nd Tier Managers/Statutory Officers (See GDA6 *Common Corporate Service Public Records*).	Retain for a minimum 7 years after end of employment and when no longer required for administrative purposes	Destroy
FDA02.07.02	Medical specialists In-house training - significant	Summarised significant key records relating to input and involvement with medical training carried out within organisations. For example: - final transcripts of student records - final curriculum - course programmes NOTE: Only one example of each curriculum / course programme / set of materials should be archived.	Retain for a minimum 10 years after date of last action	Retain as public archives
FDA02.07.03	Health workforce training, education and credentials	Records relating to clinical employees' qualifications and registration management, employee training and career development	Retain for a minimum of 7 years after end of employment	Destroy
FDA02.07.04	Monitoring of volunteers	Records covering monitoring / reporting on volunteers within the hospital such as reports on volunteer behaviour	Retain for a minimum of 7 years after date of last action or until administratively no longer required, whichever is longer	Destroy
FDA02.07.05	Administration of volunteer management	Records covering the administration, management of volunteers within the hospital. Examples include but are not limited to: - rosters - correspondence	Retain for a minimum of 2 years after date of last action or until administratively no longer required, whichever is longer	Destroy

FDA02.07.06	Health monitoring records under the Health and Safety at Work Act 2015 (**Asbestos**)	Records reporting on whether a worker's health is being harmed by the work they do, to detect early signs of ill-health or disease.	Retain for a minimum of 40 years after the date of creation	Destroy
Ref.	**Class**	**Description/Examples**	**Retention period**	**Disposal action**
FDA02.07.07	Health monitoring records under the Health and Safety at Work Act 2015 (**all other cases**)	Records reporting on whether a worker's health is being harmed by the work they do, to detect early signs of ill-health or disease.	Retain for a minimum of 30 years after the date of creation	Destroy
	Cross reference to other Disposal Authorities: • For other human resources management records, see GDA6 *Common Corporate Service Public Records.* • For Industry Training Organisations records, see GDA6 *Common Corporate Service Public Records.*			
FDA02.08.00	**Programmes/Project Management** Records documenting the development and delivery of programmes and/or projects			
FDA02.08.01	Programmes/project development and delivery - significant	Records documenting the establishment, maintenance of capital or significant programmes that have a key or wide-ranging effect on or have ongoing relevance to the agency's business operations and communities (e.g. Public Health Programme, Immunisation Programme). Examples include but are not limited to: - programmes/project planning records: concept/design - budget bids - decision-making records - implementation plans - legal advice/opinions - briefing papers - final reports	Retain for a minimum of 10 years after date of last action	Retain as public archives
FDA02.08.02	Programmes/project development and delivery – short-term value	Records documenting the establishment and maintenance of non-significant programmes or projects that have a low-level / administrative effect on business operations or have short-term relevance.	Retain for a minimum of 7 years after date of last action	Destroy

FDA02.08.03	Programmes/project - external	Records of the administration, registration and participation in programmes that are run by external agencies.	Retain for a minimum of 2 years after date of last action or until administratively no longer required, whichever is longer	Destroy

Ref.	Class	Description/Examples	Retention period	Disposal action
FDA02.08.04	Programmes/project administration	Records of the administration and facilitation of project establishment, maintenance, and reporting - financial monitoring - budget management - working group meeting records - periodic progress reporting - project group administrative arrangements and correspondence	Retain for a minimum of 2 years after date of completion, or when superseded / administratively no longer required, whichever is longer	Destroy
FDA02.09.00	**Pharmaceutical Supply and Administration** Records documenting the sale, supply, administration, dispensing and use of pharmaceutical products			
FDA02.09.01	Supply and administration	Records documenting the management of pharmaceutical supplies. Examples include but are not limited to: - prescriptions for controlled drugs - prescriptions - drug information queries - manufacturing worksheets - chemotherapy worksheets - aseptic worksheets	Retain for a minimum of 10 years after date of last clinical entry	Destroy
FDA02.09.02	Stock control and inventory	Records documenting the management of pharmaceutical supplies. Examples include but are not limited to: - fridge temperature chart records - script batch details - requisitions and orders - receipts/records of delivery - repacking worksheets - ward controlled drugs requisitions	Retain for a minimum of 5 years after date of last entry	Destroy
FDA02.09.03	Registers	Records documenting the supply of pharmaceuticals. Examples include but are not limited to: - restricted medicines book	Retain for a minimum of 10 years after date of last entry	Destroy
	Cross reference to other Disposal Authorities: • For the distribution of pharmaceuticals for clinical trials, see FDA3 *Population Health & Wellbeing* - Clinical trials research management.			

Ref.	Class	Description/Examples	Retention period	Disposal action
FDA02.10.00	**Human Tissue Supply and Management (Human Tissue Act 2008)** The ordering, receipt and control of human tissue or tissue products used for patient treatment and care. (Human tissue defined by Human Tissue Act 2008, Part 1 s7)			
FDA02.10.01	Supply and management	Records documenting the administration of human tissue and tissue products' supply. Examples include but are not limited to: - orders and stock receipts - storage and tests - disposal of unused expired products - movement and tracking records	Retain for a minimum of 10 Years after date of last action	Destroy
	Cross reference to other Disposal Authorities: • For new-born blood spot cards (i.e. Guthrie cards), see DA539 *Ministry of Health* • For financial transactions, see GDA6 *Common Corporate Service Public Records*. • For patient information, and diagnostic and testing services, see FDA1 *Personal Health Information*.			
FDA02.11.00	**Sterilisation of Medical Equipment** Records relating to the sterilisation of surgical instruments and equipment used in procedures			
FDA02.11.01	Equipment sterilisation	Records documenting the administration of equipment sterilisation. Examples include but are not limited to: - sterilisation print outs - log book/sterilisation register used to keep a record of a sterilisers' performance	Retain for a minimum of 10 years after date of last entry	Destroy
FDA02.12.00	**Service Provisions for Patients** Records relating to facilitating service provisions such as food and education services that are not related to the clinical care			
FDA02.12.01	Patient food services	Records documenting the administration of patient food services. Patient meal and diet information that is not already held on patient files	Retain for a minimum of 10 years after date of last entry	Destroy

FDA02.12.02	Education management for patients	Records relating to the management of such areas as training, schooling for patients. Examples include but are not limited to: - correspondence with Ministry of Education - correspondence school - DHB schools - school materials provided by external education providers	Retain for a minimum of 7 years after end of employment	Destroy

Ref.	Class	Description/Examples	Retention period	Disposal action
FDA02.13.00	**Mortuary Management** Records documenting the administration and management of mortuaries			
FDA02.13.01	Mortuary records	Records documenting the administration and management of mortuaries. Examples include but are not limited to: - mortuary registers - post mortems - release forms - cremation forms	Retain for a minimum of 10 years after date of last entry	Destroy

Significant records

Significance may be determined by the following characteristics:

- Department is the lead agency with another government agency or private organisation;
- Substantial changes to or influences on government policy or direction;
- Results in a significant government project or programme;
- Considerable economic impact;
- Long term environmental impact on land, water or air;
- Significantly impact the lives of individuals and sets precedence for community behaviour;
- Public reaction or sensitivity;

- Public safety implications;
- Setting a significant precedent in primary functions and activities;
- Lead or significantly contribute to a major investigation or formal inquiry;
- Involving innovative, unique or precedent-setting practices, techniques or methods;
- Providing evidence of negotiations and settlements between the government and iwi Māori in relation to the Treaty principles

Appendix 1 – List of agencies covered by this FDA

Agencies	Coverage	Note
All District Health Boards		
NZ Health Partnership Limited		

Appendix 2 – List of stakeholders consulted

Internal consultation

Following stakeholders participated in a series of teleconference, workshops, meetings and/or emails during the process of drafting the disposal schedules.

Individual	Position and Team	Organisation
[Name removed]	Information Services Manager	ESR
[Name removed]	Acting General Counsel/Quality & Patient Safety	Bay of Plenty DHB
[Name removed]	Clinical Team Leader and Privacy Officer	South Canterbury DHB
[Name removed]	Corporate Records Advisor	Waikato DHB
[Name removed]	Corporate Records Advisor	Waikato DHB
[Name removed]	Records and Information Manager	Southern DHB
[Name removed]	Manager, Planned Services and Administration	Wairarapa DHB
[Name removed]	Corporate Records Manager	Waitemata DHB
[Name removed]	Manager of Administration & Communications	MidCentral DHB
[Name removed]	Clinical Records Manager	Canterbury/West Coast DHB
[Name removed]	Corporate Legal Counsel	NZ Health Partnership Limited
[Name removed]	Corporate Records Manager	Auckland DHB
[Name removed]	Information Management Adviser	Capital & Coast DHB
[Name removed]	EA and Professional Advisor	Whanganui DHB
[Name removed]	Clinical Research Office Manager	Capital & Coast DHB
[Name removed]	Clinical Records Manager	Hutt Valley DHB
[Name removed]	Clinical Records Manager	Whanganui DHB
[Name removed]	ICU Specialist, Clinical Leader	Capital & Coast DHB
[Name removed]	Manager, Knowledge Services	Ministry of Health
[Name removed]	Corporate Legal Manager	NZ Health Partnership Limited
[Name removed]	Document Controller	Counties-Manukau DHB
[Name removed]	Quality Risk Clinical Governance Director	Lakes DHB
[Name removed]	Records Manager	Hawkes Bay DHB
[Name removed]	Midwifery Quality & Safety Programme Co-ordinator	Capital & Coast DHB

External consultation

Organisation/Individual	Position and Team	Responded	Significant Feedback

[Summary of feedback]