

Article

Not peer-reviewed version

Records Management Systems Employed by Registries in Zambia: A Case Study of Selected Departments in Health and Education in Livingstone

Sututu Imasiku^{*}, Kadeyo Mutale Kuyela, Dalitso Mvula

Posted Date: 8 April 2026

doi: 10.20944/preprints202604.0545.v1

Keywords: records management systems (RMS); mixed-methods; education and health



Preprints.org is a free multidisciplinary platform providing preprint service that is dedicated to making early versions of research outputs permanently available and citable. Preprints posted at Preprints.org appear in Web of Science, Crossref, Google Scholar, Scilit, Europe PMC.

Copyright: This open access article is published under a [Creative Commons CC BY 4.0 license](#), which permit the free download, distribution, and reuse, provided that the author and preprint are cited in any reuse.

Disclaimer/Publisher's Note: The statements, opinions, and data contained in all publications are solely those of the individual author(s) and contributor(s) and not of MDPI and/or the editor(s). MDPI and/or the editor(s) disclaim responsibility for any injury to people or property resulting from any ideas, methods, instructions, or products referred to in the content.

Article

Records Management Systems Employed by Registries in Zambia: A Case Study of Selected Departments in Health and Education in Livingstone

Sututu Imasiku *, Kadeyo Kuyela Mutale and Dalitso Mvula

The University of Zambia

* Correspondence: Sututu.imasiku@unza.ac.zm

Abstract

This study investigated the records management systems employed in the education and health sectors in Zambia, with a focus on their role in improving service delivery and decision-making. Using a mixed-methods triangulation design, data was collected through surveys, interviews, observations from registry users and key informants with a sample size of 150. 100 teachers were purposively sampled from the Education department specifically at the District Education Secretary registry with 5 key informants and 40 from the Livingstone Teaching Hospital registry with 5 key informants. Chi-square t-test and descriptive analysis was used in quantitative data, while thematic analysis was used for qualitative data. The research demonstrated that Electronic Health Record (EHR) systems are extensively utilised within the healthcare domain with 100% (n=40) response whereas responses at 100% (n=100) in the Education indicated a manual records management system was used. The study further explored the speed and efficacy of the two systems in record retrieval. Majority of records were accessed in a matter of minutes (70%, n=28) or seconds (20%, n=8) in the Health Sector, contrary to the Education domain where it was discovered majority took minutes (51%, n=51), 17% (n=17) took seconds and some records took days to be retrieved (8%, n=8). Furthermore, the study determined that records retrieval systems were generally viewed as effective, especially within the healthcare sector, despite the ongoing presence of challenges such as insufficient IT infrastructure, data integration difficulties, and deficient records management practices. Overall, while digital transformation has improved records management, the study highlights the need for continued investment in technology, staff training, and system integration to enhance efficiency and reliability across sectors.

Keywords: records management systems (RMS); mixed-methods; education and health

1. Introduction

In an era characterised by rapid technological advancements, the effective management of records has become pivotal for the streamlined functioning of governmental institutions. The utilisation of records management systems stands as a cornerstone in ensuring the seamless handling, storage, and retrieval of records, particularly within the registries of government departments. In recent times, the efficient management of records within government institution registries had become increasingly crucial for effective service delivery and decision-making processes (Sindle, 2023).

Electronic records provided comprehensive documentation of essential government functions and provided records necessary to protect government and citizen interests. Therefore, their proper management was essential to e-government as it sought to facilitate interactive, vertical collaboration and participation of citizens, businesses, and other governments and reduce the cost of service delivery (Bwalya, 2011). The preservation of significant documents and other records was also crucial for the historical record (Sindle, 2011). However, despite the growing adoption of information

systems, there remained a need to comprehensively investigate the challenges, opportunities, and overall effectiveness of these systems in the context of managing records within government registries.

In this light, the government had put across great effort, such as launching a Public Service Records Management Policy in 2012 (Mulauzi, 2015), whose overall objective is implementing an effective and efficient records management system to ensure the provision of quality services, and rolling out information systems such as the Electronic Management Records System (EMIS) in the education sector, the Health Management Records System (HMIS) in the health sector and many more. Regardless, challenges such as poor records management were still observed through late retrieval of documents from registries, and in some cases, the records are never found. Another problem that was observed was slow or lack of adoption of digital migration. Most registries still heavily relied on paper-based documentation, which most certainly affects the rate of streamlined operations (Mulauzi, 2015).

This study therefore sort to provide valuable insights into the use of Information systems in the management of records within government institution registries, with a focus on the records management systems employed in Education and Health department. The findings would contribute to informed decision-making for policymakers, administrators, and IT professionals working in similar contexts, ultimately aiming to enhance the overall effectiveness of records management systems in government settings.

2. Literature Review

According to Malak (2023), records management systems were the backbone of any organisation. They helped in managing records in a structured way. Malak (2023) defined a records management system as a computer system used to track and store records. A record system could be used to track anything from financial records to inventory levels and customer records. Malak (2023) further stated that many records systems were designed to work with a specific type of record, such as medical records or product records. They were used to helped organisations manage the record lifecycle from creation to disposition.

Probe's (2018) perspective, the current state of knowledge management seemed to be very relaxed and was mostly based on what each organisation felt was best. He argued that most of the knowledge on management was dependent on people. No formal structure was used, but rather personal methods and experiences. This posed difficulties for records management sustainability later in the future. Frobes (2018) explained that there was no international standard in the management of knowledge but only the International Standards Board just reviewing the possibility of a standard structure. Each business and consulting company modified knowledge management to fit its own need.

In the study by Assaf (2022), which aimed to understand the nature, strengths, and weaknesses of two university record systems and evaluate their effectiveness of the adopted hardcopy record-management systems. The findings revealed non-standardised institutional practices, absence of integrated record systems significantly constrained student progression. Assaf et al (2022) argued that although hardcopy documentation was sometimes preferred to mitigate forgery and meet employment requirements, it often resulted in delays, increased costs, and restricted access to essential records, thereby undermining efficient student mobility.

Dada et al (2024) adds to challenges faced in his study, *Records Management Practices and Organizational Effectiveness of Universities Registries in South-West, Nigeria* which included issues such as poor record-keeping, loss of documents, and the increasing volume of paperwork, data security and privacy due to the shift toward electronic records management. The study emphasized the need for improved systems and staff capacity development if the management of records had to be effective. Furthermore, in the study, *Student Registration and Records Management Services towards Digitization* by Fololo et al (2022), respondents experienced moderate challenges, particularly related to incomplete admission requirements and non-adherence to enrolment schedules. The findings

highlighted gaps in service delivery and emphasized the need for more efficient, accessible enrolment systems, alongside the adoption of digitized records management to enhance effectiveness

Warmick (2021) mentioned that, Zambia's Ministry of Education (MOE) launched its sector reform programme in 1999, the Basic Education Sub-Sector Investment Programme (BESSIP), for the period 1999–2006. The main objectives for BESSIP were to increase enrolment rates and improve learning achievement at the primary school level by enhancing ongoing programmes and developing new ones. As a part of BESSIP, the EMIS and Related Activities programme began its work in December 2001 to improve the capabilities of the MOE to collect, organise, process, store, share, and disseminate education records for informed planning and management of education at all levels by creating an Education Management Records System (EMIS), capacity building, monitoring and so forth (Warmick, 2021).

Through these tasks and the collective efforts of project staff and staff of the Ministry of Education, specifically the members of the Directorate of Planning and Records, the project built the capacity of the MOE to obtain, manage, report, use, and demand good records for good decision-making. The programme had strengthened the existing EMIS platform that provided the MOE at all levels with access to records and enabled the MOE to use real records to plan and to project its needs and resource requirements (Warmick, 2021).

One records management system example Mulolani (2022) cited was the Enhanced Smallholder Agribusiness Promotion Programme (E-SAPP), which was developed with financial support from the International Fund for Agricultural Development (IFAD). The E-SAPP was a web-enabled records management system (RMS) which provided experts and agriculture staff to capture, store and share records on the programme interventions in a systematic and efficient manner with its target farmers and the public (Mulolani, 2022). The unique feature about this application was that it had a web portal and mobile application. This integrated system was expected to pertinently provide records to all the districts countrywide. The system had been developed by the University of Zambia and Smart Zambia Institute (Mulolani 2022).

According to Phiri (2022), many organisations were still faced with challenges in records management. Studies have revealed that delayed retrieval of active records, management policy, up-to-date records retention and disposal schedules, lack of proper storage facilities, security issues of the records and guidelines for managing electronic records were among the notable challenges. The study had also shown that the organisation had no formal records management programmes in place. It was therefore realised that the organisations needed a better, more efficient and more uniform way of creating, sorting, storing and destroying the records; thus, the model (Phiri, 2022).

3. Objective

To investigate the Records Management Systems employed by the Education and Health Departments in Zambia.

4. Methods

This study adopted a triangulation study design which included a mixed approach of quantitative and qualitative research designs. This design relied on survey questionnaires, structured interviews, and observation as a means of collecting data. The quantitative approach relied on the survey questionnaires, whilst the qualitative approach relied on structured interviews. The qualitative design method was suitable for this research because it enabled the researcher to interview and investigate the target group of participants, registry users, to get the information that was required for the research and needed to create the survey questionnaire. A sample size of 5 key informants, who included the District Education Board Secretary (DEBS) officer, data clerks, human resources, and IT managers from an education registry facility, and 5 from health registry was drawn. Furthermore, a purposive sampling was used to select 100 end-users of the DEBS registry, who were teachers, and 40 from the health facility, who were patients. In order to collect data from the selected

registries, permission was sought from the district education board office and the individual teachers. Similarly, informed consent for the participating patient and registry clerks before they responded was obtained. Quantitative records were analysed using SPSS software (Statistic Package for Social Science). For qualitative records, in-depth interviews were administered and analysed using the thematic analysis approach.

5. Results

5.1. Profile of Respondents

Out of the 100 teacher respondents, 60 were female (60%) while 40 were male (40%). From the health sector, 40 participants who were all patients were purposively selected to complete the questionnaires as they proceeded to the registry. Among these participants, 23 were female (58%) and 17 were male (42%). All the five informants from the DEBS were successfully interviewed while only three out of the five key informants interviewed from the hospital registry. This resulted in a total of 148 participants, representing a response rate of 98%.

Table 1. Gender of Respondents.

Ministry of Education			Ministry of Health		
Variables	Frequency	Percentage	Variables	Frequency	Percentage
Male	40	40%	Male	17	42%
Female	60	60%	Female	23	58%
Total	100	100%	Total	40	100%

5.2. Current Records Management Systems Employed by the Education and Health Departments in Zambia

The results showed that 37 out of 40 respondents (92%) said that the Electronic Health Record (EHR) system is the most common Records Management System (RMS) used to retain and get records in the registry. One key informant mentioned that

“Records were captured on both electronically and manually. The electronic RMS was known as SmartCare records system.”

This very high percentage from the participants shows that digital record management procedures are widely used in the register. This shows a shift toward better efficiency, accessibility, and accuracy in managing information. None of the respondents (0%) said they used database systems on their own, which could mean that either standalone database systems aren't used or that these systems are included into EHR platforms instead of being recognised as separate systems. Meanwhile, a small number of people, 3 out of 40 (8%), said they still use manual methods. This shows that old paper-based systems are still around but aren't used very much.

On the other, all the 100 participants from the education sector indicated that records in the registries were managed using a manual system giving a 100% response. One of the respondents from the interview stated,

“We store and retrieve our records using a manual system. Teacher's records are shelved and stored using a number system classification system. To retrieve the file, a client needed to provide their Teaching service (TS) number and this was used to search through the shelves.”

Overall, the distribution shows that electronic systems were used in the Health sector known as SmartCare system while the education sector was still using physical way

Table 2. Type of Information Management Systems (IMS) used to Keep and Retrieve Record in the Registry.

Education			Health		
Variables	Frequency	Percentage	Variables	Frequency	Percentage
Electronic Education Record (EER) Systems	0	0	Electronic Health Record (EHR) Systems	37	92%
Database System	0	0	Database System	0	0%
Manual way	100	100	Manual way	3	8%
Total	100	100%	Total	40	100%

5.3. Retrieval Time

The findings showed that there were notable differences in the time taken to complete processes between the education department and the Health department. In Education, the majority of respondents, (n=51, 51%), reported that their records were retrieved within minutes, followed by 24 (24%) who indicated hours, (n=17, 17%) seconds, and (n=8, 8%) days. In comparison, in the health department, most respondents, (n=28, 70%), reported that their records were retrieved within minutes, while (n=8, 20%) indicated seconds and (n=4, 10%) hours, with no respondents, (n=0, 0%), reporting days. The finding also revealed that although both departments retrieved records within seconds and minute, the Health department had relatively quicker turnaround times, as a higher proportion of respondents reported completion within minutes and none indicated that processes took days, unlike in the Education where retrieval extended to days.

Table 3. Retrieval Time.

Education			Health		
Variables	Frequency	Percentage	Variables	Frequency	Percentage
Seconds	17	17%	Seconds	8	20%
Minutes	51	51%	Minutes	28	70%
Hours	24	24%	Hours	4	10%
Days	8	8%	Days	0	0%
Total	100	100%	Total	40	100%

5.4. Effectiveness Records Retrieval

In the Education department, a larger share of participants, (n=33, 33%), indicated that the systems were very ineffective. This was followed by (n=24, 24%) who considered retrieval time as average, (n=19, 19%) indicated ineffective, (n=14, 14%) rated effective, and the minority 10 (10%) indicated the records system was very effective. On the other hand, responses from the Health reflected a more positive outlook. Most respondents, (n=15, 37%), reported that the systems were effective, while (n=11, 28%) indicated that the records system was as very effective. The minority at (n=5, 12%) viewed the systems as very ineffective, and none, 0 (0%), selected average or ineffective. Overall, the pattern of responses indicates that systems in the Health were generally seen as working well, whereas those in the Education were more often viewed as performing poorly.

Table 4. Effectiveness Records Retrieval.

Education			Health		
Variables	Frequency	Percentage	Variables	Frequency	Percentage
Very Effective	10	10%	Very Effective	11	28%
Effective	14	14%	Effective	15	37%
Average	24	24%	Average	0	0%
Ineffective	19	19%	Ineffective	0	0%
Very Ineffective	33	33%	Very Ineffective	5	12%
Total	100	100%	Total	40	100%

5.5. Challenges Faced with RMS in the Hospital

The study also discovered some challenges affecting systems in the Education and the Health. In the Education, the most commonly reported challenge was data integration issues, cited by (n=32, 80%) of respondents, followed by staff incompetence at (n=29, 73%), inadequate IT equipment at (n=27, 68%), and poor records management at (n=15, 38%). One key informant stated that,

“Our records are managed manually. Data integration cannot easily be achieved. There is a need to go digital which would enable data integration.”

In Health department, most of the respondents reported inadequate IT equipment as the leading challenge, indicated by (n=15, 38%), followed by data integration issues at (n=11, 28%), poor records management at (n=9, 23%), and staff incompetence at (n=5, 13%). Similarly, a respondent highlighted that,

“Our records are managed by SmartCare which makes them easy to retrieval. But we face challenges of connectivity often and this slows work. We therefore need strong WIFI connectivity”

Table 5. Challenges Faced with RMS.

Education			Health		
Variables	Frequency	Percentage	Variables	Frequency	Percentage
Staff incompetence	29	73%	Staff incompetence	5	13%
Data integration issues	32	80%	Data integration issues	11	28%

<i>Inadequate IT equip</i>	27	68%	<i>Inadequate IT equip</i>	15	38%
<i>Poor records management</i>	15	38%	<i>Poor records management</i>	9	23%

5.6. Chi-Square Analysis of Effectiveness

The Chi-square analysis was performed to ascertain the existence of a significant correlation between the sector (health and education) and the efficacy of record retrieval systems. The Chi-square table shows a calculated value ($\chi^2 = 35.08$) that is higher than the crucial value of 9.49 at 4 degrees of freedom and a 0.05 level of significance. This study shows that there is a statistically significant link between the industry and how well record retrieval systems work. Consequently, the null hypothesis, which posits the absence of a link between the two variables, is dismissed. Based on the data we saw, it's clear that the health sector is more effective. A lot of people in the health sector said their systems were "very effective or effective, and none said they were average or ineffective. On the other hand, more people in the education sector said their systems were average, ineffective, or very ineffective, which means they didn't work as well.

Effectiveness	Health (O)	Health (E)	(O-E) ² /E	Education (O)	Education (E)	(O-E) ² /E
Very Effective	11	6	4.17	10	15	1.67
Effective	15	8.29	5.43	14	20.71	2.18
Average	0	6.86	6.86	24	17.14	2.75
Ineffective	0	5.43	5.43	19	13.57	2.18
Very Ineffective	5	10.86	3.16	33	27.14	1.27
Total χ^2			35.05			10.05

6. Discussion

6.1. Current Records Management Systems Employed

The study revealed that 40 respondents (100%) said that the Electronic Health Record (EHR) system is the most common Information Management System (IMS) used to retain and get records in the Health departments. Black, et al. (2011) discovered that EHR systems are extensively utilised in healthcare environments due to their enhancement of efficiency in record storage, retrieval, and overall service delivery. Their research shows that integrated digital systems commonly take the role of independent databases. This supported your result that none of the respondents mentioned separate database systems. Kruse, et al. (2018) stated that EHR adoption has become the norm in modern healthcare since it makes managing data easier and lessens the need for paper records. But they also said that certain facilities still have some manual systems, which is in line with your result that just a small number (8%) of respondents still use manual methods.

On the other hand, the study found out that a manual system referred to as Number System was adopted in the Education department. This aligned with Frobe's (2018) perspective which ascertained that records management was mostly based on what each organisation felt was best and was dependent on people. He argued that this posed difficulties for records management sustainability later in the future. It's also worth noting that, it is expected for the education department to have rolled out an information system called Education Management Information System (EMIS)

(Warmick et al 2021). Tsabedze (2020) argued that weak institution policies, procedures to guide the management of e-records, the lack of knowledge and skills in the management of e-records contributed to lack of e-records systems in the education sector. Dada et. al (2024) found similar findings as Tsabede (2020) and further recommended that there was need improve e-records management policy framework and investing in regular training of e-records staff if registries had to effectively adopt information management systems.

6.2. Retrieval Time

The study established that (70%, n=28) said that it only takes a few minutes to get records in the health registry, which meant that the system was rather quick. A smaller group (20%, n=8) said that retrieval takes seconds, which shows that the records management system is very efficient and may be well-organised or digitized. Buntin et al. (2011) discovered that Electronic Health Record (EHR) systems markedly enhance the speed of information retrieval, with the majority of records available within minutes or seconds in effectively designed systems. None of the people who answered said that retrieval took days, which means that long delays are not a big problem. Ajami and Bagheri-Tadi (2013) said that digital health information systems make it easier to get to patient data quickly, which cuts down on the time it takes to find it compared to manual systems. However, 10% (n=4) said that retrieval takes hours, which could mean that there are delays caused by problems like bad network, bad storage systems, technical issues with system (Dada, 2024). The study emphasized the need for improved systems and staff capacity development if the management of records had to be effective.

In Education, the majority of respondents, (n=51, 51%), reported that their records were retrieved within minutes, followed by 24 (24%) who indicated hours, (n=17, 17%) seconds, and (n=8, 8%) days. The education domain recorded relatively longer time in records retrieval. Fololo (2022) highlighted that use of manual systems was prone to gaps in service delivery and emphasized the need for more efficient, accessible enrolment systems, alongside the adoption of digitized records management to enhance effectiveness. Malolani (2022) further added that use of e-records systems enabled easy storage and sharing of records and in an efficient manner with its target public.

6.3. Effectiveness Records Retrieval

The study revealed that most people in the health industry think that records retrieval works well. Most of the people who answered, 26 out of 40 (65%), said the system was either effective (37%) or very successful (28%). This suggests that retrieval mechanisms usually help people get to information quickly. Notably, none of the respondents ranked the system as average or ineffective, which suggests that people are more likely to have strong favourable or negative opinions about it than neutral ones. However, 5 (12%) of the people who answered said the system was very ineffective, which shows that there are still problems in some places.

Electronic Medical Record (EMR) has a powerful and significant impact in improving the safety, efficiency, and quality of care while protecting patient's privacy and personal rights (Aldosari, 2014). EMR has become an essential part of our modern healthcare field as it is concerned with the complete management of information of different patients, which includes retrieving test results, medication prescription, and patient history. Many have considered EMR as an excellent tool for imparting better quality of health care, enhanced clinical decision-making skills, and reduction in long-term medical expenses (McBride et al., 2012).

In the Education, most participants perceived the records management systems as ineffective, particularly regarding retrieval time. This aligns with the Chi-square result ($\chi^2 = 35.08$, $df = X$, $p < 0.05$), showing a significant association and suggesting that these perceptions reflect real issues rather than chance. The findings highlight the need to improve system effectiveness to better support academic processes. Assaf et al (2022) argued that although hardcopy documentation did actually result in delays, increased costs, and restricted access to essential records which consequently undermined efficient.

6.4. Challenges Faced with RMS

The study revealed that the biggest problem with Records Management Systems (RMS) in the hospital is not having enough IT equipment, which 15 respondents (38%) said was the case. This suggests that having limited technological infrastructure made it much harder to optimize the benefits of information management systems. In the education department, the most observed challenge was data integration which was not possible due to the reliance on hardcopy. Problems in data integration hindered easy connection and sharing of information between multiple platform (Assaf et al, 2022). Other challenges reported were staff incompetence and generally poor records management frameworks. Khalid (2009) and Phiri (2022) added that most learning institutions failed to undertake records management effectively due to challenges such as inadequate financing, inadequacy of equipment's, inadequate manpower institutional roles and relationships, legal issues, intellectual property rights, and metadata and technical problems, not enough training.

7. Conclusion

In conclusion, the survey shows that Education department uses manual systems referred to as the Number System to manage the registry's records while the Electronic Health Record (EHR) systems were used in the Health department. Findings revealed that the EHR used in the health sector was more efficient as it sped and eased access records retrieval. Most records could be accessed in a few minutes or seconds, which showed that the system was working well. Records retrieval took slightly longer with the Number Records System used in the education departments with some records only retrieved after some days. However, occasionally retrieval time was slowed in the health registry which showed that there were areas that needed to be improved such as network connectivity or systems architecture. Ongoing problems, such as poor IT infrastructure, problems with data integration, staff incompetence and poor records management methods was also revealed in the survey which affected efficacy in records management. In conclusion, evidence suggests that digital systems are much faster and better in managing records. To optimize their efficiency, IT infrastructure, network and similar challenges should be curbed. The study recommends the need to invest more in technology, train workers better, and integrate digital systems better.

8. Implications for Practice

1. Healthcare facilities should invest in adequate IT infrastructure and equipment to ensure effective implementation of Electronic Health Record (EHR) systems and enable quick retrieval of patient records.
2. To address integration challenges and enhance accessibility of information across departments, information management systems should be expanded to cover other critical information sections within both the Education and Health sectors.
3. To improve efficiency in records management within the Education sector, institution should adopt digital or integrated information management systems.
4. Registries should adopt standardized records management practices and provide continuous training to staff in order to optimize the use of information management systems.

References

- Ajami, S., & Bagheri-Tadi, T. (2013). Barriers for adopting electronic health records (EHRs) by physicians. *Acta Informatica Medica*, 21(2), 129–134. <https://doi.org/10.5455/aim.2013.21.129-134>
- Aldosari, B. (2014). Patients' safety in the era of electronic medical records. *Journal of Health Informatics in Developing Countries*, 8(1), 1–9.
- Assaf, M. et al. (2022) Evaluating the effectiveness of student-record systems in conflict-affected universities in northwest Syria relative to student transition and mobility. *International Journal of Educational Development Open*,

- Black, A. D., et al (2011). The impact of eHealth on the quality and safety of healthcare: A systematic overview. *PLoS Medicine*, 8(1), e1000387. <https://doi.org/10.1371/journal.pmed.1000387>
- Buntin, M. B., et al (2011). The benefits of health information technology: A review of the recent literature. *Health Affairs*, 30(3), 464–471. <https://doi.org/10.1377/hlthaff.2011.0178>
- Bwalya, K. J. (2011). Issues affecting adoption of e-government in Zambia. *International Journal of Information and Communication Technology Research*, 1(5), 207–218.
- Dada, R.O. and Ogunwemimo, T. (2024). [Title of the article]. *International Journal of Research and Innovation in Social Science (IJRISS)*, June 2024. <https://doi.org/10.47772/IJRISS.2024.806005>
- Falolo, V.M. et al (2022) Student Registration and Records Management Services towards Digitization. *International Journal of Educational Management and Development Studies*
- Gopal, G., et al (2019). Digital transformation in healthcare: Review and future directions. *Healthcare Informatics Research*, 25(4), 1–10.
- Khalid, K. (2009). Records management practices in Kenyan institutions. *African Journal of Library, Archives and Information Science*, 19(2), 1–10.
- Kruse, C. S., et al (2018). Barriers to electronic health record adoption: A systematic literature review. *Journal of Medical Systems*, 42(12), 1–10. <https://doi.org/10.1007/s10916-018-1079-6>
- Kumar, M., & Mostafa, J. (2020). Electronic health records: A comprehensive review. *International Journal of Medical Informatics*.
- McBride, S., et al (2012). Statewide study to assess nurses' experiences with electronic health records. *Computers, Informatics, Nursing*, 30(6), 306–315.
- Mulauzi, F. (2015). Records management practices in support of service delivery in Zambia. Lusaka: University of Zambia Press.
- Mulauzi, F., et al. (2015). An assessment of records management practices in government ministries in Zambia. *Journal of the South African Society of Archivists*, 48, 45–60.
- Sindle, M. (2011). The importance of records preservation in public institutions. *Records Management Journal*, 21(2), 120–130.
- Sindle, M. (2023). Digital transformation and records management in public sector institutions. *Journal of Information Governance*, 15(1), 33–48.

Disclaimer/Publisher's Note: The statements, opinions and data contained in all publications are solely those of the individual author(s) and contributor(s) and not of MDPI and/or the editor(s). MDPI and/or the editor(s) disclaim responsibility for any injury to people or property resulting from any ideas, methods, instructions or products referred to in the content.