

Current Implementation Position for Low and Medium Risk Recommendations
issued in Quarter 3 2019/20

RECOMMENDATIONS	INITIAL MANAGEMENT RESPONSE incl. PLANNED IMPLEMENTATION DATE (PID)	CURRENT STATE OF IMPLEMENTATION PER MANAGER
Corporate Governance – 5 December 2019		
Completed gifts and hospitality forms should be covered by the corporate document retention policy.	<i>Democratic Services Manager & Deputy Monitoring Officer:</i> Details of how this will operate to be discussed with the Information Governance Manager with the aim of putting process in place by end of the financial year. PID: 31 March 2020	Work on this was not undertaken due to the impact of Covid 19. Agreed in October 2020 that the retention should be 7 years within the central register and retained on officers personnel file for length of service plus 7 years.
Minutes should be taken for all meetings of the Risk Management Group, with nominated 'deputies' taking minutes when the Insurance & Risk Officer is unable to attend.	<i>Audit & Risk Manager:</i> Agreed. PID: Immediate	No further response required – recommendation implemented as per initial response.

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<p>Consideration should be given to the remit of the group and whether there is a need for a specific group or if these discussions could be covered by SMT when they consider the Significant Business Risk Register.</p>	<p><i>Audit & Risk Manager:</i> We have considered this and feel that common themes are emerging, albeit not necessarily reflected in the minutes. There is tremendous benefit in hearing about other services' risks as there are always lessons to be learned corporately and we feel that this is the right forum to provide that opportunity. These issues do need to be captured better and, perhaps more importantly, communicated "outwards" more effectively so that, indeed, lessons can be learned across the organisation. This will be considered at the next meeting. PID: Not applicable.</p>	<p>The issue has now been considered by the Risk Management Group. It has decided that that there is much to be gained from it continuing to discuss Council-wide risks, the main one being that its representatives can disseminate learning points back to services.</p>
<p>Sundry Debtors – 28 November 2019</p>		

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<p>Except in exceptional cases, which should be agreed by the Head of Finance, invoices should be issued before services have been provided.</p> <p>Where invoices are not issued in advance, the circumstances should be recorded and kept under review by the relevant Head of Service and Head of Finance.</p> <p>Where there is no pre-agreed reason for the delay, the relevant Head of Service should provide authorisation explaining the reason for the delay when submitting the documentation for the raising of the invoice.</p>	<p><i>Head of Finance:</i> A meeting is going to be held to decide how the recommendations will be actioned. PID: End of December 2019</p>	<p>It was agreed for an analysis of debtors raised retrospectively to be shared with SMT. Work commenced on this analysis and report for SMT but this got overtaken by the pandemic and other priorities.</p> <p>With work now concentrating on the implementation of the new Financial Management System, this issue will be picked up as part of that work and the training of users.</p>
Treasury Management – 9 October 2019		
<p>The Treasury Management Practice statements should be revised to reflect the proper status of Internal Audit in the control environment and risk-based determination of audit frequencies.</p>	<p><i>Principal Accountant (Capital and Treasury):</i> The Treasury Management Practices will be reviewed for the 2020/21 Treasury Management Strategy. PID: February 2020</p>	<p>TMP1 and TMP7 were updated in the Treasury Management Strategy report 20/21 from 24/3/20.</p>
Infrastructure Security and Resilience – 29 October 2019		

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<p>Firewall appliances should be upgraded to CISCO's recommended Code version.</p>	<p><i>ICT Services Manager:</i> Agreed. Some of the Council's firewalls are currently being replaced. Once this is complete, all remaining Firewalls will be updated and maintained to Cisco's latest recommended code version. PID: April 2020</p>	<p>Corporate Firewalls (Riverside House) – Upgrade took place and complete 8th February 2020. Outstanding is the small remote site Firewall ASA's. This part of the project was delayed due to COVID-19. Consultancy day took place 15th September. We have built all the new devices but now have to try and get site access to replace 15 firewalls. (Note - We will need annual consultancy budget to do an annual Corporate Firewall Upgrade approx. £3000). January 2021</p>
<p>The Cisco 'Password Policy' security settings should be reviewed to enforce password history (12) and password minimum length (8).</p>	<p><i>ICT Services Manager:</i> Agreed. The Council operates several Firewalls and the changes need to be implemented cautiously to avoid lockouts. PID: January 2020</p>	<p>Outstanding. This has been delayed because of Covid-19. January 2021</p>

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<p>The Cisco IPS system should be actively configured to block all malicious network traffic.</p>	<p><i>ICT Services Manager:</i> Agreed. IPS was originally configured to run in monitoring mode to obtain sufficient data to identify network false positives. Discussions were already being undertaken at the time of the audit to schedule an appropriate time for IPS to become active. PID: February 2020</p>	<p>IPS has been put in monitor mode. 8th February we discussed with BT about going live but the device needed loads of management and sensor updates. These updates are now complete after a total of 8 hours of weekend working. The first stage of updates was done 15th March 2020 and the final stage was completed 3rd October 2020. In process of arranging date to go live with IPS. January 2021</p>
<p>Information Systems Policies – 25 October 2019</p>		
<p>The 'Information Security Incident Reporting' policy should be reviewed and updated.</p>	<p><i>Information Governance Manager:</i> The policy is already under review with target completion date (for adoption) of December 2019. PID: 23 December 2019</p>	<p>Completed and published - titled 'Information Security Incident Management Policy'</p>
<p>Ongoing work to update data retention, data handling and classification policies should be completed and updated policies should be made available to staff.</p>	<p><i>Information Governance Manager:</i> The policies are already under review with target completion date (for adoption) of December 2019. PID: 23 December 2019</p>	<p>The policies themselves have been reviewed and updated.</p>

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<p>Data retention schedules should be brought up to date and a regular review process should be introduced.</p>	<p><i>Information Governance Manager:</i> This is not the responsibility of the IG Manager but the relevant service areas. However, the IG Manager is in the process of working with all Teams (within departments to remind them about these and to bring them up to date). PID: Not applicable</p>	<p>These are the responsibility of each service area. However, work has started on setting corporate standards for common documents. A template has been produced for all service areas to work to update their retention schedules and they will be contacted individually about this over the next 12 to 18 months as part of ongoing development.</p>
<p>All remaining policies should be reviewed and updated.</p>	<p><i>Information Governance Manager:</i> The policies are already under review with target completion date (for adoption) of December 2019. PID: 23 December 2019</p>	<p>Completed and published.</p>
<p>An exercise to review the accuracy and completeness of the Council's record of processing activities should be undertaken on a regular basis to ensure the record is up to date. Management should also consider audits of individual departments to verify the accuracy of data in the record.</p>	<p><i>Information Governance Manager:</i> The IG Manager has been meeting with teams within Service Areas as in parallel to the retention schedules. However, part of this action should be for all Heads of Services (as Data Asset Owners) to ensure these records are correct. Also, both this and retention schedule should be an area that Audit test as part of their routine audits of each service area to validate the processes. Not applicable.</p>	<p>No further response required.</p>

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Cloud Applications – 25 October 2019		
The 'Privacy Impact Assessment Toolkit' document should be reviewed and updated.	<p><i>Information Governance Manager (Shafim Kauser):</i></p> <p>The review of the toolkit is currently under way, along with the rest of the Information Governance Framework, and this will be completed by 23 December 2019.</p> <p>PID: 23 December 2019</p>	Completed and published.
The 'Software Policy' should be updated to reference the 'Privacy Impact Assessment Toolkit' process.	<p><i>ICT Services Manager (Ty Walter):</i></p> <p>Accepted: The Software Policy has been updated to reflect the PIA Toolkit requirements (03 Oct 2019), and this version is now available via the ICT Policy pages on the Intranet.</p> <p>PID: Not applicable.</p>	No further response required – recommendation implemented as per initial response.
Management should liaise with the supplier to increase Get Scheduled password complexity requirements.	<p><i>'Get Scheduled' System Owner (Jessica Craddock):</i></p> <p>I had spoken with the system owner and system developer (Tom Douglas & Wojciech Dragan) to implement the complexity requirements. Passwords for each user now requires a minimum of 8 characters including 1 special character, 1 uppercase and 1 number. This was actioned by all users w/c 23.09.19.</p> <p>PID: Not applicable – recommendation actioned.</p>	No further response required – recommendation implemented as per initial response.

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<p>Management should investigate options around implementing two factor authentication to the ArtifaxEvent application.</p>	<p><i>ArtifaxEvent System Owner (Laura Wyatt):</i> We have tested the two-factor authentication provided by the ArtifaxEvent system. As the system heavily relies on mobile phone signage and the phone reception at the Royal Spa Centre being so poor we are unable to switch this on. It would potentially mean locking our users out of the system when they required necessary information for events. PID: Not applicable recommendation not accepted.</p>	<p>No further response required.</p>
<p>The privacy impact assessment process should be completed retrospectively for the ArtifaxEvent system.</p>	<p><i>ArtifaxEvent System Owner (Laura Wyatt):</i> To be arranged and completed. PID: 31 December 2019.</p>	<p>A Privacy Impact Assessment was completed for Artifax and reviewed in October 2020.</p>
<p>Health and Safety Compliance of Council Buildings – 4 November 2019</p>		
<p>A review should be undertaken of the properties with 'active' EICR attributes on Active H to ensure that this accurately reflects the properties for which EICR tests are required.</p>	<p><i>Data Coordinator (DC) and M&E & Energy Officer (MEEO):</i> Agreed. DC and MEEO to identify all stock requiring cyclical EICR's and update attributes in ActiveH accordingly. Further, a semi automated programme of works can be generated as demonstrated in other areas. PID: 31 March 2020</p>	<p>Some properties are listed as HRA instead of corporate buildings. This is currently being looked at but we are still able to monitor these through the HRA plan. Once this has been sorted we would look to run this 6 monthly working 6 months in advance of the due date. We hope to have this in place by the end of the year.</p>

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A schedule of PAT testing should be set for each relevant Council property.	<p><i>DC and MEEO:</i> Agreed. DC and MEEO to identify all stock requiring cyclical patesting and update attributes in activeh accordingly. Further, a semi-automated programme of works can be generated as demonstrated in other areas. PID: 31 March 2020</p>	We have an attribute set up on MIS but we need an inventory which is monitored and updated by each building manager this will certainly need updating post Covid. We can set up an annual programme once we have this info.
Inventories of electrical equipment that require PAT testing should be maintained for each relevant Council property.	<p><i>Asset Compliance & Delivery Group (AC&DG), MEEO & Dodds:</i> Agreed, the AC&DG need to agree that building managers maintain an inventory of equipment requiring PATesting. Dodds should be able to support with information of equipment currently tested. PID: 31 March 2020</p>	We have an attribute set up on MIS but an inventory is still required from Building Managers which is monitored and updated by each of them. In order to implement this, the AC&DG will be convened in November to discuss and agree how inventories are to be produced and maintained.
The variation to the original contract should be confirmed with D&K.	<p><i>Compliance Team Leader (CTL):</i> A copy of the variation documentation has now been obtained. PID: Completed.</p>	No further response required – recommendation implemented as per initial response.

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<p>Inventories of fire-fighting equipment should be kept up to date to ensure that contractors are aware of what needs to be tested.</p>	<p><i>AC&DG, MEEO & Baydale:</i> Agreed, the AC&DG need to agree that building managers maintain an inventory of equipment pertaining to firefighting equipment. Baydale should be able to supply information of currently installed equipment. PID: 31 March 2020</p>	<p>Contractor produces an inventory whilst on site and when equipment needs replacing it is replaced. The inventory is listed on the service sheets which are held in MIS.</p> <p>It would be beneficial for building managers to also produce an inventory so nothing is missed.</p> <p>In order to implement this, the AC&DG will be convened in November to discuss and agree how inventories can be produced and maintained.</p>
<p>Training on the need for Permits to Work should be provided to relevant staff, including individual building managers as appropriate.</p>	<p><i>CTL, Building Manager & H&S Coordinator (BM&HSC) and AC&DG:</i> Agreed. CTL and BM&HSC to liaise on suitable training and audience. PID: 31 January 2020</p>	<p><i>CTL:</i> In order to implement this, the AC&DG will be convened in November to discuss and agree who is best placed to deliver this Training.</p> <p><i>[BM&HSC:</i> I have not been involved with anything to do with CTL and have not been approached by anyone to do training and at present will not be doing any training.]</p>
<p>Homelessness and Housing Advice – 5 December 2019</p>		
<p>Refresher training on the setting up of rent accounts on Active H should be given to relevant staff.</p>	<p><i>Senior Housing Advice Officer:</i> The team have a number of new and inexperienced staff. We will arrange refresher training for the relevant staff on setting up rent accounts. PID: 31 December 2019</p>	<p>We did do some refresher training on Active h rent accounts but due to the housing redesign and change of staffing in roles yet again we will be doing yet more refresher training – I hope to complete this again before 15/11/2020.</p>

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<p>Staff should be reminded of the need to ensure documents are attached appropriately to the system.</p>	<p><i>Senior Housing Advice Officer:</i> We will arrange refresher training for the relevant staff on document management. PID: 31 December 2019</p>	<p>I undertake validation checks on HomeChoice apps where I would pick up if the incorrect documentation was being recorded.</p>