Quarter 1, 2012-13: Recommendations due

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Recommendation 1: Data Protection (Environment, Planning and Regeneration) Management should undertake the following action to ensure compliance with the ICO and LBB & Metropolitan Police CCTV Codes of Practice: a) The CCTV system should be audited to confirm, it is operating in line with the objectives of the system This review should also enable management to justify continuous use of CCTV, which forms part of the Council's Data Protection notification to the Information Commissioner b) A systems procedures manual should be written and issued to all staff. c) A Section 29 Form, should be provided by the police before disclosure is granted.	Environment, Planning and Regeneration	The audit of the CCTV system has been completed and a section 29 form has been produced. The systems procedures manual and has not been written and issued to staff. **Further Action:** A systems procedures manual should be written and issued to all staff. **Implementation date**: June 2012	**Partially met** The audit of the CCTV system has been completed and a section 29 form has been produced. The systems procedures manual remains outstanding. **Further Action:** A systems procedures manual should be written and issued to all staff. **Implementation date**: July 2012
Recommendation 2: Council Tax The planned review of user access in	Revenues and Benefits (CES – Customer	A risk assessment was undertaken of OpenRevenues user access resulting in the following changes:	**Implemented** Significant progress has been made

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OpenRevenues should be completed. The review should include an assessment of the risks associated with user access provision in relation related user roles/functions and the re-alignment of functions or implementation of related exception reporting and reviewing processes where necessary. In particular, monthly quality checks of staff work should include the inspection (for validity and accuracy) of Council Tax exemptions and discounts sourced from a record of all exemptions and discounts processed directly to OpenRevenues during the month. The planned process should be completed for identifying staff living in the borough or who have family members living in the borough and restricting access to the relevant Council Tax accounts The process for identifying and disabling leaver accounts should be strengthened to ensure that they are promptly disabled.	Services)	- Data for quality checking is now sourced directly from OpenRevenues thereby ensuring the review/scrutiny of actual changes to Council Tax and NNDR accounts. - Senior officer (responsible for refund checking) access to create refunds was removed/disabled - The Local Taxation Manager processing access was removed/disabled - An effective process was implemented for identifying leavers and disabling them in the system. - the review of exception reports to identify / monitor any housing benefit assessment processing activity of the Control Team. - the introduction of a process to restrict access in line with identified conflicts on interest through completion of declaration of interest forms (in progress) **Revised Implementation Date** 1 June 2012	restricting staff access to OpenRevenues system, where necessary, based on information returned in declaration of interest forms. Forms to capture the information have been sent and restrictions have been applied for those returned. A process for identifying and analysing Council Tax and Business rates processing by members of the Control Team, through exception reporting, has started.

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Recommendation 3: Data Security Risks and Issues It is recommended that Network and CITRIX security patches are applied on a regular basis. A regular maintenance window should be agreed with the business and scheduled. Furthermore, the Change Management Policy and Procedure should be formally approved by senior management. The Senior Management Board should provide a directive to ensure that Change Approval Board meetings are held on a regular basis and attended by all. Any Requests for Change (RFC) raised should be reviewed and approved on a timely basis.	Information Systems (Commercial Services)	**Partly implemented** The systems had not been taken offline to apply security patches. Dates to take the systems offline to apply the security patches had been proposed. **Further Action** Apply the security patches to the Network and Citrix systems on the proposed dates.	**Implemented** The patching of core system is now undertaken routinely in line with agreed/scheduled network infrastructure downtimes. Network infrastructure components have been taken down 3 times to apply the required level of patches (e.g. management confirmed that Citrix and Active Directory have been patched to the required level)
Recommendation 4: Business Continuity – Corporate Support business continuity Plans IT Provision and accommodation Recommendation The Head of Insurance should co-ordinate the preparation and finalisation of Corporate Support IT and Accommodation business continuity Plans.	Corporate Governance	The Head of Insurance has continued co-ordinating the finalisation of the IT and Accommodation Business Continuity Plans through engagement with the officers responsible for the development of those plans. Development of the IT Disaster Recovery plan and a viable	**Partly implemented** The process to the co-ordinate the development and completion of the Accommodation and IT Corporate Support Business Plans is ongoing. The business continuity plans have not been completed. Monthly meetings to monitor progress have been agreed between Head of Insurance and lead officers in IS, Estates and HR.

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		Accommodation business continuity plan was <u>in progress</u> but had not been completed. For instance, the need was identified for further action involving the collection and analysis of updated data on remote access availability and the numbers of officers required for critical services to ensure the development of a fit for purpose Accommodation Business Continuity Plan.	For the Corporate Support Accommodation Business Continuity Plan, consideration is being given to utilising 2 floors at Barnet House to accommodate an updated number of officers required to undertake Business critical services. For the Corporate Support IT Business continuity plan, the lead officers in IS are awaiting feedback about the Business IT processes, IT resource and delivery requirements linked to critical activities to progress development of the plan. IS Business continuity support arrangements will be enhanced/made more resilient following completion of the planned IS Disaster Recovery (DR) solution. **Revised due date: to be confirmed**
Recommendation 5: Strategic Procurement, Policies and Procedures Management should clarify if/where devolved procurement is needed. Where devolved procurement teams are established, roles and responsibilities should be formally allocated and assigned, and the role	Corporate Procurement Team (Commercial Services)	Management are in the process of establishing three aspects that will build the basis for an appropriate balance of devolved and centralised procurement. These are the interaction between: • Tools • Process • People	**Partly Implemented** Whilst approval has been given and action has been taken to align processes for centralisation there is still work to be done in putting in place the appropriate people and tools. **Revised implementation date: September 2012**

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of CPT clearly defined.
 	
In addition, there should be a process in place to measure, monitor and report progress of devolved teams towards meeting the Council's procurement objectives.
		The tools aspect, such as the use of the SAP system, will be completed by June however people and processes will take longer and it is planned to have them completed by September.
		  Processes with corresponding templates to build on good procurement practices for the devolved areas are being designed and implemented presently. E.g.
		  Contract Management, where all devolved contract managers are taking the e-Training Contract Management module which is linked to a set of standard templates and processes.
		To establish clear roles and responsibilities, a number of meetings and workshops have been held between Service Areas and CPT to understand what areas of procurement will stayed devolved and which are best centralised.	

Recommendation 6: Contract Management, **Contract management arrangements (EPR)** Processes should be implemented	Environment, Planning and Regeneration	Contract monitoring models will be decided based on best practice, current effective practice in EPR and contract term values.	**Partly Implemented** Contract monitoring models have been agreed depending on value and complexity

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and responsibilities clarified across the Service for the ongoing scrutiny and challenge of contract management arrangements to ensure that they are undertaken for each contract in line with agreed and minimum contract management standards. Contract management minimum standards should be developed for contracts in line with the thresholds in the Contract Procedure Rules (CPRs), consultation should take place with Corporate Procurement to ensure practice is consistent.		The models will be applied to contracts with values equal to and above CPR limits for term and annual contracts. Identified contract managers will receive the appropriate contract management training to enable them to manage contracts effectively Contract managers will be monitored through standard management processes (e.g. one to one supervision and team meetings) to ensure that they are undertaking contract management in line with the agreed model.	of contracts. Models will range from quarterly strategic/monthly technical meetings for high value complex contracts to milestone meetings for low value, less complex contracts. All managers involved in Contract management have been instructed to complete Contract Management through the E-Learning format. Further classroom type training of an interactive nature is being designed and piloted. The delivery of contract monitoring by contract managers will be monitored through 1-1 sessions and reviews by the EPR Performance and Development Officer accessing and reviewing evidence of contract monitoring processes (e.g. minutes) filed in a Corporate Contract Repository. **Further Action**: Complete planned training (30 June 2012) Evidence the monitoring of contract management arrangements **Revised due date: 30/6/2012 (training), 1 August 2012 (monitoring)**

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Recommendation 7: **Establishment List, Systems and processes** Pay and Data changes to HR establishment data, particularly significant changes stemming from complex restructures, should be subject to independent check. Evidence (audit trails) of such check should be retained. A key output of the current initiative for establishment should be: - the identification, recording and communication of causes of error / discrepancies to ensure that future input processing at source prevents discrepancies and - formal sign-off by the Service of updated establishment lists.	Deputy Chief Executive's Service	Agreed. The Pay & Data Manager will ensure that all SAP organisational changes are fully checked and a record made of the inputter and checker. Audit evidence will be retained for all changes. The SAP Change form will be amended to record inputter and checker As recommendation 1 above. HR will issue revised detailed advice to the business to explain the process to make changes to the establishment. New detailed instructions and the SAP change form will be amended to require Finance, HR and the relevant Budget Holder to sign off and reference to the applicable DPR/ GFC report. These actions will ensure ownership by all stakeholders of changes to establishment lists	**Implemented** Fit for purpose guidance circulated to Senior Management communicated requirements and responsibilities for ensuring the validity and accuracy of Establishment data. A process for checking changes to Establishment data, including sign-off, was introduced and implemented.
Recommendation 8: Establishment List, Data use and reporting HR should develop and communicate a protocol to ensure the ongoing and effective review of Establishment data	Deputy Chief Executive's Service	HR will issue revised detailed advice to the business to explain the process to make changes to the establishment. New detailed instructions and the SAP change form will be amended to require	**Implemented** Fit for purpose guidance circulated to Senior Management communicated requirements and responsibilities for ensuring the validity and accuracy of

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by Services. The protocol should define timeframes for reviews, the use of establishment data reports or the provision of Establishment reports to Services as part of the review. It should also identify the responsibilities for who should be engaged with the review process. The role of Business Partners in facilitating the review should be clarified and defined.		Finance, HR and the relevant Budget Holder to sign off and reference to the applicable DPR/ GFC report. These actions will ensure ownership by all stakeholders of changes to establishment lists. The Guidance will include advice on checking actions to maintain accurate establishment lists. HR will formally communicate changes to establishment data protocols and processes to Directors and Heads of Service.	Establishment data.
Recommendation 9: Parking Service, Records Retention & Disposal That all records be stored manually or electronically in a logically searchable fashion, in line with the Records Retention & Disposal Guidelines, specifically section 3.9.23**.**	Chief Executive's Service (CSO)	The CSO team intends to start scanning all new parking permit application documentation from the end of April 2012, as well as back-scanning all documentation which has been retained. Documentation will be stored electronically and retained in line with Records Retention & Disposal Guidelines.	**Partially met** Although staff have been trained and scanning has begun, the recommendation is not yet fully implemented and Internal Audit will follow this up for the next Audit Committee. **Further Action:** The CSO branch of the Parking Service will continue to back-scan the documentation in order to ensure that records are stored in line with the Records Retention & Disposal Guidelines. **Implementation date**: August 2012

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Recommendation 10: Human Resources Data Quality, Systems and Processes A risk assessment should be undertaken to assess the frequency of undertaking a sample check of the indicators. Once this has been assessed, checks should then include: • Sample checks to source records to confirm accuracy, validity and completeness of data prior to reporting; • Data cleansing by producing exception reporting, e.g. to remove duplicate / incorrect records or to fill in missing information. Processes should be established with services to confirm when managers or staff should be included or excluded from the individual indicator data count.	Deputy Chief Executive's Service	We recognise the Corporate aim for data quality is for all data input to adhere to the principle of 'right first time' and we agree to undertake more robust data verification checks to maintain data quality. We would suggest that the possible errors in data submissions outlined in your sample check of Quarter 2 data found minor errors, resulting in the indicators being potentially misstated but with a small margin of error **Average number of absence days per employee (rolling year)** this variation relates to the movement of staff throughout the year. Where staff appear in more than one service during the year they become an additional member of staff in that service but not to the council as a whole. We will undertake further investigations to establish the most accurate way of reporting this indicator. . We have already implemented checks for the **% managers submitting a monthly absence return.** Each service is now given a	**Fully met** The HR Data Quality team has carried out a risk assessment as recommended, and implemented several measures to improve data quality, as follows: **Average number of absence days per employee (rolling year)** From quarter one of 2012-13, this will be calculated manually, to ensure that duplicate/inaccurate records or missing information will not be included in the data. **% managers submitting a monthly absence return** The rate of return from Managers is currently 91%. HR has instigated a full check with managers, with each Service contacted monthly to confirm that the list of managers required to complete an absence return is accurate. **% objectives set for eligible staff only** This is an annual check every first quarter, and HR will ask Services to confirm the accuracy of any exemptions for all Performance Review reporting and an annual check of exemptions for each service will be undertaken.

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		complete list of managers and will be required to notify HR of any reason for exemption before the submission of data.	
Recommendation 11: Value for Money – Facilities Management, Leaseholder Relationship Management should liaise with the leaseholder to authorise and sign the lease for Building 1 Lower Ground Floor. Management should review all leases to identify any unbilled amounts, and liaise with the leaseholder to calculate a final amount payable. In addition, management should accrue for the full amount of payments not made since January 2008.	Commercial Services	All necessary authorities are now in place for Officers to complete the outstanding lease. Day to day meetings exist through LBB Operations Manager and Landlord's representative, also forward planned meetings are now in place addressing all lease and operational issues. Adequate provision is being set aside for the properties.	**Partly implemented** **Signing Building 2 Lower Ground Floor** The lease for Building 2 Lower Ground Floor has not been signed. The first quarterly meeting has been arranged for 29 May 2012 to take this forward. Management expect the lease to be signed latest 30 June 2012 following which the leaseholder will identify and communicate the final amount payable. **Provisions / accruals for unbilled amounts** A provision of 370K has been raised in relation to Building 2 leases relating to Building 2 Lower Ground floor for amounts owed since 1 January 2008. A provision of 85K has been raised relating to outstanding service charge for Building 4

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			Further Action Management should liaise with the leaseholder to authorise and sign the lease for Building 1 Lower Ground Floor. **Revised due date: 30/6/2012**
Recommendation 12: Integrated Children's System – Liquidlogic, Password security As outlined in the password policy, Management should ensure : • Password expiry is enabled in the system and passwords are used for no more than 45 days; • Initial passwords are strong and not of a common form; and • The requirement for new users to change their initial password at the time of first log on is enforced. Where system limitations do not allow specific password controls to be implemented, other technical (e.g. single sign-on) or manual (e.g. periodic policy reminders, user	Children's Service	ICS password to be in line with LBB corporate password policy.	**Fully met** Strong password requirements have been configured within the system, with alphanumeric minimum length passwords enforced. The Project Manager, Children's Services, emails users every 45 days to ensure that passwords are changed in accordance with the Council's password policy.

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awareness training) options should be implemented.			
Recommendation 13: Integrated Children's System – Liquidlogic, User access procedures Management should: • Implement controls to verify that individuals have passed CRB checks before they are given access to ICS; • Perform an exercise to assess all accounts within ICS and remove those that are no longer required; • Periodically review the active ICS user accounts and disable any that do not require access or do not have a justifiable business requirement for access, as per the requirements in the client access procedure; • Apply the same access and monitoring procedures in the test environment as applied in the live environment; and • Ensure reference numbers are recorded in ICS, Hornbill and Swift	Children's Service	• LBB IS will implement and perform a quarterly care system audit to assess all accounts and disable ones that are no longer required. Proposed process written and sent to Paul Kennedy for assessment and agreement. • Reference number from service Management Tool (Hornbill Supportworks) is recorded in SWIFT and ICS. Old entries before the implementation of Support Works won't have a reference attached to them. • Access to all test systems to be locked. Users given access at the request of authorised officers. User list to be verified with business periodically • Communication of the following process has been sent to all team managers that request access to ICS:	**Fully met** • All Team Managers have been sent staff lists to check, so that accounts which are no longer required can be disabled. • The service desk reference is now recorded in ICS, Hornbill and Swift where required to ensure auditable evidence of appropriate managerial approvals are retained for all new user accounts created. • Access for the testing area has been removed for all users except for the System Admin user. • Managers must now apply for system access for their staff, and confirm as part of the application process that an enhanced CRB check is present. The new method of application has been notified to managers and the IS service desk.

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where required to ensure auditable evidence of appropriate approvals are retained.		The ICS team will no longer complete the Additional system access form on behalf of managers but the managers themselves will complete it. This form asks for confirmation that an enhanced CRB check is present. A record in Hornbill completed by the team manager for the employee with access to ICS will then recorded with the call ref recorded in ICS.	