Detailed Risk Report (incl Control Measure Target Date)

TOWER HAMLETS

Risk Ref	Risks	Triggers	Consequences	Existing Control Measures	Current Risk L I Total	Required Control Measures	Target Risk L I Total	Responsibility	CPT
CSD0016	Death or serious harm to a child that was or should have been in receipt of services, either from the Council or a Partner agency. There is an on-going need to ensure that services to all Vulnerable Children and young people have a focus on Safeguarding and Prevention of harm.	Our most recent Ofsted report (June 2019) rates Children's Social Care and Early Help service's as "Good". However, there will be a need to regularly review and scrutinise the quality of services for vulnerable young people. This scrutiny and challenge will need to have a focus on; • Overall management oversight and quality of supervision. • Compliance with core statutory and local requirements. • Adherence to key safeguarding thresholds. • Regular assessments of cases, and emerging /changing risks. • Strong planning for children, with regular reviews to avoid drift and delay. • Maintaining strong quality assurance and auditing mechanisms.	• Harm to individual Children and young people being left in situations of risk and or unassisted harm. • Poorer than expected outcomes for a child. • Poor audit/review findings • Reputational damage to the council. • Poor Staff development and competence. • Poor Quality assurance and Performance Management • Loss of experienced professional staff. • Potential for legal proceedings against the council leading to financial loss	Increased level of Quality Auditing. From May 2021 the quality assurance programme will move to monthly quality audits and be positioned as a core activity for all managers to ensure consistent and improving standards of casework across Children's Social Care. All audits are moderated. Ongoing audit programme Monthly meeting of the Continuous Improvement Board, chaired by the DCS, and involving the Lead member. The Tower Hamlets Children's Safeguarding Partnership, delivering the statutory multi-agency oversight of safeguarding. The Tower Hamlets Safeguarding Children's Partnership is jointly led by the Council, Police and CCG, and benefits from the support and challenge of an Independent Scrutineer. The Partnership provides routine oversight of multi-agency data and quality assurance findings. Monthly service level performance meetings held by the Divisional Director. Underpinned by monthly Performance Surgeries held by each Head of Service. Practice Week which is held twice a year (May and November) which involves all Corporate Directors and members.	4 5 20	Inspection by the regulator, Ofsted Focused Visit completed in July 2022 - letter published 31/8/22. Positive outcome. Annual Converstaion with Ofsted indicated our next inspection will be the full ILACS, expected by end of 2024. ***Steve Reddy*** ***Required Control Measure Target Date: 31/12/2024*** Tower Hamlets Safeguarding Children's Partnership and increased quality assurance. The THSCP is delivering for 23/24 an increased level of quality assurance, including multi-agency case audits and Safeguarding Child Practice Reviews. On track ***Steve Reddy*** ***Required Control Measure Target Date: 31/03/2025*** Corporate scrutiny and oversight Corporate Safeguarding Board – now chaired by Chief Executive receives detailed reports from both Adults and Childrens safeguarding services on practice quality and audits. Also Social Care inspection readiness (self assessment) will be shared at Childrens Services and	3 4 12	Steve Reddy	Priority 8: A Council that Listens and Works for Everyone

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				Bi-monthly and bi-annual plans in place. External peer scrutiny of our safeguarding practice. Three current initiatives: (1) The Continuous Improvement Board provides monthly internal peer challenge; (2) East London Quality Assurance Peer Review - external moderation of our case auditing; (3) Formal external peer reviews are commissioned on a regular basis. All completed or on track. Performance monitoring and audit by statutory Local Safeguarding Partnership Performance monitoring and audit by statutory Local Safeguarding Partnership Principal Social Worker leads on implementing learning from other authorities where provision is inadequate. Principal Social Worker leads on implementing learning from other authorities where provision is inadequate.				Education Scrutiny Committee (October 2024) *Steve Reddy* *Required Control Measure* *Target Date:* *31/03/2025*					
RS0056	There is risk to Council's Financial Standing from overspending its revenue budget, failing to deliver savings and a reliance on reserves. (Reserves remain robust but there is a risk that the Medium Term Financial Strategy may require a draw down of reserves. Reserves can only be used once and therefore should not be used to plug permanent budget requirements).	Loss of income in particular council tax, business rates and leisure events. Poor budget management Failure to deliver savings Demographic pressures in Adult Social Care, SEND related pressures in Children's and Unfunded discretionary expenditure from temporary reserves.	Significant financial losses, overspent budgets, drawn down on reserves.	Financial Measures: CLT and SLT have prepared new savings proposals of c£34m for the current financial year, with a further circa c£10m to be identified over the remaining MTFS period Financial Actions: Increased focus on budget management. Budget Managers Handbook Issued. All budget managers directed by CLT to remain in budget. High risk budgets reviewed by the Corporate Director Resources or the Director of Finance, Procurement and Audit. Redoubled efforts to deliver previously agreed savings	5	4	20	Monitoring and Control: Continual focus on budget management. Closely tracking delivery of savings and identifying alternatives if proposals become undeliverable. Regular budget reporting to CLT, Portfolio Leads, MAB and Cabinet. New governance structure in place including Boards and monthly Directorate Budget Meetings.	4	3	12	Chris Leslie	Priority 5: Invest in Public Services

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				proposals.				*Ahsan Khan* **Required Control Measure** *Target Date:* *31/03/2025*					
HRP0009	There is a risk that historical errors in Pension Scheme member data will lead to materially incorrect calculation of the Pension's liability figure and qualification of the Council's Statement of Accounts and Pension Fund Accounts.	External Audit review of IAS 19 (Employee Benefit) reports leading to discovery of unremediated errors in the underlying records. Triennial valuation to scheme actuary Valuation extracts to scheme actuary	Material error in calculation of the Pension's Liability figure leading to qualification of the Council's Statement of Accounts.	Existing Controls: Monthly reconcilliaitions using Pensions Dashbaord Commissioned data dashboard and data audit project commissioned with external company	4	4	16	Initial one off reconciliation of pensioner records in altair and payroll to identify records which require amending or updating 1) Reconciliation of pensioner Altair records 2) Reconciliation of payroll pensioner records 3) Identification of inconsistent errors 4) Amend records 5) Sign off 6) Provide error list to scheme actuary for estimation of liability Third party company commissioned to carry out data audit and independent verification of reconciliations with recommendations. *Abdulrazak Kassim* **Required Control Measure** *Target Date:* *30/11/2024*	3	3	9	Abdulrazak Kassim	Priority 8: A Council that Listens and Works for Everyone
ORG0027	There is an ongoing risk of a Cyber Attack and a consequential Data Breach, Financial Loss and Business Interruption.	Cyber attacks could include ransomware, denial of service, social engineering, phishing, malware and/or an active attack exploiting network security vulnerabilities. Attacks could be enabled through miss-sent emails, inappropriate sharing, insecure design, inappropriate access, introduction of unauthorized software to the network, users	Significant and prolonged loss of IT services. Inability to deliver critical and essential services. Failure to comply with statutory duties or other legal responsibilities. Breach of data protection legislation Financial loss Reputational damage	Current activity Internal internal and external reviews. Internal vulnerability scanning is on-going, occurring every week and the critical / high vulnerabilities discovered continue to be escalated for urgent remediation. Annual independent penetration tests. Implementation of a SIEM solution Recruiting additional specialist resources to support the SIEM. Take a risk-based approach to data security. Embed the risk assessment culture	4	4	16	Zero Tolerance to unsupported software in the council live environment without a mitigation plan in place. Recent events with a number of local authorities have led to severe disruptions and impacted their ability to deliver key services. In an attempt safeguard LBTH from such an event a Zero Tolerance approach to "unsupported software" will be adopted. This will include: - Run weekly vulnerability scan (NESSUS)	4	3	12	Hemanth Shanthigrama	Priority 6: Empower Communities and Fight Crime

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		clicking on phishing scam email links, and/or divulging sensitive information		within service delivery. Ensure architectural decisions taken are supported by adequate risk assessments. Ensure Policies are aligned with identified risks and communicated effectively. Ensure policy exceptions are supported with fully documented and signed off risk assessments and controls are continually monitored Review of BCP At the request of the Corporate Directors of Health, Adults and Community, Internal Audit reviewed a sample of BCP's in quarter 4 of 2021/22 to form a view on whether the BCP's adequately address a complete loss of IT infrastructure for a prolonged period. The outcome was complete and was presented to CLT members and the CCB in June 2022. Actions and recommendations shared to inform ongoing improvements. Proposed follow up of updates / improvements during 2022/23 IA Plan and beyond to maintain effectiveness of BCP plans. Governance The terms of reference for the Strategic Information Governance Board need to be reviewed and agreed by CLT. Consideration to include oversight of cyber security matters. The action is being incorporated into the IG Review which is progressing and reporting into the Support Services Board. New Head of IG starts in Oct and full review of the IGG and SIGB will be carried out				- Identify and publicise any systems that have unsupported software installed - For those systems identified: - If non-production, disable immediately - if production, Applications Team to work with the Service and Information Security to identify the most appropriate course of action. 11 Oct - moved owner to MU, remaining list of unsupported software to be supplied and action plan agreed to address by end of FY *Mary Umoh* *Required Control Measure Target Date:* *31/03/2025* Promote Cyber Security awareness using Training and Campaigns - one of the measures is to ensure that cyber security training is always part of the mandatory training required by all staff. Progress of mandatory training is monitored at DLT and CLT levels - in 2023 the council cyber security campaign culminating in National Cybersecurity Awareness Month in October *Mary Umoh* *Required Control Measure Target Date:* *31/03/2025*					

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				TOR's in draft will be signed of by newly formed SIGB by the end of June. Information/Cyber Security Incident Response Procedures The Council's Information/Cyber Security Incident Response Procedures need to be reviewed and updated with key details . This has been updated to include the cyber security mailbox as first point of contact. Adding individual names would need the document to be updated regularly as staff leave and so this should be the roles rather than specific names and contact information. Roles to be included to be discussed at the most appropriate forum, tbd. 12/01/23 - independent assessment due Q4 FY22/23 which will evidence be used to evidence the CM The Incident response policies and procedures have been reviewed by external SMEs and recommendations are being drafted for SIRO sign-off by September Security Monthly Operations Meeting (MOM). Cyber Securtiy/Attack Exercise The Council has run a table top cyber security/attack scenario with both CLT and the CCB. Lessons learned have been identified and actions will be assigned to responsible officers and monitored by the CCB.									

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RSB0023	There is a risk that the Statement of Accounts will receive a qualified opinion for 2020-21 and onwards	External audit of the statement of accounts and the subsequent findings/outcome.	Qualified opinion on statement of accounts. Reputational damage to the Council.	Improvement Plan An extensive improvement plan was enacted and remaining tasks part of BAU from June 2022. The 18/19 and 19/20 accounts have been signed off by the councils external auditors. The council has focused its resources on publishing draft accounts for financial years 21/22 and 22/23 and completed the period of public inspection for these accounts – which it has done so and also published draft accounts for 23/24. The current proposed backstop date to clear all outstanding draft accounts up to and including 22/23 is 13th December 2024. The auditors work will now largely focus on VFM for the years outstanding (20/21, 21/22 and 22/23) prior to an audit opinion being issued for these years by the proposed backstop date. The 2023/24 External Audit is currently underway and the current proposed backstop date for 23/24 is 28/02/2025.	4	4	16	Working with External Auditors Working with External auditors towards the sign off of accounts. 2020/21, 2021/22, and 2022/23 target date is 13/12/2024. 2023/24 target date is 28/02/2025. *Ahsan Khan* *Required Control Measure* *Target Date:* *12/12/2024*	2	2	4	Abdulrazak Kassim	Priority 8: A Council that Listens and Works for Everyone
ASD0015	Death or serious harm to a Vulnerable Adult who was or should have been, in receipt of services, either from the Council or a Partner Agency.	There is a failure of one or more of the controls in place to identify the degree of risk to a vulnerable adult (multi-agency safeguarding procedures) Poor practice, insufficient information sharing and/or inadequate management oversight. Failure of quality control systems.	Harm to an individual. Reputational damage to the Council. Potential for legal proceedings against the council leading to financial loss. Loss of confidence in safeguarding capability.	Oversight through management reporting Social workers have 1:1 supervision monthly on their casework includes safeguarding cases. Safeguarding case work is managed via s.42 Safeguarding Procedures in line with the Care Act 2014 High risk cases are present to the High-Risk panel The Senior Management Team managers are responsible for the review and monitor Adult	3	5	15	Information campaigns to raise awareness of safeguarding with oversight from Safeguarding Adult's Board This is an ongoing priority for the Safeguarding Adults Board and includes the annual 'Safeguarding Month' campaign in November each year. The Independent Chair takes a key role in this and all SAB partners participate. Specific campaigns are run at other times including financial abuse & scams, modern slavery, domestic abuse etc.	2	5	10	Georgia Chimbani	Priority 5: Invest in Public Services

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		Service user fails to work to agreed partnership / agency arrangements. Poor communication and partnership work. Poor resourcing of service areas against increased demand. Local authority contracted out service do not have sufficiently robust safeguarding arrangements.		Safeguarding cases in their services in supervision with their Team Managers. The Principal Social Worker leads on implementing learning from Safeguarding Adult Reviews in the Council alongside the Safeguarding Adults Board Hoarding Panel. Evictions Panel - MH Cases - supported accommodation in borough. Safety Huddles / MDTs with GP's Interface documents - pending. Waiting List - RAG rated Safeguarding issues as part of contract management procedures Procedures overseen by Joint Director for Integrated Commissioning - contract management procedures continue to focus on safeguarding. Care Quality Commission embargo list used. This list is available from the Care Quality Commission highlighting all providers where the CQC has raised concerns. London ADASS branch circulate any service suspensions or restarts due to safeguarding concerns and these are passed to the Brokerage service. Provider Concerns and interface with Adult Safeguarding is a standard agenda item at Joint Adult Social Care and Integrated Commissioning Senior Management Team meeting. Failed visit policy and procedures in place. The Failed visits policy and procedures were originally agreed in 2018 and have been reviewed over the last year. They are				*Margaret Young* *Required Control Measure* *Target Date:* *31/03/2025* Safeguarding Adults Board Strategy The actions within the SAB strategy aim to mitigate the risks associated with safeguarding. These are linked to the principles of Safeguarding with is Empowerment, Prevention, Proportionality, Partnership, Protection and Accountability. They are also linked to the principles of Making Safeguarding Personal. The SAB will be focusing on 3 key priorities relating to Adults with Learning Disability, Homelessness and Substance Misuse and Self Neglect. *Margaret Young* *Required Control Measure* *Target Date:* *31/03/2025*					

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				currently in use and should be reviewed and amended if necessary annually. Safeguarding Adult Reviews Action Plan - implementation of recommendations of all SARs We have a Safeguarding Adults Review Tracker in place to monitor and oversee the implementation of actions arising out of Safeguarding Adult Reviews. This is monitored for the Safeguarding Adult Review sub group and Board. Recruit a new Independent Chair of the Safeguarding Adult Board Following the appointed person withdrawing, recruit a new independent chair.					
CLSCCB0012	Major Health and Safety Incident affecting Council employees, Buildings or related Infrastructure.	The job: including areas such as the nature of the task, workload, the working environment, the design of displays and controls, and the role of procedures. Tasks not designed in accordance with ergonomic principles to take account of both human limitations and strengths. Not matching the job to the physical and the mental strengths and limitations of people. Mental aspects would include perceptual, attentional, and decision-making requirements. The individual: including a person's competence, skills, personality,	Injury/ill health/death, direct and indirect costs, disruption to service, reputational damage and possible prosecution	Existing Control Measures Arrangements and performance monitored, audited, and reviewed via Joint Health and Safety Committee 6 x corporate specialist Health and Safety Advisors, with 1 allocated to each directorate Corporate H&S training via the Learning Hub and advertised locally Provision of communication around changes in legislation, standards, and industry best practice to schools and services. Updated guidance, templates, and resources available from the H&S section of The Bridge Investigation of accident notifications received via the online	3 5 **15**	Required Control Measures Reversing vehicles in Waste have aids and electronic sensors to aid drivers. For Some crews, the disconnection of reversing sensor & automatic breaking systems on RCVs is common practice. H&S Advisors along with Fleet Manager saw evidence of this during an inspection of vehicles – on the one vehicle we checked, the plug for the above mentioned system had been removed completely. Crews have been reminded that these systems are provided with the express purpose of preventing collisions when reversing, especially with pedestrians. Further work required to communicate risks, monitor sensors and speak to waste	2 5 **10**	Stephen Halsey	Priority 8: A Council that Listens and Works for Everyone

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		attitude, and risk perception. Individual characteristics influence behaviour in complex ways. Some characteristics such as personality are fixed; others such as skills and attitudes may be changed or enhanced. The organisation: including work patterns, the culture of the workplace, resources, communications, leadership and so on. Such factors are often overlooked during the design of jobs but have a significant influence on individual and group behaviour.		AIR Form system, in accordance with the CHSS policies and Accident Investigation procedure, with RIDDOR Accident notifications being made on behalf of schools and services Required Control Measures Process required to mitigate staff from harm through residents who may be potentially violent – 'CoC' process is currently passing through DLTs/CLT Required Control Measures 'Driving for work' guidance for grey fleet lacks same detail and controls that is involved in driving LBTH fleet vehicles – process required				crews ***Edward Farrelly*** ***Required Control Measure*** ***Target Date:*** ***31/03/2025*** Required Control Measures LBTH Contract Management – Guidance and Toolkit does not contain guidance around management of Health and Safety for contractors, so corporate process may be required ***Edward Farrelly*** ***Required Control Measure*** ***Target Date:*** ***01/11/2024***					
PLC0013	Following the Grenfell Fire tragedy residents of Private sector tower blocks in the borough are not safe or do not feel safe due to dangerous cladding that needs removing.	Accountability for fire safety is not correctly designated, communicated and understood by building owners * Buildings remain unremediated. * Funding to remediate not secured interim measures in place	Fatality due to fire spread in a building. Council perceived as not having fulfilled statutory duty to keep local housing conditions under review under the Housing Act 2004	Work with DLUHC to ensure owners of private residential tower blocks are taking measures to ensure their residents safety Work with MHCLG, GLA, LFB via day to day engagement and Monthly Account Management meetings to identify and prioritise buildings of most concern that require remediation. Identify individual stakeholder action and co-ordinated responses to accelerate the remediation. Identify appropriate council enforcement action to support other stakeholder activities. Officers meet weekly at the Fire Safety meeting to discuss progress with the remediation of ACM from tall buildings, this also includes progress on responses to EWS survey.	3	5	15	Safety & Enforcement External wall surveys for all buildings over 18m approaching completion. Will be uploaded to DELTA to inform collective action Further control measure will be selected following EWS surveys to buildings below 18m where the fire risk assessment has raised concerns about the cladding/external wall Additional fire engineering surveys over the next 2 years. ***Karen Swift*** ***Required Control Measure*** ***Target Date:*** ***31/03/2025***	1	5	5	Karen Swift	Priority 2: Homes for the Future

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				Council Officers are in weekly contact with the GLA on the progress of each development's individual grant application to remediate ACM and other dangerous material. New funding in place from MHCLG 24/25 to enable more inspection and enforcement.									
ASDASC0018	Regulatory censure and Safeguarding failure arising from deficient process for new and ongoing employee vetting (i.e. pre-employment checks, ongoing vetting of DBS status, verification of qualifications and other suitability/ screening checks).	Non-adherence to procedures in relation to recruitment and employee vetting Failure of reporting mechanisms to provide assurance on vetting Vetting not renewed/updated where required	• Harm to individual children, young person or vulnerable adult • Poor audit/review findings • Reputational damage to the council including poor inspection outcomes • Poor quality assurance • Potential for legal proceedings against the council leading to financial loss	Reporting Tool To oversee the renewal of the DBS check reporting tool and ensure it is fit for purpose now and in the future to assure compliance with agreed procedures. Identify any actions needed to ensure compliance using the renewed DBS reporting tool Identification of any DBS checks requiring non-statutory updating, sharing with service managers and HR business partners and completing the process to update. Prioritise children's and adults services, risk assess where required and put appropriate waivers in place if needed. Review of posts in scope of DBS Review posts identified for DBS checking and ensure consistency across the organisation. Draw on best practice over and above statutory requirements particularly for children's and adult social care working closely with the Principal Social Workers. Ensure consistency in checks across adults/children's registers. Review DBS process & policy Review all aspects of the vetting process including moving to the automatic annual check platform as standard.	3	4	12	Annual Monitoring of all control measures. This Risk is currently controlled as per existing control measure column therefore this column is not in use. *Catriona Hunt* *Required Control Measure Target Date:*	1	4	4	Georgia Chimbani	Priority 8: A Council that Listens and Works for Everyone

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				Existing protocols and procedures relating to DBS checks and recruitment more generally Existing procedures and guidance on DBS checks and recruitment are available to staff on the Bridge.					
ORG0026	There is a risk the Council will be unable to deliver critical and essential services owing to a Business Continuity Incident.	Denial of access to, or loss of one or more of the following (4 P's): People – Example -Staffing loss due to industrial action or pandemic Places – Example - Premises/ Location unable to carry out services due to fire/flood/utility failure etc. Processes – Example - Essential Software loss due to Cyber Attack, Office Equipment, Mobile Devices or Vehicles Providers – Example – Failure of Commissioned Providers & Suppliers	Loss of one or more of the 4 P's may impact on these area's - Inability to deliver, or disruption to Critical Services - Finance - Reputation - Delivery of KPI's - Safeguarding/ Health & Safety	A fully functioning and embedded Business Continuity Framework The Corporate Leadership Team has adopted a business continuity policy and civil contingencies arrangements. The development & maintenance of these arrangements is managed through the Civil Contingencies Board which is chaired by Raj Mistry. The CCB meeting quarterly and more frequently when required. Annual Audit of Business Continuity Plans The audit process has now taken place and revelaed some gaps in corporate completion of plans. Further work needed across all services driven from Directorate level to embed this with the support of the wider CC team	3 4 **12**	Ownership of Business Continuity (BC) at senior level (CLT/DLT) and embedded into culture of the organisation. Corporate Directors to ensure BC is a standing agenda item at DLT Meetings and Directors are held to account for: - Approving reviews and updates to BC plans within their areas - Providing assurance that their plans are active and exercised to test effectiveness, and - Attending relevant BC and ClearView training. Where failures in BC processes are found, record the action that is taken to rectify. N.B. Corporate Directors - Ensure all BC plans are reviewed in their areas on time - Ensure Service Managers take ownership of their plans, that they are updated and submitted for review every 6 months - Confirm plans have manual workarounds in the event of failure/denial of one or more of the 4 P's - Ensure BC Plans of commissioned providers within their areas are audited in line with the services RTO's (Recovery Time Objectives)	2 4 **8**	Stephen Halsey	Priority 8: A Council that Listens and Works for Everyone

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						- Require Service Managers to attend relevant BC and ClearView training, and *Simon Smith* **Required Control Measure Target Date: 30/11/2024** Provision of monthly management information to DLT's, and Directors. The CPU will provide a monthly report from the Business Continuity Management System providing relevant management information to DLTs and directors, and the provision of support to directors to achieve good levels of compliance. *Simon Smith* **Required Control Measure Target Date: 30/11/2024**			
COM0002	Failure to meet the Council's legal duties under the Civil Contingencies Act. This would become evident if a major incident occurred and the council failed to implement an effective response and recovery.	A lack of resilience and expertise in the council's Civil Protection Unit, and staff to perform relevant duties during an emergency. A lack of a robust policy framework to meet the requirements of the CCA. Failure of governance and robust performance management oversight of Business Continuity Plans by the Corporate Management Team. Lack of robust policies and processes, including compliance with the Resilience Standards for London. Failure of the	A failure by the council to deliver essential services and to meet its responsibilities as a 'First Responder' during a major or catastrophic incident. The response may be slower than expected causing disruption to essential services and affect our overall effectiveness during a crisis. This will impact on the reputation of the council, confidence in communities, adverse criticism and increased cost. Failure of the Council to ensure a strategic recovery plan is led and delivered to ensure recovery from a	Ensure compliance with Resilience Standards for London (RSL) The Resilience Standards for London are a broad assurance framework with the aim of continually improving performance across the council's emergency planning and resilience activities. The standards lead to good outcomes and possible leading practice if they are embedded and used across the council. We will conduct an annual self-assessment, signed off by the CCB, CEO and Mayor, and share the report with London Resilience and the NE Sub-Region. The self-assessment will also be subject of peer challenge by the NE Sub-Region. Implementation of Business Continuity Management system upgrade to improve BC	2 4 **8**	Directorate Leadership Teams to have oversight of and regularly review and test their directorate Business Continuity Plans DLT's are encouraged to regularly review their directorate BC Plans and become familiar with the new Business Continuity and Resilience (BC&R) Management software platform. DLT's are to ensure their service managers (plan owners) and Directors (plan approvers) attend training and update their BC plans on the new system. Regular standardised management reports will be provided by the CPU to aid management oversight and improved performance . There will be an annual business continuity audit undertaken by Internal Audit. This will highlight	2 3 **6**	Ann Corbett	Priority 5: Invest in Public Services

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		organisation and the responsible Directorates to continuously develop, update and test their Business Continuity Plans. Under the requirements of the Civil Contingencies Act 2004, the Council is required to have in place suitable & sufficient plans to continue to deliver essential and critical services to the public during major civil emergencies. A lack of resilience on out of hours rotas due to significant staff turnover at a number of levels in the organisation. Failure to debrief and ensure continuous learning from the management of incidents. Failure to assess the risk of emergencies occurring and use this to inform contingency planning. Failure to put in place a crisis communications plan as part of the policy framework. Failure to ensure the Mayor, and all councillors are appropriately trained and understand their leadership role in terms of political, civic and community leadership.	major or catastrophic incident.	management. Implement ClearView system upgrade to Business Continuity and Resilience (BC&R) software. Develop and deliver a comprehensive implementation plan. Train all BC Plan owners (service managers) and approvers on the new system and a refresher course on Business Continuity. Training and exercising An effective training and exercising programme should be in place with a reporting requirement to the CCB and annually to CLT. This process is part of normal business. Quarterly reporting to the CMT is in place. In addition exercises are being planned for the next 2 months. Incidents are de-briefed and learning identified for continuous improvements. Governance and oversight of civil contingencies and business continuity. Governance and oversight is provided by the Civil Contingencies Board (CCB) and the CMT. Annual reporting is to CMT. Annual Assurance through the Internal Audit Function of the Council's business continuity plans. Annual self assessment through the Resilience Standards for London. Corporate Directors and Directors - MAGIC and Strategic Emergency Response training Learning from experience De-briefing post incident is critical to learning from experience and continuous improvement. Debriefs are to be held after a significant civil emergency / BC incident and a record kept to include actions and learning.				where directorates and corporate directors need to take management action to improve BCPs in their service areas. *Simon Smith* *Required Control Measure Target Date: 31/12/2024* Develop a training package and timetable for elected members and the Mayor To ensure the Mayor and elected members are trained and understadn their leadership role in terms of political, civic and community leadership *Simon Smith* *Required Control Measure Target Date: 30/10/2024* Crisis Communications Plan in place and regularly reviewed as part of the Emergency Planning Policy Framework Communications Service to ensure the corporate crisis communications plan is regularly reviewed as part of the Emergency Planning Policy Framework. Ensure it is tested and that the senior managerial and political leadership of the organisation are aware of its aim and objectives. *Andreas Christophorou* *Required Control Measure Target Date: 30/12/2024* Ensure adequate pooled resources available for out of hours rota Ensure all Directors are trained in out of hour response requirements and all are on the on call rota.					

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						Ensure where staff change there is an adequate number of reserves trained for deployment ensure HR are considering the relevant reward packages for those staff undertaking on call to incentivise ***Andrea Stone*** **<u>Required Control Measure Target Date:</u>** Policy framework requirements Review current policies as they relate to the CCA and make sure they are meeting the legislative requirements and reviewed regularly. This may include the review and development of relevant policies in other service areas which are impacted on the CCA which will need to be initiated with the relevant service and the responsible strategy and policy team. The CPU can provide advice. The overall aim is to ensure resilience is mainstreamed into the Council's existing Policy Framework. ***Andrea Stone*** **<u>Required Control Measure Target Date:</u>** *19/12/2024*			

Risk Ref	Risks	Triggers	Consequences	Existing Control Measures	Current Risk L I Total	Required Control Measures	Target Risk L I Total	Responsibility	CPT
ICT0081	Risk of exploitation of Supply Chain vulnerabilities or shocks impacting Council Services, Vendors and Partners.	Cyber attack exploits vulnerability of key supplier Key supplier has inadequate DR and BC to recover from attack in a timely fashion	Inability to deliver services as a result of service outage or disruption – e.g. exploitation of log4j vulnerability in line of business applications Attack is terminal for the supplier i.e. triple threat - ransom of data, deletion of data, publicly expose data	Threat intelligence We receive threat intelligence through Information Security for London and other sources which provides visibility of incidents affecting other organisations so we can prepare our defences Technical Controls We have a wide range of technical controls monitoring our environment for unusual activity which depending on the risk are automatically blocked or flagged for investigation Contractual measures Contracts which require third parties to advise us in a timely way if they are subject to a cyber security incident	2 3 **6**	Procurement process [new suppliers] Partner with IT Security, legal and procurement to implement stage gate for security as a default Detail the questions we will ask/criteria. Fortnightly meeting between Legal, Procurement and IT undertakes supplier review and procurement frameworks. *Steven Tinkler* *Required Control Measure Target Date: 30/06/2024* Where we don't do service reviews [existing suppliers] Draft a questionnaire for mandatory completion Define plan, timeline, roles and responsibilities to conduct this and share the outcomes/generate actions *Adamx Evans* *Required Control Measure Target Date: 30/06/2024* Service reviews [existing suppliers] o Review approach by segment Addition of agenda item on cyber security, DR plan, to service review For vendors where we don't have regular service reviews – send a questionnaire – Mary to add questions DHLU (department for levelling up) Cyber essentials plus (we ask for this over cyber essentials) – certification vendor should produce based on independent assessment.	2 2 **4**	Steven Tinkler	Priority 5: Invest in Public Services

Risk Ref	Risks	Triggers	Consequences	Existing Control Measures	Current Risk L I Total	Required Control Measures	Target Risk L I Total	Responsibility	CPT
						Incident management – how and when will they tell us BCP/DR protocols **_Adamx Evans_** **_Required Control Measure_** **_Target Date:_** **_30/06/2024_**			
RSF0002	The risk of being unable to reclaim VAT from HMRC owing to weaknesses in accounting for VAT and underlying non-compliance with HMRC requirements	Not being able to provide evidence to substantiate VAT claims	Loss of funds to the Council	Liaise with HMRC to provide evidence required to support claims of VAT This is already happening and will continue on a 'business as usual' basis. Existing Controls: PSTAX to review the VAT returns Progress is continuous and Council staff continue to liaise with officers of HMRC on a regular basis. At the time of writing there are no outstanding queries from HMRC. The Council has engaged PSTax (external tax advisors to carry out an independent review of the councils VAT returns commencing January 2024). This is an ongoing arrangement until December 2024. The council has also commissioned an external review of its VAT policies and procedures and the council is in the process of reviewing and implementing recommendations.	3 2 6	Engage external tax advisors to independently review VAT claims for a period of one year The recommendations on the initial high level report have been noted. The council will be reviewing and implementing key recommendations around; -Reviewing resourcing of VAT (Completed) -Training on VAT across the organisation (In Progress) -Ensuring internal VAT documents are updated and reviewed. (Completed) The independent review of the Council's VAT returns will continue until December 2024 **_Danny Warren_** **_Required Control Measure_** **_Target Date:_** **_31/12/2024_**	2 2 4	Abdulrazak Kassim	Priority 8: A Council that Listens and Works for Everyone

Risk Ref	Risks	Triggers	Consequences	Existing Control Measures	Current Risk L I Total	Required Control Measures	Target Risk L I Total	Responsibility	CPT
LPG0036	Community Cohesion: A loss of social capital and a fracturing of the community and local networks	Global Tensions causing persistent public anger, distrust, divisiveness, lack of empathy, marginalisation of minorities and political polarisation in the local communities	negatively impacting social stability, individual well-being and economic productivity		■	*Required Control Measure Target Date:*	■	Simon Baxter	Priority 6: Empower Communities and Fight Crime
LPG0037	People First Transformation: A failure to fully execute, implement and realise the benefits from the Council's core transformation programme		ineffective governance, cultural disengagement, strategic misalignment, and failing to understand and meet the needs of borough residents.		■	*Required Control Measure Target Date:*	■	Robin Beattie	Priority 8: A Council that Listens and Works for Everyone