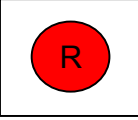
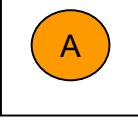
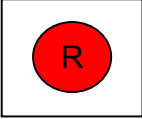
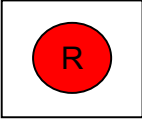
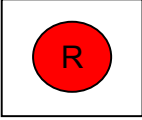


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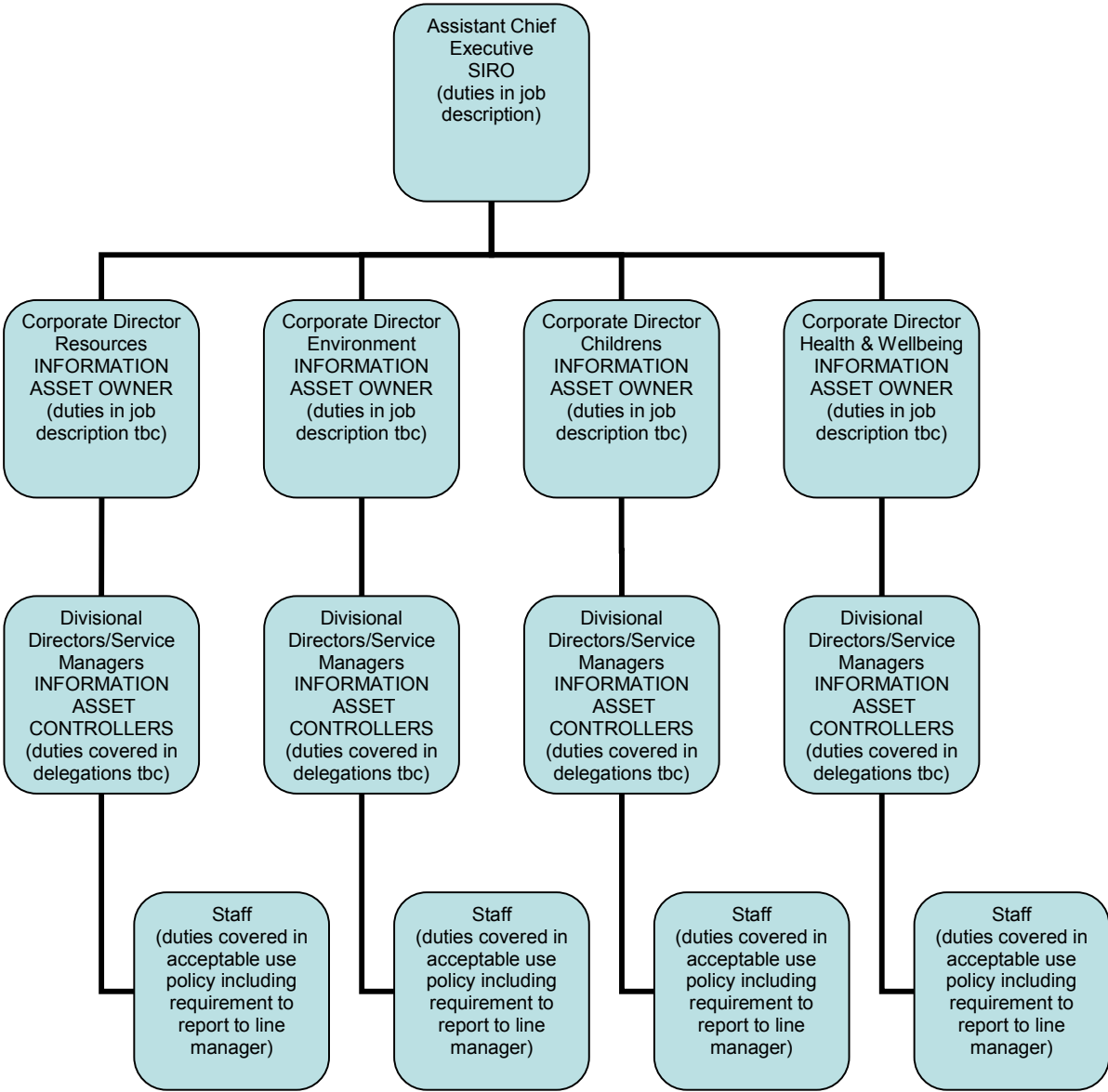
AG Review Ref	Gap Identified	Agreed Action/November 2012 Update	Responsible Officer	Timescale	Gap 2012/13	Progress March 2013
3.4 c/f	<p>The CAFT pages have been updated on the hub so that there is now information surrounding fraud affecting the authority and how employees can report it. There is no direct link to the Corporate Anti-Fraud Policy as this is under review.</p> <p>No awareness sessions etc. are run.</p>	<p>Policy review to be completed.</p> <p>Link to policy to be incorporated.</p> <p>The government has recently launched a new 'Fighting Fraud Locally' strategy and toolkit for implementation in local government and part of this toolkit is a free fraud awareness package endorsed by CIPFA that authorities can roll out within their organisation. The tool disk was provided in August and has been sent to the learning pool for incorporation into Harrow's Learning & Development programme.</p>	<p>Corporate Anti-fraud Service Manager</p> <p>HRD</p>	<p>Nov 2012</p> <p>End Nov 2012</p> <p>End Dec 2012</p>	<div style="text-align: center;">  </div> <p>Risk of gap shown as green in last report.</p>	<p>Policy review on hold as will need to reflect new requirements under the Welfare Reform Act and proposals for single service.</p> <p>It has not been possible to incorporate the toolkit into Harrow's learning pool as the current format is not compatible with our system. This has been raised as an issue and a compatible format is being prepared.</p>
3.7 c/f	<p>Management Assurance Exercise identified directorate/service specific schemes of delegation covering HR / service specific responsibilities not consistently in place across the Council.</p> <p>2011/12 Management Assurance Exercise shows a 2% corporate improvement to 58% working well.</p>	<p>Reminder on the requirement for a directorate/service specific scheme of delegation to be put in place provided to CSB August 2012.</p> <p>Management Assurance Action plans for Childrens, Adults and RAF require action to be taken to develop Directorate delegations.</p>	<p>Corporate Directors</p>	<p>Dec 2012</p>	<div style="text-align: center;">  </div> <p>Risk of gap shown as Amber in last report.</p>	<p>Delegations drafted for Adults and RAF (although these will now need to be updated to reflect change in structure).</p> <p>Childrens yet to be drafted.</p> <p>Review of delegations included in IA Draft Plan 2013/14.</p>

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AGS Ref	Gap Identified	Agreed Action/November 2012 Update	Responsible Officer	Timescale	Gap 2012/13	Progress March 2013
3.34 c/f	There is no consistent approach for validating information from third parties as it is the responsibility of the contract 'owner' Information Management Team now taking this on.	The data Quality Procedures will be reviewed and communicated to management using the new policy compliance software. Taken on by Information Manager August 2012	Information Manager	March 2013	 Risk of gap shown as red in last report.	Delayed by bigger task of implementing the Information Governance Toolkit for the integration of Public Health – will be completed by end April 2013.
3.35 New	Currently no monitoring or compliance testing of policies.	Policy compliance software to be purchased in 2012 which will monitor and test policy compliance. Software identified and costed (£20k + implementation costs). Hope to secure capital funding. Negotiating project details and costs of implementation with CAPITA (as a BTP project).	Information Manager	In place by April 2013	 Risk of gap shown as red in last report.	New policy compliance software to be implemented Q1 2013/14.
3.36 New	Lack of robust reporting mechanisms (on data security breaches) to senior management.	Risk approach to Information Management/Data security to be reviewed in 2012/13 (this will include more robust reporting mechanisms to senior management) Planned structure (see below) will improve reporting.	Information Manager	January 2013	 Risk of gap shown as green in last report.	Planned structure being implemented via workshops with Corporate and Divisional Directors Q1 2013/14.

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Information Risk Management/Security Reporting Structure



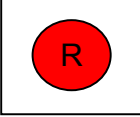
Information Asset Owners (IAOs) are supported by Information Asset Controllers (IAC), who are responsible for managing risks to information assets within their respective directorate. The IAOs are responsible for ensuring that information risk is managed appropriately and for providing assurances to the Information Governance Board (IGB) and the Senior Information Risk Owner (SIRO). The SIRO in turn provides assurances on the controls and procedures for managing Information to the Chief Executive.

The aim is to ensure that the approach to information risk management:

- Takes full advantage of existing authority and responsibility structures where these are fit for this purpose;
- Associates tasks with appropriate management levels;
- Avoids unnecessary impacts on day-to-day business;
- Ensures that all the necessary activities are discharged in an efficient, effective, accountable and visible manner.

Whilst this is the proposed structure individual directorates may find it more appropriate to allocate the role of IAO to another senior officer such as a Divisional Director.

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AGS Ref	Gap Identified	Agreed Action/November 2012 Update	Responsible Officer	Timescale	Gap 2012/13	Progress March 2013
3.37 c/f	<p>The Council has complied with the Governments Code of Connection and was formally certified on 1st Sept 09 and updated 29/07/11. However CAFT moved 01/08/11 to open plan office that does not, in the opinion of the CAFT Service Manager and the Information Management Service Manager comply with the relevant code of connection: All hosts and network equipment are to be located in secure accommodation.</p> <p>The latest compliance statement for GCSX submitted in July 2012 stated: All hosts and networking equipment are located in locked secure accommodation.</p> <p>In addition: GCSx users are restricted to defined areas at two physical locations (Civic1 and Civic 6 buildings) at Harrow Council. Their access to the GCSx system is controlled via firewall rules.</p> <p>There remains a risk that the open plan nature of the accommodation will not be deemed suitably secure should we be audited plus the London Public Sector Network regulations coming in 2013/14 are more rigorous.</p>	<p>Harrow Council has been Authorised to remain connected to GCSX. However, following review of our Code of Connection (CoCo) documents, some non-compliance issues were identified. As a result, we have been asked to provide updates to the following on a quarterly basis (end of March, June, September & December) to the Compliance Team, PSNA:</p> <ol style="list-style-type: none"> 1. IT Health Check remedial action plan (if there were Critical or High risks identified). 2. CoCo - MUST/RECOMMENDED controls where you were unable to state as 'Yes' to compliance. <p>Key issues include the security required for remote access and environment controls including patching and device lockdown.</p> <p>The risk re the open plan accommodation is only part of the compliance requirements according to the Architecture & Security Assurance Manager but is considered to be high risk by the CAFT Manager.</p> <p>Action: Quarterly updates to be provided to the Compliance Team , PSNA</p> <p>Continue to work towards closing gaps identified in the CoCo & IT Health Check.</p> <p>To explore use of glass screening for CAFT with Property Services.</p>	<p>Head of Business transformation Partnership</p> <p>Divisional Director RAF/CAFT Manager</p>	<p>Through out 2012/13</p> <p>Nov 2012</p>	<div style="text-align: center;">  </div> <p>Risk of gap shown as red in last report</p>	<p>Quarterly updates have been provided to the Compliance Team, PSNA. Currently running an ITHC (IT Health Check) of the GCSX environment. Once we have the results we will write and submit, to the PSNA, a remedial action plan for any vulnerabilities found.</p> <p>Exploration of Glass screening for CAFT to be considered through final phase of office move programme in Civic 1.</p>

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AGS Ref	Gap Identified	Agreed Action/November 2012 Update	Responsible Officer	Timescale	Gap 2012/13	Progress March 2013
3.38 c/f	<p>When Capita took over the ITO a full suite of policies was implemented by the Capita ICT Security Manager that meet ISO Standards.</p> <p>Whilst the Council has a full suite of Information Management Policies in place these need to be reviewed and updated.</p>	Full suite of Information Policies currently being reviewed by Information Manager/Information Governance Board.	Information Manager	January 2013	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <div style="background-color: #90EE90; border-radius: 50%; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> G </div> </div> <p>Risk of gap shown as green in last report</p>	Completed and ratified by Information Governance Board March 2013
3.39 New	<p>A security incident log is now in place and is monitored by Council's Client Team. Policies and procedures have also been improved through improvement reviews conducted by the client team i.e. Incident reporting and management procedure. However, the Council can only capture what is reported as a breach or incident and there may be many more out there un-reported.</p>	An awareness campaign on security incidents and reporting of will be launched soon.	Information Manager	January 2013	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <div style="background-color: #90EE90; border-radius: 50%; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> G </div> </div> <p>Risk of gap shown as green in last report</p>	<p>Awareness campaign consisting of posters and comms implemented.</p> <p>Further awareness to be raised via floor walking exercise April 2013</p>

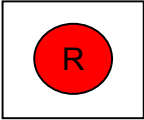
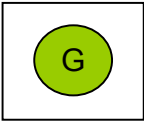
2011/12 AGS Action Plan Update

AGS Ref	Gap Identified	Agreed Action/November 2012 Update	Responsible Officer	Timescale	Risk of Gap 2012/13	Progress March 2013
13.11 c/f	<p>Although there is an integrated Children's Workforce Strategy and joint induction arrangements for those working with children across local partners this does not exist to any significant extent in other Directorates.</p> <p>Workforce strategies and plans continue to be developed but are not yet in place in all Directorates. Where appropriate Directorate workforce strategies / plans include joint planning with partners</p>	<p>This has been identified in the Strategy for People 2010-2012 as an action for 2011 therefore no further action is needed here.</p> <p>Workforce Strategies are now in place for all Directorates with the exception of Resources which is currently being developed (although strategies are in place for number of Divisions within the Directorate) and where relevant partners are identified.</p>	Jon Turner	Dec 2012	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <div style="background-color: orange; border-radius: 50%; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> A </div> </div> <p>Risk of gap shown as green in last report</p>	<p>Given the Finance restructure it has not been possible to develop a workforce strategy for the whole of the Resources Directorate although other Divisions within Resources have them.</p>

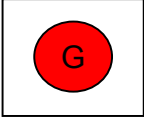
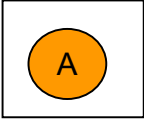
2011/12 AGS Action Plan Update

AGS Ref	Gap Identified	Agreed Action/November 2012 Update	Responsible Officer	Timescale	Gap 2012/13	Progress February 2013
GF7 c/f	<p>A significant gap relates to IT Disaster Recovery which was recognised as a significant governance gap in the 2008/09 Annual Governance Statement and remained a gap throughout 2009/10, 2010/11 and 2011/12.</p> <p>There are arrangements in place to meet this requirement however the main project to support this is the migration of the council's IT applications to the Capita West Malling site, which was due to commence in September 2011 on a phased programme to be completed in April 2012. This programme has been delayed as the Council is considering keeping the data centre on-site in order to deliver a cost saving. Given the delay this necessitates a plan is now being put together to test disaster recovery of the systems as they stand.</p> <p>There is a continuing risk until this project is complete although the wider business continuity plan takes this into account and the risk is no greater than it has been historically over a number of years.</p>	<p>A disaster recovery plan is now being put together for the main systems; SAP, Framework I + Telephony and a test will be carried out mid December.</p>	<p>Head of IT Client Team</p>	<p>End December 2012 (reliant on CAPITA)</p>	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <div style="background-color: orange; border-radius: 50%; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> A </div> </div> <p>Risk of gap shown as amber in last report</p>	<p>Plan in place and recovery tested. User acceptance testing delayed until Q1 2013/14 due to year-end procedures.</p>

2011/12 AGS Action Plan Update

AGS Ref	Gap Identified	Agreed Action/November 2012 Update	Responsible Officer	Timescale	Gap 2012/13	
OGF8 c/f	<p>Health & Safety</p> <p>Management Assurance Exercise identified that Health & Safety not working well across all areas of the Council.</p> <p>A comprehensive review of H&S has been carried out and a new restructure and a two year improvement plan is commenced in 2011/12.</p>	<p>Progress made i.e. audit tool rolled out, but will not be fully implemented until 2013 as it is a two year plan.</p>	Divisional Director Risk, Audit & Fraud	April 2013	<div style="text-align: center;">  </div> <p>Risk of gap shown as red in last report</p>	Timescale for full implementation extended to July 2013.
3.42 c/f	<p>Although a well publicised Energy Saving Campaign was run in 2008/09 it is recognised that a more pro-active engagement with staff is needed.</p> <p>Reduced staffing levels and a freeze on recruitment during 2010/11 have meant that it has not been possible to devise a pro-active engagement programme on the Council's approach to reducing its impact.</p>	<p>2010/11 AGS agreed action : To devise a pro-active engagement programme on the council's approach to reducing its impact on the environment.</p> <p>Not implemented during 2011/12 due to lack of resources and this is not expected to change in the near future.</p> <p>Whilst the Council will continue to engage with staff on individual campaigns it is recognised that it will not be possible to undertake an extensive pro-active engagement programme. Whilst not ideal this is not considered to be a significant governance risk.</p>	Head of Climate Change	n/a	<div style="text-align: center;">  </div> <p>Risk of gap shown as green in last report</p>	n/a

2011/12 AGS Action Plan Update

AGS Ref	Gap Identified	Agreed Action/November 2012 Update	Responsible Officer	Timescale	Risk of Gap 2012/13	
16.5 New	This significant gap relates to the lack of separation in the Council's main accounting system between the Council's financial records and those of the West London Waste Authority (WLWA) and the fact that, whilst the WLWA is a separate legal entity, a separate bank account is not in operation. Although the account has been operating in this way for many years a number of issues arose during the course of the audit, that the External Auditors and the Council's Corporate Finance team have worked together to resolve, which highlighted the risks of no separate bank account.	<p>Action will be agreed as part of the 2011/12 AGS Action Plan to ensure that this situation does not re-occur in the future.</p> <p>A new treasurer for WLWA is about to be appointed and a decision taken as to whether the Finance back office will transfer to another authority under the new treasurer. It will be for the new treasurer to determine the appropriate action to be taken however if Harrow are no longer involved in WLWA finance this will cease to be a governance issue for Harrow.</p>	Treasurer WLWA/Treasury Management	New treasurer to be agreed by end Dec 2012	<div style="text-align: center;">  </div> <p>Risk of gap shown as green in last report</p>	<p>The new WLWA Treasurer is reviewing the current arrangements for financial support but is likely to seek authority from its Board with effect from 1 April 2014, for a</p> <ul style="list-style-type: none"> • Separate bank account • Independent VAT number; and • A Stand alone finance system <p>External Audit's view on this to be sort and reported verbally to the GARM Committee on 04/04/13.</p>
16.6 New	Ledger codes for Academy schools that are no longer council assets were 'closed' and removed from the chart of accounts without the required approval. Hence income and expenditure was omitted from the draft financial statements.	<p>Management will review the approval processes in place. We will write to all finance staff and the ERP team to reinforce the importance of this control.</p> <p>IA – This should be included in a Financial Procedure linked to Financial Regulations.</p> <p>Review complete and responsibility for authorising action agreed and communicated to relevant staff. (Evidenced)</p> <p>Formal Financial Procedure to be drafted.</p>	Finance Business Partner, Financial Accounting, Capital & Taxation	Dec 2012	<div style="text-align: center;">  </div> <p>Risk of gap shown as green in last report</p>	<p>Formal Financial Procedure still to be drafted as Financial Regulations currently being reviewed.</p> <p>However additional checks implemented to ensure that the cost centres are not moved between the LBH and Non – LBH hierarchy.</p>