



Dacorum Borough Council

Assurance Review of Business Continuity

September 2024

Final



Executive Summary

OVERALL ASSESSMENT







ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

Risk in respect of Continuity including Financial failure and ICT systems key staff etc.


SCOPE

Review of the adequacy and effectiveness of controls in place at the Council for managing the business continuity planning process and ensuring that the Council is resilient to disruptive events that may impact upon the organisation.

KEY STRATEGIC FINDINGS

-  The systems of internal controls is generally adequate and operating effectively.
-  Multiple scenarios are trained and tested each year. Best practice is shared through the Hertfordshire Local resilience Forum. In addition, all key resilience documents are hosted on the Resilience Direct portal that all key staff and partners can access using their secure log in. A full test should be conducted relating to the Business Continuity Plan, Resilience Policy and Corporate Emergency Plan through an agreed testing programme.
-  A review of the Business Continuity training should be undertaken, and an appropriate training programme implemented.
-  Key performance indicators relating to Business Continuity should be developed/formulated.

GOOD PRACTICE IDENTIFIED

-  A Resilience Board is to be established to co-ordinate day-to-day DBC resilience arrangements. Reporting to the Senior Leadership Team (SLT) and that the policy will be reviewed at least annually by the Resilience Board and Senior leadership Team and following, exercises, lessons learnt, legislation changes or adoption of best practice.

ACTION POINTS

Urgent	Important	Routine	Operational
0	2	2	0

Assurance - Key Findings and Management Action Plan (MAP)

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
1	Directed	<p>Testing relating to the Business Continuity Plan, Resilience Policy and Corporate Emergency Plan should be conducted regularly (this is typically on at least an annual basis) and at a minimum every three years relating to the Business Continuity Plan.</p> <p>Discussions with the Head of Corporate Health, Safety and Resilience confirmed that there has not been full testing/simulation regarding the full implementation of the Business Continuity Plan, The Resilience Policy and Corporate Emergency Plan. A desktop exercise has been conducted relating to a fire in a block of flats on 8th January 2024 which involved selected members of the Corporate Leadership Team, Cybersecurity on 29th February 2024, which was online and involved the whole organisation, establishing a reception centre on 10th May 2024 which mainly involved the Housing Department. In addition, there was a practical exercise with the fire service on 19th June 2024 and a live exercise at Buncefield in October 2023.</p>	A full phased testing programme approach to be conducted relating to the Business Continuity Plan, Resilience Policy and Corporate Emergency Plan.	2	<i>This is unrealistic as there are too many BCPs & BIAs to test even over 5 years. I suggest a risk-based approach over 3 years.</i>	10/09/2026	Martin Kirk

PRIORITY GRADINGS

1 URGENT Fundamental control issue on which action should be taken immediately.

2 IMPORTANT Control issue on which action should be taken at the earliest opportunity.

3 ROUTINE Control issue on which action should be taken.

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
2	Directed	<p>Training relating to the Business Continuity Plan, Resilience Policy and Corporate Emergency Plan should be conducted regularly as per the policy. Discussions with the Head of Corporate Health, Safety and Resilience confirmed that training relating to Cybersecurity, Fire and the establishment of a Reception Centre has taken place.</p> <p>However, there is consideration and ongoing discussions regarding training relating to Business Continuity being made mandatory.</p>	A review of the Business Continuity training requirements to be undertaken and an appropriate training programme implemented. This will support the full testing outlined above.	2	<i>A review of Resilience training is currently being undertake.</i>	31/04/2025	Martin Kirk
3	Directed	Discussion with the Head of Corporate Health, Safety & Resilience confirmed that there is a spreadsheet maintained of when the various Service Level Business Continuity Plan and Business Impact Plans are due for renewal. The spreadsheet was obtained and reviewed. It was noted that overall, the spreadsheet was not up to date. For e.g., The Planning Department Service Level Business Continuity Plan and Business Impact Plans were due to be renewed in January 2024 and had been reviewed in February 2024 this had not been reflected on the spreadsheet.	The spreadsheet maintained when the Service Level Business Continuity Plans and Business Impact Plans are due for review to be updated on a regular basis (Possibly Monthly) In addition, high risk service area plans should be appropriately tested.	3	<i>Monthly is too frequent. I suggest annual reviews as these are the very basic levels of service. A program of reviews is currently being developed to ensure each service level BCP & BIA is reviewed.</i>	31/04/2025	Martin Kirk
4	Delivery	Currently no Key Performance Indicators relating to Business Continuity have been developed/formulated.	Key Performance Indicators relating to Business Continuity to be developed/formulated.	3	<i>This is currently being discussed. A KPI is currently being considered and discussed with the PMO and Strategic Director.</i>	31/04/2025	Martin Kirk

PRIORITY GRADINGS

1 **URGENT** Fundamental control issue on which action should be taken immediately.

2 **IMPORTANT** Control issue on which action should be taken at the earliest opportunity.

3 **ROUTINE** Control issue on which action should be taken.

Operational - Effectiveness Matter (OEM) Action Plan

Ref	Risk Area	Finding	Suggested Action	Management Comments
No operational effectiveness matters were identified.				

ADVISORY NOTE

Operational Effectiveness Matters need to be considered as part of management review of procedures.

Findings



Directed Risk:

Failure to properly direct the service to ensure compliance with the requirements of the organisation.

Ref	Expected Key Risk Mitigation	Effectiveness of arrangements	Cross Reference to MAP	Cross Reference to OEM
GF	Governance Framework There is a documented process instruction which accords with the relevant regulatory guidance, Financial Instructions and Scheme of Delegation.	In place	-	-
RM	Risk Mitigation The documented process aligns with the mitigating arrangements set out in the corporate risk register.	In place	-	-
C	Compliance Compliance with statutory, regulatory and policy requirements is demonstrated, with action taken in cases of identified non-compliance.	Partially in place	1, 2, & 3	-

Other Findings



Discussions with the Head of Corporate Health, Safety and Resilience confirmed that there is an Organisation Wide Business Continuity Plan for the Council which is a strategic plan to provide guidance of how an organisational response can be managed or co-ordinated. It also contains information regarding issues or considerations which may inform the response.

In addition, there are also Individual Service Level Business Continuity Plans for all Service Areas which outline the detailed operational or tactical specific information, actions or measures.

The Organisation Wide Business Continuity Plan was obtained and reviewed. It was noted that the Plan is due for renewal in July 2024. The main aspects covered as part of the plan were as follows:

1) Aim of the Plan

To provide a framework for how Dacorum Borough Council (DBC) can continue to deliver prioritised services in the event of an emergency or disruption.

2) Objective

- Provide guidance and information to assist the organisation to respond to a disruption.
- Minimise the consequences from disruption on prioritised services.
- Outline the structures on how to manage and coordinate an incident.
- Ensure appropriate communication and information sharing.

Other Findings

3) Scope

- Provides an organisational approach to the response. Service specific actions should be contained within their own relevant documentation.
- Does not replace the detail or description which should be contained within service level plans.
- Does not replicate the Business Impact Analysis (BIA) process for identifying or justifying which are prioritised services across the organisation.

4) Content

- Activating a Corporate Response.
- Initial Actions.
- Incident Management Team (IMT).
- Roles and Responsibilities.
- Prioritised services during a disruption.
- Resources Available.
- Communication.
- Supporting Information.
- Standing Down.
- Debrief.
- Document Management.

In addition to the Organisation Wide Business Continuity Plan there is a Resilience Policy and a Corporate Emergency Plan.

The Resilience Policy was obtained and reviewed. The following was noted:

- There was no review date or date the policy was approved; however, it does state that the policy has been signed by the Chief Executive.
- The purpose of the policy is to ensure that the Council fulfils its duties under Civil Contingencies Act (CCA) 2004. This extends to ensuring the co-operation and co-ordination in matters relating to emergency planning and business continuity with our strategic partners, and the wider community.
- A Resilience Board will be established to co-ordinate day-to-day DBC resilience arrangements. Reporting to the Senior Leadership Team (SLT) and that the policy will be reviewed at least annually by the Resilience Board and Senior leadership Team and following, exercises, lessons learnt, legislation changes or adoption of best practice.
- Roles and responsibilities in relation to resilience and the activation of the policy had been out e.g. The Deputy Chief Executive will provide the leadership focusing on resilience issues, chair the Resilience Board and ensuring the organisation manages its significant risks.
- The Human Resource Training Team shall ensure that all resilience training is clearly linked to the staff roles outlined in plans and delivered in an appropriate and timely format for the intended audience.

The Corporate Emergency Plan was obtained and reviewed. The following was noted:

- It was last reviewed in March 2023, and it was due for review in March 2024. No recommendation has been raised for this as it has been scheduled for August 2024.
- The document provides a framework for how Dacorum Borough Council should respond during an incident.

Other Findings

- The main elements included in the plan were as follows 2024:

1. Initial notification of an incident.
2. Activating a response.
3. Consideration during a response.
4. Incident management team.
5. Incident control centre.
6. Reception centre.
7. Multi-agency command and control.
8. Expenditure.
9. Standing down a response.
10. Debriefing.
11. Recovery phase.



Discussions with the Head of Digital Services and Head of Corporate Health, Safety & Resilience confirmed that all the previous recommendations had been actioned. Since the previous audit the following has taken place:

- Cybersecurity exercise in February 24, there are 19 recommendations to be followed up as part of the exercise.
- Two new modules were introduced as part of the Mandatory Training to address IT security for remote workers. (Creating Strong Passwords and Using Email Safely) compliance currently is at 66%.
- The ICT Business Recovery Plan has been updated in January 2024.
- The Remote and Home Working Policy has been updated in 2022.
- A back up policy has been formulated/developed.
- The council is refreshing its hardware during 2024/25 and consideration will be given to including offsite/immutable backup as part of the new contract.
- The organisation is working towards the Cyber Essentials Certification.



The Business Continuity Plan, Resilience Policy and Corporate Emergency Plan clearly outline the roles and responsibilities of the various individuals within the organisation and where applicable multi-agency as well. A review of the policies indicated that there is clear segregation of duties should the plans be activated.



The Business Continuity Plan, Resilience Policy and Corporate Emergency Plan should be updated annually as per the policy.

The Business Continuity Plan, Resilience Policy and Corporate Emergency Plan was reviewed, and discussions were held with the Head of Corporate Health, Safety and Resilience. It was noted that there had been a delay in the updating of the Business Continuity Plan and Emergency Plan due to the availability of the consultant as the Head of Health & safety have been a vacant post for a few months. The consultant is currently reviewing the plans.

The Resilience policy has been recently updated and is currently being consulted on. It was submitted to the Resilience Board on 17th April 2024.



There are Individual Service Level Business Continuity Plan and Business Impact Plans for over 14 Service Areas which outline the detailed operational or tactical specific information, actions or measures relating to Business Continuity.

Other Findings

The Service Level Business Continuity Plan and Business Impact plan for the Finance Department and ICT Department was reviewed. The following was noted:

Finance Business Continuity Plan

- The Finance Business Continuity Plan is updated annually. Specifically in relation to ensuring that the contact numbers of the team are up to date. The next review is due in December 2024.
- The main aspects outlined as part of the Finance Business Continuity Plan were as follows:
 1. Plan Overview.
 2. ICT Services.
 3. Invocation and Notification.
 4. Business Continuity Team.
 5. Critical Services.
 6. Resources.
 7. Alternative Accommodation.
 8. Contact Directory.
- Discussions with the Head of Financial Services confirmed that the key business continuity risk relating to the Finance Department is failure of the Councils ICT network, which is subject to its own Business Continuity plan and testing.

Finance Business Impact Analysis

- It is next due for review in December 2024.
- The main elements included as part of the Business Impact Analysis were as follows:
 1. Identification of core services.
 2. Understanding Impacts - in relation to Legal, Financial, Environmental, Harm to people, Reputation, Duty of Care, Corporate organisation.
 3. Minimum Level of Service.
 4. Resource Requirements.
 5. Dependents.

ICT Business Continuity Plan

- The plan was last reviewed in June 2023.
- The main aspects outlined as part of the ICT Business Continuity Plan were as follows:
 1. Plan Overview.
 2. ICT Services.
 3. Invocation and Notification.
 4. Business Continuity Team.
 5. Critical Services.
 6. Resources.
 7. Alternative Accommodation.
 8. Contact Directory.

For the Service Level Business Continuity Plans and Impact Plans reviewed no issues were identified. The controls were considered to be operating efficiently and effectively.





Delivery Risk:

Failure to deliver the service in an effective manner which meets the requirements of the organisation.

Ref	Expected Key Risk Mitigation	Effectiveness of arrangements	Cross Reference to MAP	Cross Reference to OEM
PM	Performance Monitoring There are agreed KPIs for the process which align with the business plan requirements and are independently monitored, with corrective action taken in a timely manner.	Partially in place	4	-
S	Sustainability The impact on the organisation's sustainability agenda has been considered.	In Place	-	-
R	Resilience Good practice to respond to business interruption events and to enhance the economic, effective and efficient delivery is adopted.	In place	-	-

Other Findings

-  Discussions with the Head of Corporate Health, Safety and Resilience confirmed that there is a shared consultancy budget with Health & Safety of £50,000. Where additional funds are requested, this is also made accessible through business cases to Senior Leadership Team.
-  Multiple scenarios are trained and tested each year. Best practice is shared through the Hertfordshire Local resilience Forum. Resilience webinars are also attended, and any organisational learning points are reviewed to further adopt best practice.
In addition, all key resilience documents are hosted on the Resilience Direct portal that all key staff and partners can access using their secure log in.

Scope and Limitations of the Review

1. The definition of the type of review, the limitations and the responsibilities of management in regard to this review are set out in the Annual Plan. As set out in the Audit Charter, substantive testing is only carried out where this has been agreed with management and unless explicitly shown in the scope no such work has been performed.

Disclaimer

2. The matters raised in this report are only those that came to the attention of the auditor during the course of the review and are not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. This report has been prepared solely for management's use and must not be recited or referred to in whole or in part to third parties without our prior written consent. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any other purpose. TIAA neither owes nor accepts any duty of care to any other party who may receive this report and specifically disclaims any liability for loss, damage or expense of whatsoever nature, which is caused by their reliance on our report.

Effectiveness of arrangements

3. The definitions of the effectiveness of arrangements are set out below. These are based solely upon the audit work performed, assume business as usual, and do not necessarily cover management override or exceptional circumstances.

In place	The control arrangements in place mitigate the risk from arising.
Partially in place	The control arrangements in place only partially mitigate the risk from arising.
Not in place	The control arrangements in place do not effectively mitigate the risk from arising.

Assurance Assessment

4. The definitions of the assurance assessments are:

Substantial Assurance	There is a robust system of internal controls operating effectively to ensure that risks are managed and process objectives achieved.
Reasonable Assurance	The system of internal controls is generally adequate and operating effectively but some improvements are required to ensure that risks are managed and process objectives achieved.
Limited Assurance	The system of internal controls is generally inadequate or not operating effectively and significant improvements are required to ensure that risks are managed and process objectives achieved.
No Assurance	There is a fundamental breakdown or absence of core internal controls requiring immediate action.

Acknowledgement

5. We would like to thank staff for their co-operation and assistance during the course of our work.

Release of Report

6. The table below sets out the history of this report.

Stage	Issued	Response Received
Audit Planning Memorandum:	15 th May 2024	15 th May 2024
Draft Report:	23 rd June 2024	11 th September 2024
Final Report:	17 th September 2024	