

## Corporate Risks

### Risk Cyber risk

Likelihood	H			G
	M			R
	L		T	
		L	M	H
	Impact			

**Impact Measures**

**Risk Description**

The Council's infrastructure could be compromised by the introduction of malicious software. This could include a traditional destructive virus or another type of incursion such as information gathering software, ransomware, credential harvesting, etc. The threat from Cyber terrorism continues to increase on a global scale and by July 2017, two high profile, highly effective ransomware attacks had already taken place, crippling organisations in both the public and private sector. Everything from non-criminal system failures to criminal activities (be they first or third party) can impact on our ability to operate. •With the new GDPR legislation the risks associated with breaches, made worse by non-compliance to security standards and general best practice, have increased the need to understand our risk landscapes and mitigate them as appropriate.

**Potential Consequences**

•The impact of these events can have financial, operational, strategic, compliance, criminal, and reputation impacts.

**Implication**

This risk implies that the Council's network or infrastructure has been compromised and an unknown threat actor who has successfully introduced malicious software such as a virus or ransomware to our environment. It should also be considered that this introduction has or will disrupt services or otherwise compromise the Council's information systems over an undetermined period.

The malicious software could have been introduced in any number of ways, such as by a member of staff clicking on a link within an email, the opening of a malicious file or the failure of ICT or a service provider to sufficiently patch and update vulnerable systems. There is also the potential for an attack to make use of a zero-day exploit - something which takes advantage of a previously unknown vulnerability, for which there is no immediate fix or protection.

**Risk Owners**

Martin Hamilton

**Risk Rating**

High Red 9

**Last Review**

17/03/2022

**Final Risk Rating**

Medium Amber 6

**Next Review**

15/06/2022

**Target Risk Level**

Low Green 2

**Treatment**

Treat

**Path**

Corporate Risks/Newcastle Under Lyme

# Corporate Risks

18/03/2022 08:23:35

## Risk Data Breach

Likelihood	H			
	M			R/G
	L			T
		L	M	H
	Impact			

### Impact Measures

**Risk Description** Non-compliance with the Data Protection Act and and General Data Protection Act

**Potential Consequences** Fine of up to £20m and damage to reputation

**Implication** Severe

**Risk Owners** Daniel Dickinson

**Risk Rating** Medium Amber 6

**Last Review** 17/03/2022

**Final Risk Rating** Medium Amber 6

**Next Review** 21/04/2022

**Target Risk Level** Medium Amber 3

**Treatment** Tolerate

**Path** Corporate Risks/Newcastle Under Lyme

### Key Controls Identified

Information Governance Officer

Action plan produced

Information Governance Group Formed

Training available

### Action Plans

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
Review mandatory DPA/GDPR training across the Council	Planned	Daniel Dickinson Ian Slee	31/03/2022	

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**Key Controls Identified**

- Staff awareness
- Internet and email policies
- Anti-Virus scanning at internet gateway
- Anti-Virus software
- Comprehensive Information Security policies
- Blocking of Removable Media
- Mandatory Information Security training for staff
- Information Security Group
- Penetration testing
- Receive Gov Cert UK Warnings from NCSC
- Use of Government CNS service
- Anti-Ransomware software
- Patch management
- Use of Virtualised Environments
- Attendance at West Midlands WARP (West Midlands Warning and Reports Procedures Group)

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**Action Plans**

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
Risk assessment based process via insurance Brokers to be completed	Planned	Annette Bailey Diana Litherland Dominic Taylor	31/03/2022	J Sheldon emailed the Marsh Cyber expert regarding the risk assessment and they have requested a meeting (virtual?) to discuss and ask follow-up questions - this is to be arranged.

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## Risk Failure of the council's Document Management System & Data Breaches

Likelihood	H			
	M			R/G
	L			T
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** Failure of the council's (Electronic) Document Management System and Information management including DPA / EIR / FOI

**Potential Consequences** Inability to index and retrieve scanned records. No access to business critical records. Reputational damage. Reduced efficiency and effectiveness of service. Statutory breach.

**Implication** Unable to access / share key records / non compliance with legal obligations.

**Risk Owners** Nesta Barker; David Beardmore; Matthew Burton; Nigel Gardner; Darren Walters

**Risk Rating** Medium Amber 6 **Last Review** 18/02/2022

**Final Risk Rating** Medium Amber 6 **Next Review** 19/05/2022

**Target Risk Level** Medium Amber 3 **Treatment** Tolerate

**Path** Environmental Services/Operational Services/Newcastle Under Lyme

### Key Controls Identified

- Corporate team established to develop Document Management.
- The council has a corporate Records Management/Retention Policy.
- EDRM Champion.
- Data Space Storage.
- Secure Server for evidence.
- EIR/FOI/DPA enquiries.
- Environmental Health's Business Continuity Plan.

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## Action Plans

	Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
Document Retention	Confirm that document are correctly indexed and have appropriate retention periods set. Investigate if selected removal will be possible once business need to retain expires.	Ongoing	Nesta Barker David Beardmore EH-Richard Landon	31/03/2022	Guidance / Training / Testing of record deletion needed Important that process follows corporate approach once developed. Now part of work programme for RL as EH_Tech
Formalise procedure for digital evidence storage	Recording and storage system developed for digital records likely to be required for evidence purposes.	Ongoing	Darren Walters	01/04/2022	\\svfs1\Environmental Health Dept\Policies and Procedures\Evidence storage documents, track and test implications with this doc at the moment , further action taking place. (8/10/20), piloting process and records at this moment in time, as part of phased implementation.
GDPR Review	Process review and staff training to ensure that records are stored correctly and retained for appropriate periods	Ongoing	Nesta Barker David Beardmore EH-Richard Landon	01/04/2022	Ongoing process with no end date. needs to happen continuously.
Implementing GDPR Health Check Action Plan	Implementing GDPR Health Check Action Plan, following review by Diana Litherland.	Planned	Nesta Barker David Beardmore Diana Litherland	30/09/2021	Corporate project started however service priority is Covid work -review in May 2021.

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# Balances and Contingencies Reserve

## Risk Data Protection Breach Resulting in a Fine

Likelihood	H			G
	M			
	L		R	
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** Data protection breach resulting in a Fine

**Potential Consequences** Potential fines from ICO, damage to Council reputation, adverse publicity and legal implications. Financial and Reputational consequences. Damage to individuals

**Implication**

**Risk Owners** Sarah Wilkes

**Risk Rating** High Red 9      **Last Review** 06/09/2021

**Final Risk Rating** Low Green 2      **Next Review** 05/03/2022

**Target Risk Level**

**Treatment** Tolerate

**Path** Balances and Contingencies Reserve/Finance/Resources and Support Services/Newcastle Under Lyme

### Key Controls Identified

Training, advice and alerts produced

### Action Plans

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
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**Risk Breach of Personal Information by Phone, Face to Face and Written Communication**

Likelihood	H			
	M	R	G	
	L			
		L	M	H
	Impact			

**Impact Measures**  
**Risk Description** Breach of Personal information by Phone, Face to Face and Written Communication  
**Potential Consequences** Reputational damage to the Council, loss of customer trust and embarrassment for the individual.  
**Implication**  
**Risk Owners** Rosie Bloor; Diana Litherland  
**Risk Rating** Medium Amber 5 **Last Review** 24/01/2022  
**Final Risk Rating** Low Green 4 **Next Review** 23/07/2022  
**Target Risk Level** **Treatment** Tolerate  
**Path** Benefit Services/Customer and Digital Services/Resources and Support Services/Newcastle Under Lyme

**Key Controls Identified**

- Customer Care Training - in house is compulsory through the Corporate Induction Process
- Protective Marking Scheme
- Regular Staff Training
- STeP GDPR Training

**Action Plans**

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
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**Risk Data Protection Act/Human Rights Act Breached**

Likelihood	H			
	M		G	
	L	R		
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** The Data Protection Act and/or the Human Rights Act are breached in the way information gathered is used.

**Potential Consequences** Customer complaints. Legal action. Third Party intervention. Financial implications.

**Implication**

**Risk Owners** Roger Tait

**Risk Rating** Medium Amber 5 **Last Review** 27/01/2022

**Final Risk Rating** Low Green 1 **Next Review** 24/02/2022

**Target Risk Level** **Treatment** Tolerate

**Path** CCTV/Operations/Operational Services/Newcastle Under Lyme

**Key Controls Identified**

- Impact Analysis
- Insurance
- Legal Department
- Liaison with Local Constabulary
- Policy on Information Use
- Restricted Access to systems and information
- Tape Archiving System
- Supervision
- Training

**Action Plans**

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
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## Risk Breach of Personal Information by Phone, Face to Face and Written Communication

Likelihood	H			
	M	R	G	
	L			
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** Breach of Personal Information by Phone, Face to Face and Written Communication

**Potential Consequences** Reputational damage to the Council, loss of customer trust and embarrassment for the individual.

**Implication**

**Risk Owners** Rosie Bloor; Diana Litherland

**Risk Rating** Medium Amber 5      **Last Review** 21/01/2022

**Final Risk Rating** Low Green 4      **Next Review** 20/07/2022

**Target Risk Level**      **Treatment** Tolerate

**Path** Customer Services/Customer and Digital Services/Resources and Support Services/Newcastle Under Lyme

### Key Controls Identified

- Customer Care training in house is compulsory through the Corporate Induction process.
- Regular staff training.
- Protective Marking Scheme
- STeP GDPR Training

### Action Plans

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
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## Risk                  GDPR

Likelihood	H			
	M			G
	L			R/T
		L	M	H
	Impact			

**Impact Measures**

**Risk Description**                  Compliance with GDPR regime that came in May 2018

**Potential Consequences**      Fine of up to £20m and damage to reputation

**Implication**                              Severe

**Risk Owners**                              Martin Hamilton

**Risk Rating**                                Medium Amber 6

**Last Review**                              18/03/2022

**Final Risk Rating**                        Medium Amber 3

**Next Review**                              16/06/2022

**Target Risk Level**                        Medium Amber 3

**Treatment**                                Tolerate

**Path**    Chief Executive's Office/Newcastle Under Lyme

### Key Controls Identified

Information Governance Group Formed

Training available

### Action Plans

**Action Plan Description**

**Action Plan Type**

**Action Plan Owner**

**Due for Completion by**

**Comments**

**Risk (4.Technological) A breach of Data Protection for the service.**

Likelihood	H			
	M			
	L		R/G	
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** (Technological) A breach of Data Protection for the service resulting in a financial penalty and/or corrective action required

**Potential Consequences**

**Implication**

**Risk Owners** Roger Tait

**Risk Rating** Low Green 2 **Last Review** 07/02/2022

**Final Risk Rating** Low Green 2 **Next Review** 06/08/2022

**Target Risk Level**

**Treatment**

**Path** Operations/Operational Services/Newcastle Under Lyme

**Key Controls Identified**

Staff training and council policies are both in place.  
Monitoring of compliance with Data Protection undertaken by the council.

**Action Plans**

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
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## Risk Breach of Personal Information by Phone, Face to Face and Written Communication

Likelihood	H			
	M	R	G	
	L			
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** Breach of Personal Information by Phone, Face to Face and Written Communication

**Potential Consequences** Reputational damage to the Council, loss of customer trust and embarrassment for the individual.

**Implication**

**Risk Owners** Rosie Bloor; Diana Litherland

**Risk Rating** Medium Amber 5

**Last Review** 21/01/2022

**Final Risk Rating** Low Green 4

**Next Review** 20/07/2022

**Target Risk Level**

**Treatment** Tolerate

**Path** Revenue Services/Customer and Digital Services/Resources and Support Services/Newcastle Under Lyme

### Key Controls Identified

- Customer Care training in house is compulsory through the Corporate Induction process.
- Protective Marking Scheme
- Regular Staff Training
- STeP GDPR Training

### Action Plans

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
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# Managing Information Risk

## Risk Communications Strategy for Web Content

Likelihood	H			
	M		G	
	L		R	
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** Communications strategy for web content to ensure standards for web content are put in place and adhered to by departments

**Potential Consequences** Reputational Damage  
Inaccurant and inconsistant information to the public  
Lack of cross departmental information supplied

**Implication**

**Risk Owners** Janet Baddeley

**Risk Rating** Medium Amber 5

**Last Review** 01/10/2021

**Final Risk Rating** Low Green 2

**Next Review** 30/03/2022

**Target Risk Level**

**Treatment** Treat

**Path**

Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

### Key Controls Identified

Clear ownership as a business issue, not an IT issue

Essential Training

Responsible person identified for championing the information re-use agenda for each department / organisation

### Action Plans

Action Plan Description

Action Plan Type

Action Plan Owner

Due for Completion by

Comments

## Risk Data Protection - Disclosure of Personal Information (Large Scale)

Likelihood	H			
	M			G
	L			R
		L	M	H
	Impact			

**Impact Measures**

**Risk Description**

Both the General Data Protection Regulations and the Data Protection act require the authority to maintain appropriate policy and technical controls to prevent the accidental or deliberate disclosure of personal information.

**Potential Consequences**

This risk considers the the accidental or deliberate disclosure of personally sensitive information on a large scale.

- Risk to personal safety of individuals
- Increased and ongoing risk of identity fraud for individuals
- Compromise of Council information
- Exposure of special category data
- Reputational damage
- Significant monetary penalties
- Investigation by ICO

**Implication**

This risk implies that personal data on a large scale has been accidentally or deliberately disclosed by the authority or an external threat actor. Examples may include: compromise of an externally accessible database, uploading of information to an insecure cloud service, careless sharing via email, failing to appropriately anonymise data, accidental uploading of data to the Council's website, etc.

**Risk Owners**

Martin Hamilton; Diana Litherland

**Risk Rating**

Medium Amber 6

**Last Review**

23/02/2022

**Final Risk Rating**

Medium Amber 3

**Next Review**

24/05/2022

**Target Risk Level**

**Treatment**

Tolerate

**Path**

Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

### Key Controls Identified

- Access Control
- Cloud Service Restrictions
- Containment of BYOD Usage
- Protective Marking
- Regular Penetration Testing of Services
- Website Publishing Protocol

### Action Plans

**Action Plan Description**

**Action Plan Type**

**Action Plan Owner**

**Due for Completion by**

**Comments**

## Risk Data Protection - Disclosure of Personal Information (Small Scale)

Likelihood	H			R/G
	M			
	L			T
		L	M	H
	Impact			

### Impact Measures

### Risk Description

Both the General Data Protection Regulations EU 2016/679 and the Data Protection Act 2018 require the authority to maintain appropriate policy and technical controls to ensure appropriate security of personal data which includes protection against unauthorised or unlawful processing and against accidental loss, destruction or damage.

This risk considers the the accidental or deliberate disclosure of personally sensitive information on a small scale, such as an individual record or as a small dataset (less than 20 records).

### Potential Consequences

Risk to personal safety of individuals  
 Increased and ongoing risk of identity fraud for individuals  
 Impact on individuals livelihood, employment or reputation  
 Compromise of Council information  
 Exposure of special category data  
 Reputational damage  
 Significant monetary penalties  
 Investigation by ICO

### Implication

This risk implies that personal data on a small scale has been accidentally or deliberately disclosed by the authority or an external threat actor.

Examples may include but are not limited to: out of date information resulting in a disclosure, sending a letter or email to the wrong address, submitting information to a compromised website, responding to a phishing attack, careless sharing via email, failing to appropriately anonymise data, accidental uploading of data to the Council's website, loss of paper documents, access by an unauthorised third party, alteration of personal data without permission etc.

Please note, the overall likelihood of a small scale incident is far higher than any other type and there are many more ways such an incident could unintentionally be caused.

### Risk Owners

Martin Hamilton; Diana Litherland

### Risk Rating

High Red 9

### Last Review

23/02/2022

### Final Risk Rating

High Red 9

### Next Review

25/03/2022

### Target Risk Level

Medium Amber 3

### Treatment

Treat

### Path

Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

## Key Controls Identified

Access Control  
 Cloud Service Restrictions  
 GDPR E-Learning Module  
 Protective Marking  
 Website Publishing Protocol

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**Action Plans****Action Plan Description****Action Plan  
Type****Action Plan Owner****Due for  
Completion by****Comments**

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## Risk Data Protection - Failure to Meet Requirements of GDPR

Likelihood	H			G
	M			R
	L			
		L	M	H

Impact

### Impact Measures

### Risk Description

The EU General Data Protection Regulations (GDPR) came into force on May 25th 2018. It represented the single biggest change to data protection regulations since the inception of the original data protection act in 1984. The new regulations place much more responsibility on the Council as a data controller and also on staff as data processors. The regulations give significantly greater powers to the data subject and have much more rigorous entitlements in terms of how data is processed.

With such significant and sweeping changes, there is a risk that the Council may not be able to fully comply with the regulations.

### Potential Consequences

Potential monetary penalties from regulators  
 Reputational damage and adverse publicity  
 Increased risk of further litigation  
 Loss of personal data  
 Loss of public trust

### Implication

This risk implies that the Council has not met the requirements of the General Data Protection Regulation / Data Protection Act 2018 and that the Council can not demonstrait a viable plan to achieve GDPR compliance and is now in breach.

### Risk Owners

Martin Hamilton; Diana Litherland

### Risk Rating

High Red 9

### Last Review

23/02/2022

### Final Risk Rating

Medium Amber 6

### Next Review

24/05/2022

### Target Risk Level

### Treatment

Treat

### Path

Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

### Key Controls Identified

GDPR Guidance available on intranet

Information Asset Register

Information Governance Group

Mandatory GDPR Training for All Staff

Privacy Impact Assessments

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## Action Plans

	<b>Action Plan Description</b>	<b>Action Plan Type</b>	<b>Action Plan Owner</b>	<b>Due for Completion by</b>	<b>Comments</b>
Priority Action Plan	The Information Governance Officer, when in post, will be asked to create a priority action plan to address areas of non-compliance. The most critical components of this plan will be addressed within the first three months of it being signed off by the Information Governance Group	Ongoing	Diana Litherland	31/01/2022	<p>21.04.20 DE reported that Diana Litherland is now in post as the Information Governance Officer.</p> <p>It is likely that this plan will require input and co-operation from Service Areas. Support from EMT will be essential.</p> <p>09.11.21 Work continues to be ongoing, there is now a breach log in place and communications have taken place to ensure that all staff now what a data breach is and the timescales for reporting one.</p> <p>Privacy notices are in place and policies for the rights of data subjects.</p> <p>Cyber inputs have taken place along with member training.</p> <p>IAOs &amp; IAAs are identified and work is taking place to ensure that all assets are documented and data flows are mapped.</p> <p>A log has been created for ISAs and internal sharing agreements.</p> <p>DPIAs are now completed for all new or changed processing and kept by the DPO</p>

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**Risk** **Despite having procedures and rules, staff acting in error, do the wrong thing**

Likelihood	H			
	M			G
	L		R	
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** Despite having procedures and rules, staff acting in error, do the wrong thing (and some things go badly wrong)

**Potential Consequences** Loss of data. Mis-use of data. Breach of Data Protection. Litigation. Reputation damage. Financial Implications. Loss of Government Connects. Third Party Intervention. Public interest report. Use of Resources score affected.

**Implication**

**Risk Owners** Martin Hamilton; Diana Litherland

**Risk Rating** Medium Amber 6 **Last Review** 01/10/2021

**Final Risk Rating** Low Green 2 **Next Review** 30/03/2022

**Target Risk Level** **Treatment** Treat

**Path** Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

**Key Controls Identified**

- Inclusion in values statements / corporate objectives
- Link to performance evaluation formalised for relevant grades / staff / managers
- Clear accountability for information management in the organisation
- Security checks done automatically (IT, HR etc) to record who has access to which system
- Audit checks on inappropriate use of key systems, personnel security etc.
- Limited training for staff
- Staff surveys undertaken to identify the weaknesses in understanding information security
- Communication strategy devised and built in as part of Communications business continuity plan
- Essential training delivered to current staff
- Data protection training
- Information Asset training delivered to all staff

**Action Plans**

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
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**Risk      Email - Accidental Transmission of Sensitive Data by Email to Incorrect External Recipient**

Likelihood	H		G	
	M		R	
	L			
		L	M	H
	Impact			

**Impact Measures**

**Risk Description**

Email is commonly utilised for the transfer of data to and from external parties. On occasions, this data may contain sensitive information such as financial details, medical details, etc. that could cause significant harm to the data subjects if disclosed to the wrong person.

**Potential Consequences**

This risk relates to the transfer of sensitive data using email, where the selected recipient is not the correct person. This risk specifically relates to external senders as whilst it is possible for a similar event to occur internally, data within the Council's email system is still under the Council's control. Once the data is sent outside of the authority, that control no longer exists.

- Loss of personal data.
- Investigation by the Information Commissioners Office.
- Local or National media interest over a sustained period.
- Loss of public confidence in the Council's ability to handle sensitive information.
- Ongoing personal detriment to an individual or group of individuals.
- Reputational damage.
- Monetary fines in excess of £50,000 based on previous ICO rulings.
- Potential legal action by data subject.
- Breach of data protection principals.
- Breach of other legislative tools covering data protection and privacy.
- Compensation claims and fees resulting from legal action taken by individuals.

**Implication**

This risk implies that an employee or elected member has sent an email containing sensitive information either within the message body or as an attachment to an incorrect recipient.

This risk also implies that the Council's safeguards to protect such information, such as encryption and protective marking have been compromised or bypassed by the sender, accidentally or intentionally.

**Risk Owners**

Diana Litherland

**Risk Rating**

Medium Amber 8

**Last Review**

09/03/2022

**Final Risk Rating**

Medium Amber 5

**Next Review**

07/06/2022

**Target Risk Level**

**Treatment**

Tolerate

**Path**

Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

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**Key Controls Identified**

- A 'lessons learned' process for learning from mistakes identified in incident management process
  - A clear escalation and constructive owning-up policy
  - A culture of valuing information as an asset, evidenced through staff surveys
  - Clear accountability for information management in the organisation
  - Data protection training
  - Information Security policy in place
  - Encryption
  - Proactive Warning
  - Protective Marking in place
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**Action Plans**

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
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**Risk Failure to disclose critical information for case management/protection**

Likelihood	H			
	M			G
	L	R		
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** Failure to disclose critical information for case management/protection

**Potential Consequences** Loss of life. Injury to staff. Verbal / physical abuse. Stress to staff. Loss of data. Mis-use of data. Breach of Data Protection. Litigation. Reputation damage. Financial Implications. Loss of Government Connects. Third Party Intervention. Public interest report.

**Implication**

**Risk Owners** Nesta Barker; Joanne Halliday; Diana Litherland; Gillian Taylor

**Risk Rating** Medium Amber 6 **Last Review** 17/12/2021

**Final Risk Rating** Low Green 1 **Next Review** 30/03/2022

**Target Risk Level** **Treatment** Treat

**Path** Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

**Key Controls Identified**

Information sharing protocol in place

**Action Plans**

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
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## Risk Failure to utilise the value of the information asset

Likelihood	H	G	G
	M	G	G
	L	G	R
		L	M
	Impact		

**Impact Measures**

**Risk Description** Failure to utilise the value of the information asset

**Potential Consequences** A waste of public money. Loss of data. Mis-use of data. Breach of Data Protection. Litigation. Reputation damage. Financial Implications. Loss of Government Connects. Third Party Intervention. Public interest report.

**Implication**

**Risk Owners** Diana Litherland

**Risk Rating** Medium Amber 8

**Last Review** 01/10/2021

**Final Risk Rating** Low Green 2

**Next Review** 30/03/2022

**Target Risk Level**

**Treatment** Treat

**Path**

Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

### Key Controls Identified

- Compliance with the Re-use Regulations
- Log of requests for access to information made, and conclusions
- Named person championing the information re-use agenda for your department / organisation
- Well-used and well-populated e-information
- Strategy for using information for wider citizen engagement
- Appropriate use of Freedom Of Information Application Publication Scheme
- Appropriate use of the government's Information Asset Register
- Information sharing protocol in place

### Action Plans

Action Plan Description

Action Plan Type

Action Plan Owner

Due for Completion by

Comments

## Risk Information Management - Accidental Destruction or Loss of Information (Electronic)

Likelihood	H			
	M			G
	L		R	
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** Critical information is wrongly destroyed, not kept or can't be found when needed.

**Potential Consequences** Loss of data. Mis-use of data. Breach of Data Protection. Litigation. Reputation damage. Financial Implications. Loss of Government Connects. Third Party Intervention. Public interest report. Use of Resources score affected.

**Implication** This risk implies that electronically stored information has been accidentally destroyed or stored using a method which prevents its discovery.

There are a number of ways an event such as this could occur, such as an automated disposal process deleting information, a ransomware attack which prevents future access to corporate information, storage on local hard drives for laptop users, storage on removable media or simply scanning information as an image and not filing/naming this appropriately.

**Risk Owners** Diana Litherland

**Risk Rating** Medium Amber 6

**Last Review** 01/10/2021

**Final Risk Rating** Low Green 2

**Next Review** 30/03/2022

**Target Risk Level**

**Treatment** Treat

**Path**

Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

### Key Controls Identified

- Regular compliance audits
- Back-ups of key information and systems held in a secure, separate location
- Records management policies and records management infrastructure produced
- A well-used Electronic Document and Records Management System

### Action Plans

Action Plan Description

Action Plan Type

Action Plan Owner

Due for Completion by

Comments

**Risk Lack of basic records management disciplines**

Likelihood	H			
	M		R	G
	L			
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** Lack of basic records management disciplines

**Potential Consequences** Loss of data. Mis-use of data. Breach of Data Protection. Litigation. Reputation damage. Financial Implications. Loss of Government Connects. Third Party Intervention. Public interest report. Use of Resources score affected.

**Implication**

**Risk Owners** Diana Litherland

**Risk Rating** Medium Amber 6

**Last Review** 09/03/2022

**Final Risk Rating** Medium Amber 5

**Next Review** 07/06/2022

**Target Risk Level**

**Treatment** Treat

**Path**

Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

**Key Controls Identified**

- 'Exit routes' removed (e.g. ability to ignore rules and keep local files)
- Compliance with legislation and key standards
- Records management policies and records management infrastructure produced
- Clear records management policies and records management infrastructure in place

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## Action Plans

	<b>Action Plan Description</b>	<b>Action Plan Type</b>	<b>Action Plan Owner</b>	<b>Due for Completion by</b>	<b>Comments</b>
Review Documentation	Information asset owners continue proactively review their documentation to ensure compliance with their Retention and Disposal schedule.	Ongoing	Diana Litherland	31/01/2022	<p>27.04.20 RB commented - with a newly appointed DPO, due regard is required to the training needed for Information asset owners, so that they can understand their role and responsibilities. One of these being review their documentation to ensure compliance with their Retention and Disposal schedule.</p> <p>30/07/20 DL - Over the next 3 months various pieces of work will be taking place to mitigate this risk, an Information Governance/Data Protection health check questionnaire has been sent out to all heads of service and business managers for completion to assess the current position, this will be complemented by a Data Protection self assessment of the current compliance level, an IAO handbook will be produced to assist asset owners and training provided. The Information Governance Group is to be resurrected with support given to the IAOs and in turn they will be expected to give updates on the current position of their areas.</p> <p>04/09/20 DL - The IG/DP health check was sent out to all HoS and Business Managers at the end of July with a requested return of 07/08/20, returns have been slow with only 10 received to date, once all returns are received responses will be collated to try and gauge the IAO's levels of understanding. A request has been made to resurrect the IG group, this is waiting on suitable dates. The IAO handbook production is ongoing.</p> <p>11.11.20 - Rosie Bloor deleted as action plan owner</p> <p>23.12.20 - DL - The IG group has been reformed and an action plan has been created to support this.</p> <p>06.04.21 -DL - Work is ongoing with the IAOs to address this</p> <p>09.11.21 - Work remains ongoing, waiting for approval of the handbook</p>

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**Risk**      **Lack of comprehensive oversight and control**

Likelihood	H			
	M			R/G
	L			
		L	M	H
	Impact			

**Impact Measures**

**Risk Description**      Lack of comprehensive oversight and control (so anything can go wrong)

**Potential Consequences**      Loss of data. Mis-use of data. Breach of Data Protection. Litigation. Reputation damage. Financial Implications. Loss of Government Connects. Third Party Intervention. Public interest report.

**Implication**

**Risk Owners**      Dave Adams; Daniel Dickinson; Martin Hamilton; Diana Litherland; Sarah Wilkes

**Risk Rating**      Medium Amber 6      **Last Review**      09/03/2022

**Final Risk Rating**      Medium Amber 6      **Next Review**      07/06/2022

**Target Risk Level**      **Treatment**      Tolerate

**Path**      Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

**Key Controls Identified**

- Information Governance Group regularly review and update the control measures in place
- Strong links between the Information Governance Group and IT teams
- Strong, regular reports to the Audit & Standards Committee
- Resource appointed to complete managing information risk work
- A 'lessons learned' process for learning from mistakes identified in incident management process
- An information asset owner named for each information asset
- An Executive Director information risk owner identified

**Action Plans**

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
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## Risk Loss or theft of information

Likelihood	H			
	M			G
	L		R	
		L	M	H
	Impact			

**Impact Measures**

**Risk Description** Loss or theft of information

**Potential Consequences** External parties get your information illegally (and expose it, act maliciously or defraud you or your customers). Loss of data. Mis-use of data. Breach of Data Protection. Litigation. Reputation damage. Financial Implications. Loss of Government Connects. Third Party Intervention. Public interest report. Use of Resources score affected.

**Implication**

**Risk Owners** Diana Litherland

**Risk Rating** Medium Amber 6

**Last Review** 01/10/2021

**Final Risk Rating** Low Green 2

**Next Review** 30/03/2022

**Target Risk Level**

**Treatment** Treat

**Path**

Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

### Key Controls Identified

Meet IT security standards

Risks mapped, prioritised and action plans in place

Responsibility for monitoring and delivering solutions is clear, and sufficiently resourced

Security incidents reported to HMG's incident management schemes and, if necessary, to Cabinet Officer

Risk penetration testing of whole network by external experts undertaken regularly depending on level of security

Secure disposal / shredding

Back-ups of key information and systems held in a secure, separate location

Encryption of removable media & laptops undertaken through the council

### Action Plans

Action Plan Description

Action Plan Type

Action Plan Owner

Due for Completion by

Comments

**Risk**      **Web information is inaccurate and outdated**

Likelihood	H			G
	M	R		
	L	R	R	
		L	M	H
	Impact			

**Impact Measures**

**Risk Description**      Web information is inaccurate and outdated due to the relevance, currency and accuracy of information posted by individual departments

**Potential Consequences**      Potential negative impact on transactions. Information unavailable to residents which may impact on take-up of services. Information unavailable to employees, First point of contact for residents lost, Contact centre scripts based on CMS

**Implication**

**Risk Owners**      Andy Arnott; Janet Baddeley; Nesta Barker; Andrew Bird; Rosie Bloor; Georgina Evans; Joanne Halliday; Martin Hamilton; Jackie Johnston; Diana Litherland; Ian Slee; Simon Sowerby; Roger Tait; Gillian Taylor; Jeff Upton; Sarah Wilkes

**Risk Rating**      High Red 9      **Last Review**      17/03/2022

**Final Risk Rating**      Low Green 1      **Next Review**      30/03/2022

**Target Risk Level**      **Treatment**      Tolerate

**Path**      Managing Information Risk/Legal and Governance/Chief Executive's Office/Newcastle Under Lyme

**Key Controls Identified**

- Clear ownership as a business issue, not an IT issue
- Essential training delivered to current staff
- Support provided by the current software supplier
- Current employees are qualified in relevant fields
- Network of trained web authors across all services available to provide authentic, accurate & up-to-date information

**Action Plans**

Action Plan Description	Action Plan Type	Action Plan Owner	Due for Completion by	Comments
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