

Title of Report:	Business Continuity and Emergency Planning Audit
Committee Report Submitted To:	Audit Committee
Date of Meeting:	13th December, 2023
For Decision or For Information	For Information
To be discussed In Committee YES/NO	If YES, please identify which paragraph applies and insert below. By virtue of paragraph(s) 3 of Part 1 of Schedule 6 of the Local Government Act (Northern Ireland) 2014.

Linkage to Council Strategy (2021-25)	
Strategic Theme	Improvement and Innovation
Outcome	Satisfactory Assurance
Lead Officer	Audit Risk & Governance Manager

Budgetary Considerations	
Cost of Proposal	n/a
Included in Current Year Estimates	YES/NO
Capital/Revenue	Revenue
Code	n/a
Staffing Costs	In-house staffing costs

Legal Considerations	
Input of Legal Services Required	YES/NO
Legal Opinion Obtained	YES/NO

Screening Requirements	Required for new or revised Policies, Plans, Strategies or Service Delivery Proposals.		
Section 75 Screening	Screening Completed:	Yes/No	Date: n/a
	EQIA Required and Completed:	Yes/No	Date: n/a
Rural Needs Assessment (RNA)	Screening Completed	Yes/No	Date: n/a
	RNA Required and Completed:	Yes/No	Date: n/a
Data Protection Impact Assessment (DPIA)	Screening Completed:	Yes/No	Date: n/a
	DPIA Required and Completed:	Yes/No	Date: n/a

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Not For Publication

Executive Summary

The internal audit on the Business Continuity Plan and Emergency Plan was completed in accordance with the Council's approved annual Internal Audit Plan for the financial year 2023/24. This report summarises the findings arising from the review of the Council's management of Business Continuity and Emergency Planning procedures.

A number of areas where controls could be enhanced have been highlighted in this report. The following table summarises the total number of recommendations with all recommendations being accepted by management:

Risk	Number of recommendations & Priority rating		
	1	2	3
The Council may have inadequate Business Continuity and Emergency Plans (and associated Service Unit business continuity plans), leading to inadequate planning and a negative impact on Council's ability to respond effectively to adverse incidents	-	1	-
There may be an inadequate governance structure in place within the Council in relation to business continuity and emergency management leading to an uncoordinated approach to the implementation of the Business Continuity and Emergency Planning	-	-	1
The Council and Council staff may not be aware of their roles and responsibilities in the event of an emergency or business interruption resulting in the Council being ill prepared for internal and external incidents and to a longer period of disruption to Council staff and services	-	1	-
Testing of the Business Continuity and Emergency Plans may not be carried out on a regular basis and lessons learned from tests may not be implemented, leading to inadequate preparation for implementation of the Plans and potential failure to respond as a result of vulnerabilities in the Plans	-	2	2
Total recommendations made	-	4	3

Based on audit testing the following overall level of assurance is provided:

Satisfactory Assurance

Overall, there is a satisfactory system of governance, risk management and control. While there may be some residual risk identified this should not significantly impact on the achievement of system objectives.

The weaknesses identified during the audit have been brought to the attention of Management. The weaknesses outlined have come to the auditor's attention during normal audit work and are not necessarily all the weaknesses, which may exist.

The content of this report has been discussed with the Chief Officer responsible for this area of work to confirm factual accuracy. The assistance and cooperation received during the audit is gratefully acknowledged.

1.0 Purpose of Report

The main objective of the audit was to review the key systems and controls in relation to the Councils Business Continuity Planning and Emergency Planning.

This report has been prepared for the Members of Causeway Coast and Glens Borough Council and should not be disclosed to any third party, quoted or referred to without prior written consent of the author.

2.0 Background

The Council has a responsibility to provide a level of service to the public even when an event occurs that may potentially disrupt its ability to maintain services.

The Corporate Business Continuity Plan deals with the internal consequences of events that affect a significant part of Causeway Coast and Glens Borough Council. Less serious disruptions are dealt with by the activation of Service Business Continuity Plans.

The Council's Emergency Plan deals with external consequences / Civil Emergencies and provides a framework to enable decisions to be made and an appropriate response provided with a minimum delay, regardless of the type of emergency occurring within the Borough. However, in the event of an emergency, which affects the wider community, and the Council, a number of plans may be activated.

This audit will review Council processes and procedures in place to consider both Business Continuity and Emergency Planning within Council.

3.0 Risks

The risks identified relating to the audit of Business Continuity and Emergency Planning and agreed with management are as follows:

1. The Council may have inadequate Business Continuity and Emergency Plans (and associated Service Unit business continuity plans), leading to inadequate planning and a negative impact on Council's ability to respond effectively to adverse incidents.
2. There may be an inadequate governance structure in place within the Council in relation to business continuity and emergency management leading to an uncoordinated approach to the implementation of the Business Continuity and Emergency Planning.
3. The Council and Council staff may not be aware of their roles and responsibilities in the event of an emergency or business interruption resulting in the Council being ill prepared for internal and external incidents and to a longer period of disruption to Council staff and services.
4. Testing of the Business Continuity and Emergency Plans may not be carried out on a regular basis and lessons learned from tests may not be implemented, leading to inadequate preparation for implementation of the Plans and potential failure to respond as a result of vulnerabilities in the Plans.

4.0 Audit Approach

Our audit fieldwork comprised:

- Documenting the systems via discussions with key staff

- Consideration of the key risks within each audit area
- Examining relevant documentation
- Carrying out a preliminary evaluation of the arrangements and controls in operation generally within the Council
- Testing the key arrangements and controls
- Testing the completeness and accuracy of records.

The table below shows the staff consulted with and we would like to thank them for their assistance and co-operation throughout the audit.

Job title
Director of Environmental Services
Head of Health and Built Environment
Senior Environmental Health Officer

5.0 Findings and Recommendations

This section of the report sets out the findings in relation to control issues identified in the management of Business Continuity and Emergency Planning processes.

5.1 Embedding Business Continuity and Emergency Planning

Issue 1 - Embedding Business Continuity and Emergency Planning

a) Observation-

The Council is fulfilling its primary responsibilities as described in the Civil Contingencies Act. Responsibility for Emergency Planning and Business Continuity sit under the Head of Health and Built Environment supported by the Environmental Health Manager (Licensing & Enforcement) and Senior Environmental Health Officer, while the Environmental Health Officer responsible for Business Continuity and Emergency Planning is on secondment.

Council has in place an Emergency Plan, and this has recently been reviewed to reflect changes in membership of Council's Emergency Management Team and incident notification report form.

Council officers have put in place a Business Continuity Management policy and a variety of service business continuity and emergency planning documents in draft.

Audit noted that the most recent version of Service/Department Business Continuity Plans has not been fully rolled out across Council, with the new format of the business continuity plan being incomplete for a number of service areas.

The Business Continuity Management policy notes 'Business Continuity training for relevant staff is essential for effective resumption and recovery of operations. CCGBC is required to provide the necessary education, training and experience to ensure the staff listed in Appendix 1 have the necessary competence to carry out their roles and responsibilities.

CCGBC will evaluate the effectiveness of training on an annual basis and retain appropriate documented information as evidence of competence'. At the time of audit fieldwork training in support of the new Business Continuity Plans has not been delivered to the relevant officers.

<p>b) Implication- There is a risk that staff are unaware of their role and the importance of Business Continuity. This could result in plans being implemented ineffectively in the event of a real-life emergency.</p>
<p>c) Priority Rating- 2</p>
<p>d) Recommendation- Responsible officers should roll out the new Business Continuity Plan templates for each Service area. Ensuring that the new and updated version of the business continuity plan are completed for each service area. Updated business continuity plans should not contain personal contact details but instead include all official landline and mobile phone numbers for the accountable officers.</p> <p>Service business continuity plans should be complete and link to the service risk register and all identified risks should be carefully considered, and actions put in place to mitigate against the risk. Service business continuity plans should make reference to the most recent policies (Agile working policy) and include all areas of responsibility within the service area.</p> <p>Council should consider the training and skills mix to ensure that all those who need training and education for Emergency Planning and Business Continuity receive training on a regular basis. This is of the utmost importance for those involved to any extent who take it in turn to provide rota cover to deal with the Councils out of hours emergency phone.</p> <p>Business Continuity and Emergency Planning training should not be a one-off event; there will be a need to remind staff of their role and ensure that new staff and those transferred or promoted are fully informed. Formal training events can be supplemented by on-the-job training, handbooks, checklists and action cards.</p>
<p>e) Management Response- Emergency Planning Training programme for 2023-24 in place and implementation is ongoing.</p> <p>Business Continuity programme of training to be developed by February 2024 via EPIG.</p> <p>Business Continuity training of key staff is underway.</p>
<p>Responsible Officer & Implementation Date- Head of Health & Built Environment June 2024</p>

5.2 Service/Department Business Continuity Plan Testing

Issue 2 – Service/Department Business Continuity Plan Testing

<p>a) Observation- As noted in the 2016/2017 internal audit report into Business Continuity Planning and Emergency Planning there has been limited testing how the Council and/or</p>
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<p>service area would react to an incident that would cause disruption to services (such as denial of Council locations or loss of critical IT services).</p>
<p>b) Implication- In the absence of service business continuity plan testing, there is a risk that the out workings of the various service level continuity plans may not operate as intended in the event of enactment if they have not been previously tested.</p>
<p>c) Priority Rating- 2</p>
<p>d) Recommendation- All service areas should ensure that there is both a desktop exercise and live exercise to ensure that their service area business continuity plan are tested and is operating as anticipated.</p> <p>Business continuity plans should be tested periodically. This should include:</p> <ul style="list-style-type: none"> a) Recovery of critical applications systems at alternate site(s) b) Compatibility of IT and workspace facilities (e.g., printers, telecommunications) c) Notification of updates to procedures and lines of communication d) Recovery of critical business processes. <p>All tests should be documented and discussed with SMT to ensure that all issues are resolved. All tests should include ICT and officers from the relevant section this is vital to ensure the smooth operation should an incident arise.</p> <p>It is the responsibility of the Head of Health & Built Environment to co-ordinate and ensure these have been completed and are kept up to date.</p>
<p>e) Management Response-</p> <p>As per Corporate Business Continuity Plan June 2023 plans are to be tested at least annually by one of the following methods:</p> <ul style="list-style-type: none"> 1. Carrying out a simple desktop review. 2. Workshop - Setting up a controlled situation to develop awareness about a subject through discussion that does not jeopardise business as usual. 3. Full exercise involving building exclusion zone. <p>Lack of staff resource has prevented the test plan being progressed since June 2023.</p>
<p>Responsible Officer & Implementation Date- Head of Health & Built Environment As soon as staff resources allow. No later than June 2024.</p>

5.3 Reporting - Emergency Notification Form

Issue 3 – Emergency Notification Form

a) Observation-

As per the Corporate Business Continuity Plan an Emergency Notification Form should be completed recording the details of the incident for the Borough. Internal audit received a sample of notification form for Council over the previous 12-month period. It was noted that on some occasions the notification form are not completed by the holder of the emergency Council contact phone. From the

<p>sample of notification forms received from the Head of Health & Built Environment the forms received where not the same.</p> <p>The forms received contained details of the time and location of the incident and the identity of the caller notifying the Council, however the form contained no details of the Council employee receiving the call, as actioned by a signature and date.</p>
<p>b) Implication- Where issues are reported in an inconsistent manner there is a risk that all the details of the incident are not recorded. This could prove detrimental to the quality of business continuity and emergency planning procedures going forward.</p>
<p>c) Priority Rating- 3</p>
<p>d) Recommendation- Audit recommends that the Emergency Notification Form is updated, and one template is used exclusively by the Council for recording all the relevant details.</p>
<p>e) Management Response- Completed The Incident Notification form has been updated with a section for signature of the on-call officer and date. New form rolled out as part of Emergency On Call Training with relevant staff on 23rd November 2023. On call staff also reminded of the need to submit incident notifications forms during said training.</p>
<p>Responsible Officer & Implementation Date- N/A</p>

5.4 More frequent scenario testing of the Emergency Plan

Issue 4 - More frequent scenario testing of the Emergency Plan
<p>a) Observation- In July 2022, a desktop emergency scenario exercise was undertaken to test run the Council's Emergency Plan. The scenario was that a Ferry containing passengers had caught fire off the coast of Ballycastle. Officers in attendance at the training found it a worthwhile exercise increasing their awareness of what to do in such a scenario. From discussions with staff, it was determined that no external parties to Council attended the desktop exercise facilitated by Council officers.</p> <p>Live exercises for the Emergency Plan are very time consuming, can be costly, and would involve cooperation of Police Service of Northern Ireland (PSNI), Fire Service etc. Council is not a category 1 responder and has no obligation under Civil Contingencies legislation for Council to arrange a live exercise. Council can however participate in any live exercises organised by other category 1 responders and any joint testing set up with regional emergency planning groups.</p>
<p>b) Implication- In the absence of testing of the emergency plan there is a risk that in the event of an emergency Councils reaction may not be of a sufficient standard which could pose a reputational or financial risk for Council.</p>
<p>c) Priority Rating- 2</p>

<p>d) Recommendation- It is recommended that Council run more frequent small, scenario type exercises to test bits of the plan and to test their procedures. Creation of a test and exercise schedule is important to periodically test arrangements are effective including for the lower-level plans Council hold. Exercises can range from informal brainstorming sessions through seminar and tabletop exercises to full scale live exercises of a response. Near-misses, small events and emergency incidents can also test the validity of the plan, if steps are taken to learn lessons and consider whether the plan either would have met or did meet real needs.</p> <p>An important part of testing is debriefing, and review of lessons learned if the Emergency Plan has been activated at any point. Council should ensure that such debriefings are conducted and reported on to analyse whether the plan was fully effective.</p>
<p>e) Management Response- Emergency Plan test was scheduled for quarter 3 of 2023/24. Due to lack of resource from Emergency Planning Officer being on secondment this has been rescheduled to Quarter 4 2023/24.</p>
<p>Responsible Officer & Implementation Date- Head of Health and Built Environment Quarter 4 2023/24</p>

5.5 Emergency Management Room Resources

Issue 5 - Emergency Management Room Resources
<p>a) Observation- The 2016/17 Business Continuity and Emergency Planning internal audit recommended that: <i>The locations of emergency control rooms should be reviewed to determine those that are most appropriate for Council in its new structure. All rooms designated as possible emergency control rooms should be tested to ensure that they will operate as intended in the event of an emergency (eg ICT, access).</i></p> <p>Management Response to the recommendation concluded that: <i>The location of Emergency Planning Control Rooms will be reviewed on agreement of the organisation's estate strategy. The control room within Cloonavin will remain the Director of Performance office. An audit of that office's capability will be conducted to ensure it is fit for purpose by October 2016. The capability will be replicated in the other designated Emergency Planning Rooms as agreed by SMT. A proposal will be put forward by the Head of Health & Built Environment to SMT by October 2016. (Head of Health & Built Environment (31st December 2016))</i></p> <p>In a follow up audit in 2018 the management response to the recommendation noted: <i>We were advised that a multi-agency Emergency Control room has been identified as part of sub regional Multi agency emergency planning. This is located within the Cloonavin Civic headquarters (Large Committee Room). A funding request has been submitted to the Office of First and Deputy First Minister for resources to fully</i></p>

equip this room. The location of a back-up control room is under consideration; it may be in Riada House.

In discussions with Council staff, it was determined that the control room within Cloonavin is the Director of Corporate Services room. Appendix 8 within the current Business continuity Plan BCP notes emergency management room to be set up as per a standard boardroom layout. Folders and stationery to be distributed from the Emergency Planning Box within the Emergency Management Room.

b) Implication-

There is a risk that the Council may not have the necessary room resources set up in the case of an emergency.

c) Priority Rating-

2

d) Recommendation-

The original internal audit recommendation remains appropriate being:
The locations of emergency control rooms should be reviewed to determine those that are most appropriate for Council in its new structure. All rooms designated as possible emergency control rooms should be tested to ensure that they will operate as intended in the event of an emergency (e.g., ICT, access).

All assets, people, skills, technology, premises and supplies and information that the Council has to have available to use, when needed, in order to operate and meets its objective should be identified and available. Consideration should be given to identifying more than one room in the event of an emergency.

e) Management Response-

Organisations are only required to designate one Emergency Co-ordination Centre (ECC).

A review of the locations of the Emergency Co-ordination Centre (ECC) and Emergency Management Room (EMR) was carried out since the original audit.

The location of the ECC and EMR is reviewed each time the Emergency Plan or Corporate BCP is reviewed. The Northern Emergency Planning Group (NEPG) co-ordinate an annual audit of the ECC which includes the location, facilities, technology etc available and this information is held regionally.

ECC is large Committee Room in Cloonavin and Emergency management Room (EMR) is the office of the Director of Corporate Services. As per the Emergency Plan and Corporate Business Continuity Plan a back-up EMR is located in the Ballymoney office.

Other Council buildings can be stood up in the event of loss of these 2 locations and given agile working capabilities and access to electronic versions of relevant documents, although not ideal, an EMR could also be conducted virtually or on a hybrid basis if required.

Responsible Officer & Implementation Date-

N/A

Completed

5.6 Third Party Assurance for Business Continuity Arrangements

Issue 6 – Third Party Assurances for Business Continuity Arrangements

a) Observation-

As part of the audit, business continuity planning arrangements for Finance, Payroll and ICT were considered.

It is noted that there are currently no arrangements in place for the Council to receive assurances from the Councils third parties on the adequacy of the Business Continuity and Emergency planning arrangements operating within their respective organisation, which may have an impact on the delivery of the finance system to Council.

b) Implication-

There is a risk to business continuity where third parties who provide business criteria services to Council have to adequately manage business continuity and emergency planning for their organisations.

c) Priority Rating-

3

d) Recommendation-

Due to the outsourcing of the Finance system Councils business continuity and emergency planning arrangements are applicable to third parties. Therefore, audit recommends that arrangements are put in place to ensure that Council receives assurances from third parties were appropriate on the adequacy of the Business Continuity and Emergency Planning arrangements operating that may impact on the business of the Council. One relevant third-party being Technology One with regards to the cloud-based backup for Councils finance system.

Business continuity risks of partner organisations, which may impact on Councils ability to deliver its strategic objectives are identified and included on the relevant risk register.

e) Management Response-

Agreed.

Services provided by third parties to be identified. Arrangements to be put in place to provide Council with assurances on the business continuity arrangements for critical services provided by external third parties.

Responsible Officer & Implementation Date-

Head of Health and Built Environment and relevant Heads of Service
Completion by June 2024

5.7 Independent verification of Business Continuity Planning

Issue 7 – Independent verification of Business Continuity Planning

a) Observation-

There has been no independent verification of the Councils Business Continuity Planning or individual Service Continuity Plan's in place. Best practice would suggest these should be independently verified on a periodic basis.

b) Implication-

There is a risk that Councils Business Continuity Arrangements do not meet the necessary standards as determined by best practice and legislative requirements.
c) Priority Rating- 3
d) Recommendation- Audit recommends that Council Business Continuity arrangements and plans are independently reviewed and verified on a periodic basis to ensure that they are fit for purpose.
e) Management Response- Agreed, subject to adequate staff and financial resources being made available.
Responsible Officer & Implementation Date- Head of Health & Built Environment June 2023

Conclusion

The internal control environment, no matter how well designed and operated, can provide only reasonable and not absolute assurance regarding achievement of an organisation's objectives. The likelihood of achievement is affected by limitations inherent in all internal control systems. These include but are not limited to the possibility of poor judgement in decision – making, human error, control processes being deliberately circumvented by employees and others, management overriding of controls and unforeseen circumstances arising.

The risk associated with the management of the Business Continuity Plan and Emergency Plan is considered to be High. It is important that clear and concise procedures are in place and made available to all staff to ensure a consistent approach is adopted in the event of an emergency.

As a result of the audit, senior management have been reminded of their obligations in relation to Business Continuity and Emergency Planning to ensure that the Council have adequate arrangements in place. Internal Audit has made 7 recommendations, 4 medium rating and 3 low priority rating. The recommendations have been accepted by management and procedures put in place to address the findings of this report.

Appendix I: Definition of Assurance Ratings and Hierarchy of Findings

Satisfactory Assurance

Evaluation opinion: Overall there is a satisfactory system of governance, risk management and control. While there may be some residual risk identified this should not significantly impact on the achievement of system objectives.

Limited Assurance

Evaluation opinion: There are significant weaknesses within the governance, risk management and control framework which, if not addressed, could lead to the system objectives not being achieved.

Unacceptable Assurance

Evaluation opinion: The system of governance, risk management and control has failed or there is a real and substantial risk that the system will fail to meet its objectives.

Hierarchy of Findings

This audit report records only the main findings. As a guide to management and to reflect current thinking on risk management we have categorised our recommendations according to the perceived level of risk. The categories are as follows:

Priority 1: Failure to implement the recommendation is likely to result in a major failure of a key organisational objective, significant damage to the reputation of the organisation or the misuse of public funds.

Priority 2: Failure to implement the recommendation could result in the failure of an important organisational objective or could have some impact on a key organisational objective.

Priority 3: Failure to implement the recommendation could lead to an increased risk exposure.

Appendix II: Limitations and responsibilities

Limitations inherent to the internal auditor's work

We have undertaken this review subject to the limitations outlined below:

Internal control

Internal control systems, no matter how well designed and operated, are affected by inherent limitations. These include the possibility of poor judgement in decision-making, human error, control processes being deliberately circumvented by employees and others, management overriding controls and the occurrence of unforeseeable circumstances.

Future Periods

Our assessment of controls is for the period specified only. Historic evaluation of effectiveness is not relevant to future periods due to the risk that:

- The design of controls may become inadequate; or
- The degree of compliance with policies and procedures may deteriorate.

Responsibilities of management and internal auditors

It is management's responsibility to develop and maintain sound systems of risk management, internal control, and governance and for the prevention and detection of irregularities and fraud. Internal audit work should not be seen as a substitute for management's responsibilities for the design and operation of these systems.

We endeavour to plan our work so that we have a reasonable expectation of detecting significant control weaknesses and, if detected, we carry out additional work directed towards identification of consequent fraud or other irregularities. However, internal audit procedures alone, even when carried out with due professional care, do not guarantee that fraud will be detected.

Accordingly, our examinations as internal auditors should not be relied upon solely to disclose fraud, defalcations or other irregularities which may exist.

Appendix III: Summary of Key Controls Reviewed

Risk	Control issues
<p>The Council may have inadequate Business Continuity and Emergency Plans (and associated Service Unit business continuity plans), leading to inadequate planning and a negative impact on Council's ability to respond effectively to adverse incidents</p>	<ul style="list-style-type: none"> • The Council has a corporate Business Continuity Plan • The Council has an Emergency Plan • Service Unit business continuity plans are in place. • The Plans have been developed based on an assessment of business impact in the event of an emergency or business interruption. • Critical functions and services have been identified within the Business Continuity Plan and Service Unit business continuity plans. • The Business Continuity and Emergency Plans reflect current assessed risks.
<p>There may be an inadequate governance structure in place within the Council in relation to business continuity and emergency management leading to an uncoordinated approach to the implementation of the Business Continuity and Emergency Plans</p>	<ul style="list-style-type: none"> • The Business Continuity and Emergency Plans have been approved by Council. • Revisions to the Plans are controlled. • Activation of each Plan is clearly described. • Activation of any Service Unit business continuity plans are clearly outlined. • There are clear protocols for working with other agencies and Councils in the event that the Business Continuity Plan or Emergency Plan is activated. • Accountability for implementing and overseeing the Business Continuity Plans and Emergency Plans is clearly defined.
<p>The Council and Council staff may not be aware of their roles and responsibilities in the event of an emergency or business interruption resulting in the Council being ill prepared for internal and external incidents and to a longer period of disruption to Council staff and services</p>	<ul style="list-style-type: none"> • Staff roles and responsibilities are clearly defined in the Business Continuity and Emergency Plans and in Service Unit business continuity plans. • Roles are clearly defined for the different phases of the Plan (Alert and activation, Response, Stand down, Recovery) • The Business Continuity and Emergency Plans have been communicated to staff and elected members. • Staff and elected members have received training in emergency management. • Service Unit business continuity plans have been communicated to staff within the relevant departments.
<p>Testing of the Business Continuity and Emergency Plans may not be carried out on a regular basis and lessons learned from tests may not be implemented, leading to inadequate preparation for implementation of the Plans and potential failure to respond as a result of vulnerabilities in the Plans</p>	<ul style="list-style-type: none"> • A schedule of emergency management tests has been devised. • A schedule of business continuity tests has been devised. • Emergency plan tests involve relevant parties in the plan. • Tests are carried out on a regular basis. • Lessons learned are documented following each test. • Lessons learned are discussed and the relevant plan(s) updated accordingly. • Action plans are developed to address any other issues or lessons learned arising from tests.

Appendix IV: Points for the consideration of management

Issue 1 – Emergency Planning Implementation Group
<p>Observation – In discussions with staff, it was determined that the Councils Emergency Planning Implementation Group (EPIG) meets on a quarterly basis. Audit noted that the terms of reference for the EPIG have not been updated for some time. Council should review the terms of reference for the EPIG group to ensure that they are updated in reflect the responsibilities and accountability arrangements for the Council.</p>
<p>Management Response- EPIG Terms of Reference to be reviewed to reflect the responsibilities and accountability arrangements for the Council.</p>
Issue 2 – Staff Portal
<p>Observation- Councils' emergency portals should be contained on the staff portal for easy access for all Council staff information.</p>
<p>Management Response- Consideration to be given to including suitable information to include on the staff portal.</p>