Yes

No



December 2025

Audit Findings & Management Action Plan - June 2025

Information Security Policy

Finding 1 **Action** A full suite of information governance policies is not in place 1. A full suite of Information Governance policies will be created and approved in Using the list of expected policies set out by the Information Commissioner Office, we established accordance with council requirements that: 2. The policies will contain document control information and details of the next 4 of the 8 expected policies are not in place review date. • the remaining 4 policies are overdue for a review and do not contain document control information 3. Officers will be required to attest their understanding of these policies on a • It was not clear who approved 3 of the policies. regular basis. This could be done using the Metacompliance system, which would ensure that evidence is maintained that staff have read and understood the policies. Name of policy Adopted Up-to-date Approved by and in place and reviewed appropriate within agreed **Senior Officer** / Members timescale **Data Protection Policy** No Information Risk Policy No No **Data Protection Impact Assessment Policy Data Sharing Policy** No Information Governance Framework Yes No No **SWAP Reference** AP#6662 **Priority Records Management Policy** Yes No No Access to Information Policy Yes No No **Responsible Officer** Head of Service - Digital & Data

Yes

Timescale



Finding 2. Retention policy and schedule are overdue for a review As part of the Sharepoint roll out the following actions will be completed:

Whilst the council has a Data Retention Policy it has not been regularly reviewed. The last full update was in July 2016, and the last amendment was in June 2021.

There is a Data Protection Guidance Manual which refers to data retention, however, this has also not been recently reviewed (last reviewed 2018).

The current retention policy does not:

- outline corporate, service and individual responsibilities
- arrangements for record classification, storage, security transmission and disposal
- state how changes, deletions and additions to the retention schedule are reviewed and authorised

Whilst the Retention Policy and Schedule are easily accessible on the intranet, there is no evidence that staff have recently been reminded of their obligations.

The current Retention Schedule is based on the guide provided by the Records Management Society of Great Britain. It is not an overarching schedule which incorporates all information assets across the council including those on the retention schedules held by individual services.

We were informed by the Executive Office Manager that no reviews are currently undertaken to ensure that information is held in accordance with the Data Retention Policy and Schedule. The Manager's role is more of an advisory one rather than monitoring compliance with the policy. There is an expectation that services regularly review their own retention schedules.

1. The current Retention Policy will be reviewed and updated and approved in accordance with council requirements.

- 2. The Retention Schedule will incorporate all information assets held within the council including those on retention schedules held by individual services.
- 3. Until the control framework is put in place and fully embedded, officers will be assigned to monitor individual services and their compliance with the Data Retention Policy and schedule.
- 4. The Metacompliance system will be used to periodically remind staff of their obligations with regards data retention etc.

Priority	1	SWAP Reference	AP#6664	
Responsible Officer		Head of Service – Digital & Data		
Timescale		December 2025		

Finding 3.

Information Asset Register is overdue for a review and update

We found that the Information Asset Register has not been reviewed for some time and is out-of-date. The document control section on the current register has not been completed.

The current register, which records 19 information assets includes:

- 7 assets listed under the Housing Development Service which is no longer in existence
- 12 assets for which the named owner no longer works for the Council.
- 3 assets for which the details of the appropriate safeguarding/security controls are not recorded.

Action

A review of the information asset register will be undertaken to ensure:

- that it covers all the information assets that the organisation currently holds
- the details recorded for each information asset (including asset owners and safeguarding/security controls) are up to date

The final Information Asset Register should be approved in line with Council arrangements.

Priority 1 SWAP Reference AP#6743



We could find no evidence that the current Information Asset Register has been approved by Senior Management or Members.

Responsible Officer	Executive Office Manager		
Timescale	December 2025		

Finding 4.	Action		
Record of Processing Activity (ROPA) The General Data Protection Regulations (GDPR) requires the Council to maintain a Record of Processing Activities (ROPA) which contains information on all data processing activities under its responsibility. Maintaining an up-to-date ROPA is a means of ensuring GDPR compliance and give assurance that data controllers only process the personal data they need to. We were unable to find evidence that the Council has an up-to-date formal, documented, comprehensive and accurate ROPA which includes (as a minimum): • the organisation's name and contact details, whether it is a controller or a processor (and where applicable, the joint controller, their representative and the DPO) • the purposes of the processing	The Council will produce an up-to-date Fincludes the required information.	Record of Processing Ac	tivity (ROPA) which
 a description of the categories of individuals and of personal data the categories of recipients of personal data details of transfers to third countries, including a record of the transfer mechanism safeguards in place retention schedules where possible, the envisaged time limits for erasure of the different categories of data and 	Priority 1	SWAP Reference	AP#6999
 a description of the technical and organisational security measures in place. 	Responsible Officer	Executive Office Manager	
	Timescale	September 2025	



Finding 5.

Roles and responsibilities in relation to information governance are not clearly communicated

We found that roles and responsibilities in relation to information governance are not clearly defined and there are interim arrangements in place.

In terms of policy and guidance (including the data retention processes), roles and responsibilities are not clearly set out in either the Information Governance Framework or within individual policies.

Action

Once the Head of Service – Digital and Data has undertaken Data Protection training, the Information Governance Framework and relevant policies and guidance will be updated to clearly set out roles and responsibilities. These will be communicated to managers and officers.

Priority	2	SWAP Reference AP#6667		
Responsible Officer		Executive Office Manager & Head of Service – Digital & Data.		
Timescale		September 2025		

Finding 6.

Privacy notices are out-of-date, and some do not state retention periods

We found that for 10 of the 56 privacy notices on the council's data protection website page, the actual retention period is not stated. Instead, they refer to the Corporate Retention Schedule which has not been reviewed for some time.

Two privacy notices relate to services/functions which have not been in place for some time: Exeter Community Wellbeing and Test & Trace support payments. The privacy notices do not appear to be regularly reviewed.

Whilst the council has a template and guidance for its privacy notices, the contact details refer to the Executive Support Unit which is no longer in existence.

Action

- 1. Privacy notices will be reviewed and updated to ensure that they:
- cover all relevant service areas and their records
- contain details of the actual retention period
- contain the correct contact details
- 2. Templates and guidance will be updated to ensure that they refer to the correct contact details.

Priority	2	SWAP Reference AP#6726		
Responsible Officer		Executive Office Manager & Head of Service – Digital & Data.		
Timescale		September 2025		



Finding 7. **Action** Storage & accessibility of digital records The Compliance & Security Manager - Strata, advised that there is a separate project to migrate most of the files to Share Point and whilst doing this, classification and retention The results of the Information Governance survey (full details of which have been provided will be set on all information in the drives and an improved structure will be set for separately) highlighted that services use a variety of systems/locations to store electronic Teams/Chat/One drive. documents, which may make it more difficult for the council to: - manage the disposal of its digital records after the expiration of the relevant retention This project will be monitored through to completion to ensure that records are appropriately classified, and the correct retention periods are set. Thereafter, periodic period - respond to subject access and freedom of information requests reviews will be undertaken to ensure that the classification and retention for records is still valid. We also found a relatively high rate of officers using their individual drives (7 services) and mailboxes (10 services). This can create issues with accessing information when the individual officer is unavailable. Some Heads of Service stated that they have low confidence that their services store digital records within certain structures in line with the council's document retention requirements, e.g.: Individual officer drives – 3 services **Priority SWAP Reference** AP#7001 Individual officer Outlook mailbox - 3 services **Responsible Officer** Head of Service - Digital & Data Corporate drives/folders – 2 services Microsoft TEAMS – 2 services **Timescale** December 2025

Finding 8.	Action			
Storage & accessibility of paper records	1. Services should be reminded that they should avoid duplicating records and par copies should be disposed where there is no legal requirement to retain them.			•
We identified from the survey responses that: Of the 11 services which confirmed that they hold physical records, three stated that up to 39% of their physical records are duplicated in a digital format while there is no legal	2. A review should be undertaken of all physical records held by services to check that they are stored in line with document retention requirements.			
requirement to do so.	Priority	3	SWAP Reference	AP#7008
Seven services only had low or partial confidence that their service's physical records are stored in line with the council's document retention requirements.	Responsible Officer Executive Office Manager & H Service – Digital & Data.		•	
	Timescale		September 2025	



Finding 9.	Action			
Refresher training in data retention	Refresher training in data security will be included as part of the GDPR e-Learning training.			
Whilst staff receive comprehensive data security training during their induction, they do not receive periodic refresher training.				
Additional training in more specialised areas (e.g. data retention) is only provided on request.	Priority	3	SWAP Reference	AP#6672
	Responsible Officer		Executive Office Manager	
	Timescale		December 2025	