

TELFORD & WREKIN COUNCIL

AUDIT COMMITTEE 15 SEPTEMBER 2015

REVIEW OF STRATEGIC RISK REGISTER – JULY 2015

REPORT OF THE MANAGING DIRECTOR – LEAD OFFICER FOR GOVERNANCE

PART A) – SUMMARY REPORT

1. SUMMARY OF MAIN PROPOSALS

- 1.1. For the Audit Committee to note the latest Strategic Risk Register. The strategic risk register enables the Council to meet its statutory requirements under the Accounts and Audit Regulations 2015 Part 2 paragraph 3. *“A relevant authority must ensure that it has a sound system of internal control which – (c) includes effective arrangements for the management of risk”.*
- 1.2. The strategic risk register is a means for the Council to identify and manage the substantive issues which could impact negatively on delivery of the Council's priorities. As part of the Council's governance arrangements the risk register is presented twice a year to Cabinet to demonstrate that the Council understands its key risks and how they are being mitigated. Appendix A sets out the key risks which have been identified for 2015/16 and the mitigating actions in place to manage these risks. The register is reviewed and updated as necessary on a regular basis to ensure appropriate management of these risks and mitigations and to make sure they are always current.
- 1.3. The Register was last presented to Cabinet in July 2015 and periodically reviewed by Cabinet moving forward.

2. RECOMMENDATIONS

- 2.1. That the Audit Committee note the strategic risks in Appendix A.

3. SUMMARY IMPACT ASSESSMENT

COMMUNITY IMPACT	Do these proposals contribute to specific Co-operative Council priority objective(s)?	
	Yes	<i>All Priorities</i>
	Will the proposals impact on specific groups of people?	
	Yes	<i>The Council's priorities impact across all communities</i>
TARGET COMPLETION/DELIVERY DATE	<i>This is part of the on-going monitoring of delivery of the Council's priorities.</i>	
FINANCIAL/VALUE FOR MONEY IMPACT	Yes	Strategic risks are considered as part of the budget setting process and the effective management of risks helps to maximise the financial resources available to deliver services to the community.

		<i>BM 07.09.2015</i>
LEGAL ISSUES	Yes	<p>The Council has statutory responsibilities to undertake functions which are, in many cases, subject to Regulations and central government guidance. As mentioned in the report, the attached risk register is a strategic one and therefore will not provide all of the details for each statutory responsibility (although some are referred to in the appendix attached to this report). However, the strategic risk register must continue to comply both with the Council's statutory duties and generally for instances where the Council has a duty of care to the public and its employees. Accordingly, this should be a consideration if/when any changes to the register are made.</p> <p>Reference to how the register attached to this report assists the council in meeting its responsibilities contained in The Accounts and Audit Regulations 2015/234 is set out in paragraph 1.1 of this report.</p> <p><i>KF 07.09.2015</i></p>
OTHER IMPACTS, RISKS & OPPORTUNITIES	Yes	The report identifies key risks to the delivery of the Council's priorities
IMPACT ON SPECIFIC WARDS	No	Borough-wide impact

PART B) – ADDITIONAL INFORMATION

4. PREVIOUS MINUTES

4.1. N/A

5. BACKGROUND PAPERS

5.1. "Driving the Delivery of the Council's priorities" – presented to Cabinet on 23rd July 2015

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Appendix A

Strategic Risk Register Updated July 2015

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
1.	Death or serious harm of a vulnerable child or vulnerable adult (Breach of duty of care)	<ul style="list-style-type: none"> Safeguarding Children and Adult Boards (SABs became a statutory requirement of the Care Act from April 2015), Community Safety Partnership and Youth Offending Service Board scrutinise performance, call partners to account and drive practice improvement in the light of learning (e.g. from Serious Case, Safeguarding Adult & Domestic Homicide Reviews) Created draw down budgets of £0.75m for children and £2.5m for adults for 2015-16 Work to national inspection standards (Ofsted and Care Quality Commission) and respond to actions required from inspections <p>Children:</p> <ul style="list-style-type: none"> Workforce development strategy – recruitment and retention, learning and development including Systemic Practice across the council's children's workforce Children's Services - Systematic quality assurance role for all managers from frontline team manager through to MD and DCS No staff savings target for Children's Social Workers <p>Adults:</p> <ul style="list-style-type: none"> Review of Safeguarding Adult Board arrangements took place prior to April 2015 to ensure compliance with Care Act requirements and new Adult Safeguarding Guidance & Regulations. As a result a new T&W specific Board has been put in place with an Independent Chair Adult Safeguarding – following review, new multi-agency strategy agreed, regional procedures are now operational and additional adult safeguarding capacity put in place within Council. 	LJ/PT

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
		<ul style="list-style-type: none"> Regional Quality Surveillance Group chaired by Chief Officer of NHS England Area Team ensures co-ordination of quality & safeguarding issues across health & social care. 	
2.	Not managing the impact of organisational and culture change in the Council and partner organisations within the constraints of the public sector economy	<ul style="list-style-type: none"> Engagement and communication with all staff through structured sessions and interactive sessions with Cabinet to support Co-operative working Regular meetings with Trade Union representatives Loss of service delivery performance and risk exposure monitored through SMT New Organisational Development Strategy (see 8 below) Constitution – assurance by AD's, Finance, Legal, Internal Audit and external reviews (i.e. External audit and government bodies) Transparency Codes of conduct Maintaining communication channels with appropriate senior executives LSP Executive Health & Wellbeing Board and Community Safety Partnership Commissioning and Transformation Partnerships 	RP
3.	Failure to match available resources (both financial , people and assets) with statutory obligations, agreed priorities and service standards	<ul style="list-style-type: none"> Rigorous service and financial planning and regular monitoring and active management through S&FPG, SMT and Policy Review Group. Savings programme, service reviews and restructuring In-year savings exercise as necessary Rationalisation of Council assets and accommodation Delivery of capital receipts/rigorous monitoring of capital receipts realisation and impact on the budget 	RP
4.	Failure to deliver financial strategy: <ul style="list-style-type: none"> capital receipts delivery of Council 	<ul style="list-style-type: none"> If necessary contingency plans reviewing phasing of planned capital expenditure, schemes included in capital programme, alternative potential disposals and further revenue budget cuts would be prepared 	RP

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
	savings	<ul style="list-style-type: none"> • Review of reserves and balances against risk exposure and available contingency • Review of financial policies • Safeguarding Cost Improvement Plan • Adult Social Care Cost Improvement Plan • Commercial Strategy • “Culture Change” to budget management by managers • Specialist legal advice as required • Cabinet Members regularly briefed 	
5.	Failure to manage the impact of poverty and deprivation on future wellbeing of our residents	<ul style="list-style-type: none"> • Council has adopted a “Business Supporting, Business Winning” approach that will provide a joined up, business facing service that provides the conditions to enable businesses to start up, expand and to attract new investors. • Working through/with the LEP to drive economic growth • Community Loans • Telford Crisis Network/Food Bank • “Pride in your community” Project • Target Intervention Area programme • Public Health Grant to drive improvements in health of population/address health inequalities (Public Health outcomes) • Health & Wellbeing Board and Commissioning & Transformation Partnerships 	RP
6.	Major emergency affecting the community and/or ability to provide priority services	<ul style="list-style-type: none"> • Maintaining appropriate, risk based contingency plans (Civil Resilience Team) which are exercised and reviewed on regular basis • Individual Service Delivery Managers are responsible for maintaining and exercising their Business Continuity Plan. These plans would be coordinated corporately and the emergency plan activated if necessary. 	PT

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
		<ul style="list-style-type: none"> • Maintain appropriate levels of trained staff to be able to respond to an emergency. • Work collaboratively with other LRF partner agencies, maintaining effective working relationships with the relevant bodies • Gorge - Additional funding with conditions received from DCLG which has enabled further stabilisation work in Jackfield which is on target for completion. Need to acquire further funding for other at risk areas within the Gorge. • Operation 'Tangent' – multi agency plan to respond to landslide in the Gorge is in place and is reviewed and exercised regularly 	
7.	Significant business interruption affecting ability to provide priority services	<ul style="list-style-type: none"> • ICT controls – Disaster Recovery facilities in place based on revised Priority Services in line with Business Continuity Plans. • New programme of actions/interventions in place to secure a stable infrastructure, to include the secondment of the ICT Group Manager of the Infrastructure Team to lead this programme for the next 12 months to ensure successful and speedy delivery. (Separate Project Plan available.) • Substantial investment made to upgrade the council's voice and data network which was 10 years old. Will be completed by Dec 2015. • Investment secured into Office 365 a cloud solution to Microsoft Office ensuring email is provided for 99.9% of the time, commencing Sept 2015 and completed Sept 2016 • Investment in ICT infrastructure within the server room to provide enhanced business continuity, further improvements are being made to the Councils main Data Centre (Ab Dab) to include enhanced proactive monitoring of all systems, air conditioning, electrical etc. • ICT Business Strategy prioritises the increase of cloud provided services over the next 2 years reducing the risk of downtime experienced within the Council owned Data Centres (Ab Dab). 	AA

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
		<ul style="list-style-type: none"> Improvement to Service Areas' Business Continuity Plans to reflect risk and appropriate mitigation. 	
8.	Key skills shortages (retention & recruitment)	<ul style="list-style-type: none"> Organisational Development Plan e.g.: <ul style="list-style-type: none"> - skills gap analysis and needs - flexible working policy - staff benefit scheme Council values, ethos, rewards and recognition 	RP
9.	Failure to manage the health & safety risks in delivering the council's functions.	<ul style="list-style-type: none"> Reviewing, writing and monitoring of health and safety policies through SMT and Health and Safety Committee Risk based health and safety audit process of service areas and local authority managed schools, which not only audit implementation of health and safety policies but also proactively identifies short comings, actions and controls that need to be in place to manage those risks. Significant findings of the audits are reported back through SMT and Health and Safety Committee. Internal Health and Safety work to Health and Safety Executive (HSE) guidance and revise Policies and Procedures to ensure compliance with legal standards. Revisions reported back through SMT and Health and Safety Committee There is a system in place for reporting all accidents, incidents and near misses. Non reportable accidents investigated by service area All reportable accidents are investigated by Internal Health and Safety Team and significant findings reported to Health and Safety Committee. Other findings reported back to relevant Service area management Training provided on Health and Safety through a mixture of OLLIE and face to face. Regular meetings with Trade Unions 	PT

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
		<ul style="list-style-type: none"> • Coordination and management of Personal Safety Precautions Risk Register to ensure safety of employees. 	
10.	Information Governance	<ul style="list-style-type: none"> • The Council has an Information Governance Framework which includes the Corporate Information Security Policy (CISP) and other policies (Data protection, Information Sharing policies) • Small dedicated team promoting sound Information Governance within the Council and ensuring that good practise is shared across the Council • Training and awareness programme put in place annually and Information Governance module on OLLIE forms part of induction • Established procedures for investigating and recording data breaches including identifying and communicating lessons learnt • Information Governance compliance programme includes tasks to check on Council compliance with local and legal requirements • Secure Communication System in place • Compliance with Public Service Network (PSN) requirements • Governance includes regular review by Internal Audit and reporting to Audit Committee twice a year to provide assurance on Information Governance • ICT Security Group in place which considers Information Governance matters of new developments/issues arising 	RP

Existing Strategic Risks Being Managed Through Appropriate Significant Projects

- Single Status
- Better Care Fund and Care Act, Social Care Change Board
- Commercial project(s) for additional income generation
- Housing Investment Programme

