PAPER J

Purpose: For Decision



Committee report

AUDIT COMMITTEE

29 JULY 2019

Title THE COUNCIL'S RISK PROFILE

Report of ASSISTANT CHIEF EXECUTIVE & CHIEF STRATEGY OFFICER

EXECUTIVE SUMMARY

1. The purpose of this report is to give the committee an opportunity to review the current position with regard to the council's strategic risks. The committee's terms of reference include the provision for consideration of "the effectiveness of the council's risk management arrangements".

BACKGROUND

- 2. This is the second update of the Strategic Risk Register within the 2019-20 reporting period. The risks were included within the Isle of Wight Council's revised Corporate Plan that was approved by Full Council in July 2019 or have been added by the Corporate Management Team.
- 3. Strategic risks are also referred to within the Quarterly Performance Management Reports (QPMR) that are presented to Cabinet. The Quarter 4 QPMR was reviewed by Cabinet on 13 June 2019.

RISK CHANGES

- 4. Two additional strategic risks have been added since May's Audit Committee meeting. These risks have been raised based on Internal Audit report that raised serious concerns in each of these areas. The new risks are:-
 - (a) insufficient regulatory compliance for buildings under the council's ownership;
 - (b) non-compliance with General Data Protection Regulations (GDPR).
- 5. The mitigation for these new risks is based on the action plans (including target dates and responsible officers) recommended by the Audits.
- 6. Audit Committee requested that updates regarding these two risks be presented to them in September 2019 (for the GDPR risk) and December 2019 (for the regulatory compliance risk). This report will give an idea of progress in the interim.

7. Corporate Management Team (CMT) have made no changes to any of the risk scores between the last report to Audit Committee (20 May 2019) and this current report. The register was considered by CMT on 16 July 2019.

Reporting methods

- 8. Updates are requested from all mitigation owners at the beginning of each month. These updates are then added to the risk register and included in this report.
- 9. All risk scoring is decided by Corporate Management Team which reviews the Strategic Risk Register each month
- 10. Risk owners have been requested to provide timescales for the mitigating actions associated with each risk where it is possible and appropriate to do so.
- 11. In order to see which information has been updates since the previous report in May 2019 any additional comments are shown in *italics*. Where mitigation has not been updated the date of the last update is shown.

Strategic risks

12. Each strategic risk and its mitigation are detailed below:

Lack of financial ability to deliver the budget strategy		council's in-year Director of Finance and Section 151 Officer			
Inherent score	Target score	Current score	Previous sc	ores	
			May 19	Apr 19	Mar 19
16 RED	5 GREEN	3 GREEN	3 GREEN	3 GREEN	6 GREEN
Mitigation					
Close monitoring of revenue spend	Budget positions are reported quarterly to service management, CMT and Cabinet. At the end of Quarter 4 the draft outturn indicated a saving against budget of £0.445million. Further update will be provided in line with end of quarter reporting one of finance to Cabinet (September 2019)				
Close monitoring of income realisation against target	Income realisation end of Quarter 4, th Further update win finance to Cabinet	ne draft outturn indi Il be provided in i	cated an overa	chievement of	£247,000.
Close monitoring of achievement of savings plans	Achievement of s quarterly. At the e £1,.133million howe to result in a total	nd of Quarter 4, in ever alternative sav	t is forecast th vings have bee	nat we will und n identified wh	derachieve by ich is forecast

	above.
	<i>Further update will be provided in line with end of quarter reporting one of finance to Cabinet (September 2019)</i>
Close monitoring of capital spend	Budget positions are reported quarterly to service management, CMT and Cabinet. At the end of Quarter 4, the draft outturn for the capital programme indicated expenditure of £62.2million against a budget of £89.7 million and slippage of £27.5 million where spend will now take place in the next financial year.
	Further update will be provided in line with end of quarter reporting one of finance to Cabinet (September 2019)

Lack of financial ability to delive medium-term finan	r the council's	-	ed to: or of finance and section 151 officer			
Inherent score	Target score	Current score	Previous scores			
			May 19	Apr 19	Mar 19	
16 RED	9 AMBER	13 RED	13 RED	13 RED	10 AMBER	

Updated medium term financial strategy (MTFS)	The MTFS is reviewed regularly by Financial Management as part of the budget setting process. A full revision of the budget and future forecast and resulting savings requirements is presented to Full Council each February.
2019/20 budget setting process	The budget for 2019/20 was agreed by Full Council in February 2019. The budget includes the identification of £5.5million of savings, the delivery of which will be monitored throughout the year. A capital programme of £206.5million was also agreed and will be subject to regular monitoring throughout the year.
2020/21 budget setting process	Will commence in the 2019/20 financial year.

Insufficient staff skills	ing capacity and	Assigned to: Director of Corporate Services				
Inherent score	Target score	Current score	Previous sc	evious scores		
			May 19	Apr 19	Mar 19	
16 RED	8 AMBER	8 AMBER	8 AMBER	8 AMBER	8 AMBER	
Mitigation						
Delivery o recruitment and retention strategy	1 0	ey focus being giver	n to securing:			

Regular monitoring,	 more timely recruitment through increased efficiency in recruitment processes. securing the right people, in the right place, at the right time. This has now been divided into 3 projects: <i>Recruitment processes and systems-new recruitment policy has been published and work being done with the transactional team to refresh the managers guidance. There has been a meeting with Absoft and awaiting indicative costs and timescales. Then looking at manager stakeholder involvement. Unfortunately, Absoft (SAP Consultancy company) are unable to assist so other options are now being discussed and considered.</i> <i>Our employment offer-scoping brand and webpages on the intranet; working with NHS partner re potential of sharing of benefits. Looking at Hay model of reward and liaising with council's active travel team. An Adult social care careers page is now up and running and our recruitment policy has been updated.</i> <i>Workforce planning-this is lower priority than other two. Will include talent management and succession planning. Intend to have toolkits in place by quarter 4 2019/20.</i> Organisational Health indicators are reviewed by Cabinet every six months. The last update having been provided to their meeting in June 2019. Overall
analysis and review of organisational health indicators	 there continues to be a downward trend in the number of days absence lost due to sickness although an emerging trend indicates that staff appear to be off work due to sickness less frequently than before but when off work due to illness that they are off for longer. This will be reviewed and monitored over the next reporting period to establish what, if any, remedial action can be initiated to address this emerging trend. This will continue to be reviewed. Attendance and wellbeing performance measures continue to be monitored by service departments and oversight is maintained by the human resource service. Improvements continue to be seen by way of reductions in absence and the number of occurrences of absence although natural seasonal peaks and troughs continue to be apparent, and which will continue to show certain departments such as adult social care and children's services as having higher levels of sickness due to the number of staff working directly with the public and measures taken to prevent vulnerable people from becoming unwell. A mental health first aiders networking group is in place who monitor and share information about key mental health issues and who provide assistance in the promotion of wellbeing. Additional training is to be trialled for a small number of key individuals to develop further knowledge and skills to assist managers and staff in prevention strategies and guidance necessary when poor or declining mental health symptoms are becoming apparent.
Workforce planning	 A revised performance review process, designed in conjunction with managers has now been formally launched for 2019/20 period, supported by training for managers and underpinned by a range of guidance toolkits for both managers and staff. Short pulse surveys will be undertaken throughout the year in order to measure the success or otherwise of the new approach. The first mini survey has been undertaken with staff which shows a pleasing initial improvement by an upward trend from a baseline of 49.4% to 64.4%In the number of staff who report that they feel their personal performance review is a valuable opportunity to set objectives for the year.

A change in organisat		Assigned to:			
to keep a pace wit organisational char impacting on the required transformati corporate plan	nge, negatively delivery of the	Director of Corporate Services			
Inherent score	Target score	Current score	Previous scor	es	
			May 19	Apr 19	Mar 19
16 RED	6 GREEN	8 AMBER	8 AMBER	8 AMBER	8 AMBER
Mitigation Leadership and management development	 programmes ar 2018/19. Key for working. In ac engagement for assist with proference encourage cree management ch A calendar of developed. This with shaping wor The Leadership discuss and communication. The Growing L level and the n with the wider m People Perform 	leadership and management learning and development are being refreshed for 2019/20 based on successes from focuses will be on commercialisation, digitalisation and agile addition there have been identified communication and porums established for differing groups of managers that will ofessional development, talent management as well as to eative and innovative thinking in responding to counci- challenges.			
Workforce development programmes/initiativ es	 refreshed for 20 be on commerce A project has commanded and a project has commented and a projec	019/20 based or ialisation, digita commenced look System (LMS) le and content of	elopment core successes from lisation and agile king at the procu which will en of learning and	n 2018/19. Key e working <i>irement of a n</i> able ease o	v focuses will ew Learning f identifying
Delivery of the council's BIG Action Plan		g period, the fo nal leadership and be engaged i that help ever help of the co k tank scheme fo	ocus has been nd management n the developm yone to grow a uncil's two grac or staff to submit	given the re- forums in whic ent of new init and improve. Juate trainees, t their ideas for	ch managers iatives, tools The first of , will be the

• The council's two graduates, appointed in November 2018, have been working on the development of a staff ideas scheme in support of the BIG action plan. Their newly designed approach was launched at the Managers Conference on June 28. They are due to commence their next placements on digitalisation and will become involved in the development of a number of projects that aim to improve accessibility to council services, including the re-design of the council's website.
• There is continued roll out of the replacement IT equipment programme in which staff are being enabled to have the right tools for the job and which enables them to work more efficiently and from any location. Over 900 new laptops have now been deployed across the workforce to date.

Failure to improve edu	Assigned to:				
(This risk will be reviewed following the release of 2018/19 academic year results during the summer)		Director of C	hildren's Ser	vices	
Inherent score	Target score	Current	Previous s	cores	
		score	May 19	Apr 19	Mar 19
16 RED	6 GREEN	10 AMBER	10 AMBER	10 AMBER	11 RED
Mitigation					
Delivering Educational Excellence – ensuring that all schools are good or better	 Annual reviews of every school with termly challenge visit and bespoke improvement support Annual discussions with academies. Supporting governing bodies to improve. Training opportunities that raise awareness and improve safeguarding practices. Identifying a 'targeted offer' and 'establishing 'good practice reviews'. Implementing a high quality and cohesive professional offer. Investing in recruitment and retention strategies. Developing an 'affordable schools' strategy. Prepare schools for new Ofsted framework being implemented in September 2019. Of the 17 Ofsted inspections (including both full and monitoring inspections) on IW schools in the 2018/19 academic year every one stated that the schools were improving. 				
Delivering Educational Excellence – building on the improvements in standards	 Use the Leadership the improvement of a Provide guidance ar and statutory assess Key Stage 2 results especially in Mathen teaching. This will b improvements are e expectations (ARE) IN reading and writing 	standards in Island ad support on K sment arrangen s for 2018/19 h matics as a res be followed up embedded. 74 in Maths which	and communit fey Stage 1 an nents. have shown c sult of a targe over the next was an 8% in	y schools. Ind Key Stage 2 Ind	e standards provement n in Maths r to ensure ge related 2017/18

	narrowed the gap between IW achievement and the national average.
Delivering Educational Excellence – ensuring schools are good for all children	 Use the LLP annual visit to evaluate the performance of vulnerable groups of children and the provision for them. Further develop schools' leadership of teaching and learning: getting it right for all pupils including the more vulnerable. Build upon joint training with Her Majesty's Inspectorate and other leading experts on inclusion matters for secondary schools. Provide ongoing support and challenge in relation to exclusions and attendance. Work with local stakeholders to develop a better transition between schools and employment. Develop support to parents of home educated children. 76% of IW schools are currently rated good or outstanding and signs from inspections undertaken in 2018/19 is that this will improve
Delivering Educational Excellence – leading a cohesive system for children based on effective partnership working	 Work in partnership with the two dioceses who provide many of the Island's schools. Liaise with education partners including teaching schools, trusts and others to focus their potential for impact. Work with south coast universities to promote excellence, aspiration and opportunities for routes into higher level education. Support and challenge for all schools that become academies. Improving community perceptions of education on the Island. Enhance careers advice and guidance and engagement with industry and commerce.

Failure to identify and effectively manage situations where vulnerable children are		Assigned to	:			
subject to abuse		Director of (f Children's Services			
Inherent score	Target score	Current	Previous scores			
	_	score	May 19	Apr 19	Mar 19	
16 RED	5 GREEN	8 AMBER	8 AMBER	8 AMBER	8 AMBER	

Corporate	Parenting	The Ofsted inspection report published on 7 January 2019 highlights that:
Board	Farenting	
		"Corporate parenting is much stronger across the council since the last inspection. The Corporate Parenting Board receives regular, comprehensive performance data and reports, enabling effective scrutiny and challenge. The Corporate Parenting Board maintains a strong focus on achieving positive outcomes for children in care and care leavers. A high number of young people are supported to attend university and the council actively promotes apprenticeships, particularly for those with care experience. 'Hearing young people's experience' (HYPE), Isle of Wight's children in care council, is an active and influential part of the Corporate Parenting Board." <i>Corporate Parenting Board meetings take place quarterly</i>

Multi energy	Obildrende seriel some is neinen set to sele tenden for a Detherson to
Multi-agency integrated	Children's social care is going out to sole tender for a Pathways to Independent Adulthood supported accommodation provision. This is one of
commissioning board	four recommendations for improvement from the 2018 Ofsted inspection.
	The risk that has now emerged is that this offer may not align with current
	provision funded by Housing or provision that will result from the re commissioning of provision by Housing in 2020. <i>The tender is now out to</i>
	advert with plan to let contracts from September 2019. This has been raised
	at the Housing Vulnerable People Programme Group which will now provide
	the oversight of all commissioning, activity and housing provision across the council.
Quarterly	Performance reports are viewed regularly by the Policy and Scrutiny
performance reports to Scrutiny	Committee for Children's Services. A report was provided to elected members at committee on 23 May 2019 which involved constructive
Committee	challenge by elected members. Committee were also presented with a
	comprehensive insight into the quality assurance framework that underpins
	the performance reports. Members were reassured of the robust
	arrangements that were in place.
Regular scrutiny of	
social work caseloads	"The vast majority of practitioners say that their caseloads are manageable. Inspectors found that a small number of caseloads were too high. The local
	authority has secured further financial investment to reduce caseloads
	further."
	Caseloads are scrutinised by senior management on a weekly basis and the
	transformation programme which started in February 2019 will secure
	further improvements in caseloads.
Quality assurance	Audits began in April 2018 and are continuing. They include practice
framework (monthly	observations, auditing of supervision files and quarterly 'windows into
case audits concentrating on	practice' weeks. Quarterly reports are provided to senior managers which identify key themes and these become a focus for workforce development.
quality of practice)	
	Monthly meetings now take place to review audits and actions and quality
Annual self-	of practice. An Ofsted inspection of children's social care services took place in
evaluation and annual	November 2018, with the report published in January 2019.
conversation between Director and Ofsted	https://files.api.ofsted.gov.uk/v1/file/50048228
	Judgement highlighted below:
	The impact of leaders on social work practice with children and Good
	families
	The experiences and progress of children who need help and Good protection
	The experiences and progress of children in care and care leavers Good
	Overall effectiveness Good
	An annual self evaluation was produced for the annual conversation with Ofsted in April 2019. This highlights strengths and areas for development, which Ofsted will use as basis for potential inspections.

Failure to recruit acceptable quality of professional practice across Adult		Assigned to:			
professional practice Social Care (ASC)	Director of Adult Social Care				
Inherent score	Target score	Current	Previous sco	ores	
	J	score	May 19	Apr19	Mar 19
14 RED	6 GREEN	10 AMBER	10 AMBER	10AMBER	10 AMBER
Mitigation					
ASC Programme Board	All ASC projects are reviewed monthly by the ASC Programme Board with any exceptions being escalated to the ASC Transformation Board. Programme board highlight report reflects the corporate standard. <i>Highlights and key issues from the ASC Programme are included in a</i> <i>council wide summary report of all programme activity that is presented on a</i> <i>bi-monthly basis to the Strategic Programme Board (whose membership is</i> <i>the same as the Corporate Management Team) and a member review</i> <i>board chaired by the leader.</i>				
ASC restructure to support person centred care	A review is under within ASC to be co	ompleted Autum	n 2019 .		
ASC recruitment and retention	Vacancy monitoring within ASC now forms part of the monthly ASC Service Board Performance Report. The temporary ASC recruitment co-ordinator appointed now supports with vacancy management, recruitment advertising, interviews & pre-employment checks, this has resulted in an overall reduction of number of vacancies, improved retention and time to hire of candidates. A rolling advertisement campaign has overall proved successful				
ASC Learning and Development (L&D) Plan				ly include the being given to fied nationally gain their SW m September Adelaide and	
Mobile working pilot	Laptops have been deployed to the Review / Long Term Conditions teams and the feedback from staff has been very positive. Due to the extensive handovers from ICT, no additional training has been required at this time due to staff being able to complete their work in the same was as they do in the office. Learning & Development have re-circulated the online training available for programmes such as OneNote and staff have been sharing their tips and tricks for the new equipment. The roll out of new equipment to the remainder of ASC has been captured in both the County Hall Moves project and the Windows 10 Laptop Deployment project. The remaining staff based at Enterprise House are due				

	to receive their new kit by 5 July 2019. ASC teams not based at Enterprise House (i.e Hospital Social Work Team) will receive their new kit prior to December 2019.
New person-centred, strengths-based assessment forms	The strengths-based approach forms have been revisited, training sessions are planned for end of April 2019 with go-live planned for end of August 2019.
LAST UPDATE MAY 2019	

Failure to identify	Assigned to:				
manage situations water adults are subject to a		Director of Adult Social Care			
Inherent score	Target score	Current	Previous sco	ores	
	-	score	Apr 19	Mar 19	Feb 19
16 RED	6 GREEN	9 AMBER	9 AMBER	9 AMBER	9 AMBER
Mitigation					
ASC Programme Board	All ASC projects a any exceptions b Programme board I Highlights and key wide summary rep monthly basis to th same as the Corp chaired by the lead	being escalate highlight report i issues from the port of all progr be Strategic Pro porate Managen	d to the AS reflects the corp ASC Program ramme activity gramme Board	SC Transform porate standar me are include that is prese (whose mem	ation Board. d. ed in a council nted on a bi- bership is the
'Deprivation of Liberty Safeguards' (DoLS) backlog clearance programme Last update APR	In November 2017, ASC identified some 750 outstanding DoLS referrals awaiting assessment, of which 120 were classified as high priority. Funding was identified to commission an external agency to complete outstanding assessments. Current levels are at 271 with only 8 priority one, assessments for these are being undertaken. Authorisation of outstanding assessments is being maintained; additional trained staff have been identified and are now on the				
2019	rota to support full for assessments. undertaken to supp	time assessors Analysis of the	to manage the renewals of ex	e current and f	uture demand nents is being
Mental Health Action Plan Last update APR 2019	An action plan has mental health soc heavily engaged in group manager in	ial work praction its developme place and busi	ce – the Ment nt and this is ness case is b	tal Health Tea on target. Pe peing develope	am has been ermanent new ed to increase
Safeguarding Action	the size of the te dedicated expertise Completed and sig (MSP) audit there	<u>e in S117 is in pl</u> gned off. Follo	ace and suppo owing the Mak	rting policy is i king Safeguar	n final draft. ding Personal
Last update APR 2019	Review of the p practitioners in plac	ractice guidan			0 0

Learning Disability (LD) Homes Service improvement plans	There are policies and procedures in all of the homes for people with a learning disability, for whistleblowing, safeguarding and ongoing training and awareness for staff. The service and group manager carry out planned audits and unannounced visits on a regular basis. <i>Senior management in addition also carry out unannounced visits</i> . Additional safeguarding training sessions <i>were carried out are currently being arranged for all support staff</i> in May and June. Lessons learnt from safeguarding incidents are shared at the monthly registered managers meetings.
Centralisation of outreach teams	The Manager has applied to CQC to become the single registered manager for the combined service, the application has been acknowledged and put through to the second stage (interview) although no date has yet been set. This will formally bring the regulated activity under one single manager. An action/improvement plan is in place for the service. The CQC application to register one service at Sandown Barracks has been submitted and we await an outcome. The date requested for a centralised move is week commencing the 22 July. The IT Department have been consulted in relation to IT and telephone requirements. The two separate teams that are changing their normal place of work have been consulted. CM2000 - There is now a project board in place to govern the delivery of the CM2000 rostering system which should be live in July 2019. The Response Coordination Team have undertaken their system training and the service is due to train all front-line staff in the use of the system and the hand-held devices.

Failure to secure the the integration of adul	Assigned to	D:			
Ū	Director of	Adult Social C	Care		
Inherent score Target score		Current	Previous s	scores	
		score	May 19	Apr 19	Mar 19
16 RED	6 GREEN	12 RED	12 RED	12 RED	12 RED

ASC Programme Board	All ASC projects are reviewed monthly by the ASC Programme Board with any exceptions being escalated to the ASC Transformation Board. Programme board highlight report reflects the corporate standard.
	Highlights and key issues from the ASC Programme are included in a council wide summary report of all programme activity that is presented on a bi-monthly basis to the Strategic Programme Board (whose membership is the same as CMT) and a Member review board chaired by the Leader.
Transformation programme	Work on the following programmes/operations will be based on the
and operational integration	pathway and financial model produced by consultants Carnall Farrar:
	LD integration.
Last update FEB 2019	Mental health integration.

	 Rehab/reablement and recovery. Integrated Locality Services – Community Services. Continuing health care. Integrated quality function. Hospital flow/discharge.
Responsiveness to hospital escalations	Senior ASC staff are on call seven days a week in order to direct resources to those people deemed medically fit for discharge and the
-	responsibility of ASC. In addition, the Single Point of Commissioning
Last update FEB 2019	(SPOC) Team continues to identify all providers willing and able to respond to requests at weekends to assess people deemed as requiring either residential care or domiciliary support. Delayed transfers of care (DTOC) meeting chaired by the Director of Adult Social Services occurs every Friday, which provides the single and agreed DTOC count.

The council fails to achieve the required outcomes from its significant contractual relationships and fails to successfully resolve some anomalies in the contracts' interpretation (in relation to the 25-year highways PFI contract)				ds	
Inherent score Target		Current	Previous sc	ores	
	score	score	May 19	Apr 19	Mar 19
16 RED	5 GREEN	9 AMBER	9 AMBER	9 AMBER	9 AMBER

Waste management contract monitoring arrangements	The mechanical treatment plant has been run for a 30-day continuous test as part of the commissioning activities to test the ability to extract materials from the recycling and the residual waste streams. This test has shown that the plant needs some adjustment to maximise efficacy and recyclate extraction to accord with the council's expectations and Ameys obligations under our contract. A further 30-day test will be run once the plant outputs have been rebalanced, <i>In July the parties have agreed an updated testing protocol for the acceptance procedure with increased output and monitoring requirements.</i>
	Work on the energy from waste plants is progressing and working toward the revised autumn completion date. The council is aware that the plant supplier has some financial risks, which Amey are working proactively to resolve.
PFI – Establish and deliver available savings	Savings will result from changes to the contract specification and to the standard of service being delivered. The level of reduction in service standards will be a balance between the need to achieve the required savings and maintaining an acceptable standard of service delivery. These changes also need to be accepted by the lenders who provide the required up-front capital investment.
	A savings programme has been established and agreed with Island Roads (IR) and reports made to a dedicated savings board. The programme aims to deliver savings in three phases which will be

delivered as follows:-
 Phase 1: commenced in April 2019. £608,000 per annum net savings delivered although some provisions for CCTV and Street Cleansing have been brought back in after further consideration of stakeholder views Phase 2: £900,000 per annum savings to be identified by 30 September 2019 with \$450,00 being implemented by 1 October 2019 and the remaining £450,000 by 1 April 2020
Phase 3: £500,000 further per annum net savings to be identified by 31 December 2019

Brexit - Uncertainty during transition period, followed by potential legislative,					
funding and policy changes after the UK leaves the EU may adversely affect the council and its ability to provide services.		Chief Executive			
Inherent score Target		Current	Previous so	cores	
	score	score	Mar 19	Feb 19	Dec 18
16 RED	6 GREEN	14 RED	14 RED	14 RED	14 RED

Working group of senior officers in place to define IWC strategy for Brexit	Given the current uncertainty regarding the national position the Brexit group is now meeting monthly to focus on the medium to long term impacts
Oversight of any potential legislation changes in respect of right to live and work and freedom of movement that may affect our workforce	A key link officer has been appointed to monitor the potential impact on the Isle of Wight workforce.
Membership of professional and local government bodies aids horizon scanning	Staff are encouraged to use their formal and informal external networking groups to share information on the potential impact of Brexit.
Management of change approach to mitigate against significant impact to the organisation and its staff (programme governance framework)	Refreshed project and programme governance approach has been agreed by CMT and overall programme summary reports are being presented to a strategic programme board and a member review board. Refreshed guidance will highlight the need for change control within projects.
	A revised Programme Management Framework has been drafted by Organisational Intelligence. The aim of this policy is to establish boundaries between Programmes that need to deliver outcomes and benefits and Projects that need to deliver outputs and capabilities. Programme Health checks will take place throughout June and July 2019 and will inform the revised training offer for programme managers.
Detailed project plans to manage implementation of changes	All projects will be managed in accordance with the project and programme management framework. The Organisational Intelligence Team will provide assurance to CMT that this is happening via summary reports to CMT compiled in partnership

	with directorate representatives. The first series of health checks for strategic projects has commenced and will take place throughout June and July 2019 and will inform the revised training offer for project managers.
Understanding and acting on intelligence from the Local Government Association (LGA), the Chartered Institute for Public Finance Accountants (CIPFA) and other local government sources	These channels will continue to be monitored in the period running up to and after Brexit.
Oversight of general changes in legislation or governance arrangements that may affect the council	Anticipated changes in legislation and governance will be monitored through membership of Lawyers in Local Government, and other legal publications subscribed to.

Achieving the vision for the Island		Assigned to: Chief executive			
Inherent score Target score		Current score	Previous scores		
			May 19	Apr 19	Mar 19
14 RED	6 GREEN	10 AMBER	10 AMBER	10 AMBER	10 AMBER

Quarterly Performance Management Report (QPMR) updates	 Performance and finance are reported on a quarterly basis to Cabinet. The performance measures included in the report are based on the 2017-20 Corporate Plan. The corporate plan is currently under review and the associated QPMR will be updated and reformatted to reflect this. A revised Performance Management Framework has been drafted and circulated for review by CMT. The framework clearly shows the various levels at which performance is reported from Service Boards up to Cabinet. A project is being scoped that will improve the visualisation of the QPMR and enable reporting of the metrics in a range of formats to suit the audience.
Senior management restructure	The recruitment process is complete, and all posts have been filled.
Programme governance framework	A framework (agreed by CMT) has been in operation since December 2018 and summary reports reviewed bi-monthly by a Strategic Programme Board (which has the same membership as CMT) and a member review board chaired by the Leader. A revised Programme Management Framework has been drafted that takes on board the lessons learned since December 2018 which places greater emphasis on the governance of both

	programmes and projects to ensure that good practice is followed by all Programme and Project Managers
Regeneration programme	Key physical regeneration projects within the programme are progressing. Short and medium-term housing programme confirmed. 2019/20 budget pressures have led to re-prioritisation of activity. Regeneration Strategy was presented to Cabinet in June 2019
Strategic risk register	The register has been reviewed by CMT and was first presented in its new format in December 2018. Revisions in the format of strategic risks were requested by the Audit Committee and these have been incorporated.
	The strategic risk register has been transferred to the council's new IWC Risk management system to enable formal reporting from the system and to further enable risk and mitigation owners to update directly. The roll out to directorate representatives will take place during July. A revised Risk Management Framework has been agreed by CMT. This framework is prescriptive in how risks are managed and updated and at which levels of the organisation they should be reported and escalated.
	The Strategic Risk Register is periodically presented to Audit Committee and in future will clearly indicate to them where mitigation has not been updated.

Additional demands placed upon the Isle of Wight Council and partners owing to		Assigned to:			
pandemic flu		Director of Public Health			
Inherent score Target score		Current score	Previous scores		
			Mar 19	Feb 19	Dec 18
16 RED	16 RED	16 RED	9 AMBER	9 AMBER	N/a

Internal arrangements	The IWC Pandemic Influenza Plan was written by members of the IWC Public Health Team in consultation with the Emergency Management Department in 2016, based on national guidelines and the Hampshire & IOW Local Health Resilience Partnership (LHRP) Health Protection Incident and Outbreak Plan. The Pandemic flu plan should closely link with IWC departments business continuity plans, these plans were reviewed by the IWC Emergency Management Team
External arrangements	This IWC Pandemic Influenza Plan tested during the Hampshire and Isle of Wight table top exercise, held in December 2016, and updated to incorporate the learning from this exercise and published in January 2017. A further table top exercise will be held in December 2019 and the plan will be updated based on the

	findings of that exercise. Further meetings will be held with key staff from the IOW CCG and NHS Trust to ensure that progress is being made by the Trust to have robust pandemic flu plans in place to support in the development of those plans and check that they are collegiate by September 2019.
Provision of up to da information	 Pandemic flu guidance is displayed on the Isle of Wight Council website and covers such things as checklists for businesses and guidance for specific operational settings such as police and fire and rescue services. The risk of pandemic influenza and mitigating actions <i>was</i> be raised at the Multi agency Island Resilience Forum held on 05 June 2019.

Insufficient regulatory compliance for buildings under the Council's ownership.			Assigned to:		
			Director of F	Regeneration	
Inherent	Tarrataan	Current coore	Previous sc	ores	
score	Target score	Current score	May 19	Apr 19	Mar 19
16 RED	16 RED	16 RED	16 RED	16 RED	N/A

Implement appropriate	Target date – September 2019
arrangements for Water	
Services Management	Arrangements are currently in place with an external provider (overseen
(WSM)	by the Corporate Property Maintenance team), for water systems management. Retendering of this contract is overdue.
	Work is currently in progress to develop a new relevant specification on which a new contract can be let. The contract and supporting documentation/specification is being prepared by Corporate Property Maintenance Team in conjunction with Procurement and will be put out to tender in the near future. This work will most likely will be completed in October 2019.
Formalise arrangements	Target date – September 2019.
with Isle of Wight Fire and Rescue Service (IWFRS) to undertake fire risk assessments	The proposed arrangements for Hampshire and Isle of Wight fire and rescue services and corresponding uncertainty is hampering discussions on this matter.
(FRAs) on the council's behalf	
Produce and maintain a	Target date – June 2019
full record of buildings	
•	In manual Comparete Drenowly Maintenance Team are leading to being
and their respective FRA	In progress. Corporate Property Maintenance Team are looking to bring
details	in some additional surveyor capacity to assist in developing this.
	Discussions taking place with HR and Procurement to recruit a new

	surveyor quickly.
Ensure all council	Target date – June 2019.
properties occupied by	<i>IWFRS currently undertaking programme of FRAs, programme is co-</i>
vulnerable people have	ordinated by health and safety section. Programme prioritised by Health
an up to date FRA	and Safety Team.
Review the required	Target date – June 2019
frequency of water risk	This is in progress and forms part of the new contract specification for
assessments for all	Water systems Management. The risk assessment frequency is set out in
council properties	the specification of the new water hygiene contact.
Identify a suitable mechanism to evidence the current safety status of all council properties	Target date – June 2019 A way forward has been identified and will involve changes to existing ICT systems. Initial scoping discussions with ICT have started.

Non-compliance with General Data Protection Regulations (GDPR)			Assigned to: Assistant Director of Corporate Services		
Inherent score	Target score	Current score	Previous scores		
			May 19	Apr 19	Mar 19
16 RED	6 GREEN	16 RED	16 RED	16 RED	N/A

Review of Information Asset Register template to better support GDPR compliance	The template is being prepared to not only provide technical GDPR compliance but also to try and ensure that it is a useful document and simply a technical compliance exercise. Target date – July 2019
Full update of Information Asset Registers	The information asset owners will be responsible for updating their asset registers when the new template is available. To ensure this is achieved a temporary Records Management Officer will be employed to assist asset owners. <i>The council has recruited to this post subject to references. It is hoped the person will start within 4 weeks.</i> Target date – December 2019
Identify the current GDPR status of all ICT systems and record on a central register	System information will be included in the revised IAR template and explicitly collected here. Systems owners should have this identified already and therefore task is to create the central register. Target date – September 2019
Identify all staff within services who hold	5

contract management responsibilities	
Update all contracts over £25,000 to ensure GDPR compliance	Target date – March 2020
Conduct gap analysis of GDPR reporting to governance forums and ensure that all issues addressed	governance group. Further gap analysis will be undertaken – August
Update Protective Marking Policy and	
cascade to all staff	
Update IWC Corporate Retention Policy and cascade to all staff	

STRATEGIC CONTEXT

13. Strategic risks are those that have the potential to prevent the council from achieving its strategic priorities. Senior managers 'own' strategic risks according to their particular responsibilities. Strategic risks are brought to the attention of Cabinet in that they are linked to the corporate priorities of the council in the Quarterly Performance Management Report (QPMR). A Quarter 4 report was presented on 13 June 2019.

CONSULTATION

14. The review of each strategic risk has been undertaken by senior managers according to their particular responsibilities. Members of the Corporate Management Team have reviewed the strategic risk register. Cabinet members are also given the opportunity to review risks as part of the QPMR.

FINANCIAL / BUDGET IMPLICATIONS

15. There are no direct financial implications of this report, although many of the controls employed to manage strategic risk do have significant financial and resource implications.

LEGAL IMPLICATIONS

16. The Accounts and Audit Regulations 2015 require that the council reviews its system of internal control including its risk management arrangements. This report is therefore concerned in part with improving the way the council manages risk and also in giving the committee the opportunity to play its part

in overseeing risk management arrangements. These are important features in the council's governance arrangements.

EQUALITY AND DIVERSITY

17. The council has a legal duty under the Equality Act 2010 to seek to eliminate discrimination, victimisation and harassment in relation to age, disability, gender re-assignment, pregnancy and maternity, race, religion, sex, sexual orientation and marriage and civil partnership. It is considered that there are no direct equality and diversity implications of this report for any of the protected groups.

OPTIONS

- 18. Option 1 Audit Committee approves the strategic risks of the council as set out in paragraph 12.
 - Option 2 Audit Committee does not approve the strategic risks of the council as set out in paragraph 12.

RISK MANAGEMENT

19. While this report is concerned with the subject of strategic risk itself, the key risk is that the council fails to recognise the importance of identifying, assessing and managing strategic risk. The result would mean that risks are more likely to occur or that the council will fail to plan for their impact.

RECOMMENDATION

Option 1 - Audit Committee approves the strategic risks of the council as set out in paragraph 12.

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