PAPER D



Purpose: For Decision

Committee report

Committee AUDIT COMMITTEE

Date 2 DECEMBER 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 third 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 1 QPMR was reviewed by Cabinet on 12 September 2019.

RISK CHANGES

- 4. Corporate Management Team (CMT) have made the following amendments to risk scores between the last report to Audit Committee (30 September) and this current report. The register was considered by CMT on 19 November 2019:-
 - (a) Failure to recruit acceptable quality of professional practice across Adult Social Care (ASC) and Housing Needs. Reduction from 9 AMBER to 8 AMBER
 - (b) Insufficient staffing capacity and skills. Reduction from 7 AMBER to 6 GREEN.

(c) Failure to secure the required outcomes from the integration of adult social care and health. Reduction from 12 RED to 10 AMBER

Reporting methods

- 5. 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.
- 6. All risk scoring is decided by Corporate Management Team which reviews the Strategic Risk Register each month
- 7. 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.
- 8. In order to see which information has been updated since the previous report in September 2019 any additional comments are shown in *italics*. Where mitigation has not been updated the date of the last update is shown.

Strategic risks

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

Lack of financial resource and the		Assigned to:				
budget strategy	ability to deliver the council's in-year budget strategy		Director of Finance and Section 151 Officer			
Last updated September 2019						
Inherent score	Target score	Current score	Previous sc	ores		
			Sep 19	Jul 19	May 19	
16 RED	5 GREEN	8 AMBER	8 AMBER	3 GREEN	3 GREEN	
Mitigation	on					
Close monitoring of revenue spend	Budget positions are reported quarterly to service management, CMT and Cabinet. At the end of Quarter 1 the draft outturn indicated a forecast pressure against budget target of £1.2 million (approximately 0.8% of budget) Further update will be provided in line with end of quarter reporting two of finance to Cabinet (January 2020)					
Close monitoring of income realisation against target	Income realisation end of Quarter 1, th Further update will to Cabinet (January	ne draft outturn ind be provided in line	icated an unde	r achievement	of £415,000	
Close monitoring of achievement of savings plans	Achievement of sav At the end of Quart	•	•	•	•	

	will be kept under review as the financial year progresses and mitigating actions will be identified to ensure that the overall budget remains on target Further update will be provided in line with end of quarter reporting two of finance to Cabinet (January 2020)
Close monitoring of capital spend	Budget positions are reported quarterly to service management, CMT and Cabinet. At the end of Quarter 1, the forecast outturn position for the capital programme indicated expenditure of £26.6 million against a budget of £132.4 million and slippage of £104.8 million where spend will now take place in the next financial year. The key items of slippage relate to the property investment programme and regeneration programme. Further update will be provided in line with end of quarter reporting two of finance to Cabinet (January 2020)

Lack of financial resource and the ability to deliver the council's		Assigned to:			
medium-term financial strategy		Director of finance and section 151 officer			
Last updated Septe	mber 2019				
Inherent score	Target score	Current score	Previous s	cores	
			Sep 19	Jul 19	May 19
16 RED	9 AMBER	13 RED	13 RED	13 RED	13 RED
Mitigation	Mitigation				
Updated medium term financial strategy (MTFS)	setting process. A	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	The budget proces	s for 2020/21 is pro	ogressing		

Insufficient staffing capacity and skills		Assigned to:			
Last updated September 2019		Director of Corporate Services			
Inherent	Target score	Current score	Previous scores		
score			Sep 19	Jul 19	May 19
16 RED	8 AMBER	6 GREEN	7 AMBER	8 AMBER	8 AMBER

Mitigation

Delivery of recruitment and retention strategy and action plan

The scoping of a recruitment and retention strategy and plan is currently underway with a key focus being given to securing:

- an improvement in the council being recognised as a good employer.
- a reduction in the number of interims and agency staff required in critical occupational roles.
- 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:

Recruitment processes and systems - A refreshed recruitment policy has now been published and work is underway to update manager's guidance.

Engagement with services who regularly hire agency staff has been undertaken to gain customer insight in the problems and challenges faced by them in respect of supply availability, quality and current commissioning arrangements (particularly for specialist roles), the human resource service team are now compiling an options paper to determine how best to undertake remedial action in this respect. The service is currently awaiting the outcome of a capital bid submission for a new e-recruitment system (Nov 2019). A mini review of current recruitment processes has been undertaken including:-

- revision of the recruitment advertising request proforma,
- development of new recruitment guidance via Wightnet.
- an offer of assistance with vacancies from the HR Support team.

HR are currently trialling updated processes with a couple of recruiting managers prior to wider role out.

Our employment offer - A significant amount of work has been undertaken to improve the council's current website recruitment pages and a dedicated site for adult social care careers is now live. These improvements aim to better set out the council's employment offer. Work is also underway to review the benefits package available to new and existing employees with the aim of re-branding and re-launch. 'Our Employment Offer' on a page document has been developed. Work is now continuing with Communications, Learning & Development and ICT Teams on details to sit behind each section for both internal (current employees) and external (potential new recruits).

Workforce planning - This is currently a lower priority than other two workstreams but work is underway to develop talent management and succession planning arrangements for the council. It is intended to have toolkits available for managers and staff to be in place by Quarter 4 2019/20.

Regular monitoring, analysis and review of organisational health indicators

- Organisational Health indicators are reviewed by Cabinet every six months. The last update having been provided to their meeting in June 2019. Overall 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 is continuing to be reviewed corporately and within individual departments and identification of any individual cases of concern being addressed alongside advice and guidance being sought from the human resource service advisors..
- Attendance and wellbeing performance measures continue to be monitored by service departments and oversight is maintained by the human resource service. New sickness absence reporting mechanisms are currently being trialled to assist managers in identifying patterns and trends as well as initiation reminders when action is required to be taken in accordance with council policy and procedures. Targeted intervention continues to be undertaken within adult social care and children's services as areas where sickness absence levels are the highest and improvements continue to be seen

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 showed 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.
- Work to commence in quarter 3 on drafting a workforce planning toolkit for managers.

A change in organisational culture fails to keep a pace with the speed of organisational		Assigned to:				
change, negativ	change, negatively impacting on the delivery of the required transformation to deliver the corporate plan		n the delivery of	Director of Corporate Services		
Last updated S	eptem	ber 2019				
Inherent	Targe	et score	Current score	Previous scores		
score	0.6	DEEN	7 414050	Sep 19	Jul 19	May 19
16 RED	6 0	BREEN	7 AMBER	7 AMBER	8 AMBER	8 AMBER
			Mitig	ation		
Leadership management development	and	 There is now a regular quarterly programme of manager conferences taking place as an opportunity for professional development, networking and the development of corporate initiatives that seek to improve people management within the council There is also a corresponding leadership forum. In place that meets on a quarterly basis for senior managers A growing leaders network is also in place to provide assistance in the development and testing of new corporate people management and workforce development initiatives as well as to act as a think tank for common problems and issues. The IWC Leadership and management pathway has been published and with be updated regularly with the next focus being on supporting the workforce development requirements of the Commercial Strategy 				working and the mprove people that meets on a ssistance in the anagement and a think tank for published and will
Workforce development programmes/in ves		 A corporate programme of core learning and development is in place, utilising a combination of face to face and e-learning opportunities and is designed around the essential learning needs of staff. A new Learning and Management system has been procured and planning for implementation began in October 2019. The new system can integrate classroom and digital learning as well as providing employee and managers dashboards to view learning progress 				
Delivery of council's Action Plan	BIG	 There has also been a formal launch of the 'BIG Ideas' scheme for staff to submit their ideas for commercial opportunities and/or efficiency savings and improvements. 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. Just over 1,000 new laptops have now been deployed across the workforce to date. This rollout will complete in February 2020 Nominations are now open for this years staff awards with the event being held on 31 January 2020. 				

Failure to improve educational attainment		Assigned to	:		
		Director of C	Children's Ser	vices	
Inherent score	Target score	Current Previous scores			
		score	Sep 19	Jul 19	May 19
16 RED	6 GREEN	9 AMBER	9 AMBER	10 AMBER	10 AMBER

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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 and Learning Partner (LLP) to support and challenge the improvement of standards in Island community schools.
- Provide guidance and support on Key Stage 1 and Key Stage 2 standards and statutory assessment arrangements.
- Key Stage 2 results for 2018/19 have shown considerable improvement especially in Mathematics as a result of a targeted intervention in Maths teaching. This will be followed up over the next academic year to ensure improvements are embedded. 74% of IW pupils achieved age related expectations (ARE) in Maths which was an 8% improvement on 2017/18
- IN reading and writing IW pupils results also improved and, in both cases, narrowed the gap between IW achievement and the national average.
- GCSE results for IW schools improved in the 2018-19 academic year but remain just below national averages

Delivering Educational Excellence – ensuring schools are good for all children

- Use the LLP programme to evaluate the performance of vulnerable groups of children and the provision for them and support schools in bringing about improvements.
- 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. 73.5% of IW schools are currently rated good or outstanding and signs from inspections undertaken in 2018/19 is that this will improve over the coming months
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 Children's Services			
Inherent score	Target score	Current		evious score	
		score	Sep 19	Jul 19	May 19
16 RED	5 GREEN	8 AMBER	8 AMBER	8 AMBER	8 AMBER
	Mitigation				
Corporate Parenting Board	"Corporate parenting inspection. The Corporate parenting inspection. The Corporate Parenting outcomes for children people are supported apprenticeships, par people's experienced active and influential Corporate Parenting	g is much stroporate Parenting described reports, enabled Board mainta en in care and do attend univicularly for the Corport of the Corporate Part of the	onger across to g Board receive bling effective so ins a strong for care leavers. versity and the se with care export Wight's child reporate Parenti	the council singles regular, concurrenced on achieved A high number council active experience. 'He dren in care cong Board."	nce the last nprehensive allenge. The ving positive er of young ly promotes aring young
Multi-agency integrated commissioning board	Children's social ca Independent Adultho Care leavers have b as through the tende the local offer for car	een actively inviring process fo	accommodation volved in impro r the new supp	n provision. oving service d	elivery, such

This is one of four recommendations for improvement from the 2018 Ofsted inspection. There is a need to ensure that the separate commissioning strategy through Housing services is integrated to ensure a pathway of provision, the risk is this could become a disjointed/duplicate provision. The tender is now out to 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 Committee for Children's Services. A report was provided to elected to Scrutiny 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 The Ofsted inspection report published on 7 January 2019 highlights that: 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. Audits began in April 2018 and are continuing. They include practice **Quality assurance** framework (monthly observations, auditing of supervision files and quarterly 'windows into practice' weeks. Quarterly reports are provided to senior managers which case audits concentrating on identify key themes and these become a focus for workforce development. quality of practice) 'A comprehensive quality assurance programme, combined with the rigorous use of performance information, enables leaders to maintain effective oversight of practice. Performance meetings take place in every part and level of the service. Regular auditing by managers and senior leaders, alongside social workers, provides helpful opportunities for reflection and learning.' Ofsted 2018. Monthly meetings now take place to review audits and actions and quality of practice. The senior management team also undertake an audit of audits on a monthly basis to quality assure the auditing process. Annual self-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 https://files.api.ofsted.gov.uk/v1/file/50048228 **Director and Ofsted** 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 of the in April 2019. This highlighted strengths and areas for development of the which of the will use as basis for future inspections. The curre evaluation is being updated for the 2020 annual conversation.	pment,

Failure to recruit accep	•	Assigned to:			
professional practice a Social Care (ASC) and		Director of Adult Social Care			
` ,	·				
Inherent score	Target score	Current	Previous sc	ores	
		score	Sep 19	Jul 19	May 19
14 RED	6 GREEN	8 AMBER	9 AMBER	9 AMBER	9 AMBER
		Mitigation			
ASC Programme Board	All ASC projects any exceptions Programme board	being escalate	ed to the As	SC Transform	nation Board.
	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 bimonthly basis to the Strategic Programme Board (whose membership is the same as the Corporate Management Team) and a member review board chaired by the leader.				
ASC restructure to support person centred care	Care Management was successfully re-structured during Summer 2019. Professor Sam Baron, (the author of the Department of Health & Social Care guide to Strength Based Approaches) is no working with department to embed Strength Based leadership and on the application of new strength based assessment and planning tools used by social workers across all teams.				
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 have successfully recruited to a number of key posts recently including: social work posts in Care Management, front line carers in Reablement, registered manager at the Gouldings Assistant Director of Commissioning 				

However we are struggling to recruit to key statutory Mental Health roles/ Adult Mental Health Practitioners (AMPHs), Best Interest Assessors (BIAs) and Mental Health Social Workers. In addition we are frequently having to undertake more than one recruitment round in order to appoint in most appointments. So whilst we are able to recruit it is taking too long to do so, the department is looking to see how it can continue to fund the dedicated post in HR to support the departments recruitment. **ASC** Learning Human Resources and L&D are working together to explore workforce and **Development** development and career pathways. Current pathways already include the (L&D) Plan apprenticeship degree in social work. Consideration is also being given to building up a strategic partnership with a local university. The Practice Development Unit has rolled out a programme of learning and development activities designed to complement the more formal offer of different courses available from the Learning & Development unit. These more informal activities are proving popular with front line staff and include:lunch and learn sessions. TIME (critically reflective practice sessions), dissemination of RIPFA materials. A substantial programme of training has been delivered in the Adelaide and Gouldings in support of CQC inspection preparation and action plans. **Mobile working pilot** All of the staff from Enterprise House that have relocated to County Hall have received new ICT equipment allowing them to work in an "Agile" manner. Complete ASC teams not based at Enterprise House (such as the Hospital Social Work Team) will receive their new kit prior to December 2019. All staff in ASC are able to work in an "Agile manner" and can complete assessment paperwork etc without having to visit County Hall reducing the amount of time spent travelling. The new forms have been used by the LD team to positive reception of staff New person-centred, strengths-based and impact on quality of practice and recording. We will be using Professor Sam Barron to support the wider roll out of the forms from Jan 2020 assessment forms

Failure to identify manage situations values are subject to a Last updated September 1	Assigned to: Director of Ac Operations	lult Social C	are Assistant	t Director of	
Inherent score	Target score	Current score	Previous sc	ores	
40.050	0 ODEEN	0.44050	Sep 19	Jul 19	May 19
16 RED	6 GREEN	9 AMBER	9 AMBER	9 AMBER	9 AMBER
Mitigation					
ASC Programme Board	All ASC projects arexceptions being of board highlight report Highlights and key wide summary report basis to the Strate the Corporate Manieader.	escalated to the ort reflects the consistency issues from the ort of all programme E	ASC Transfor proporate standar ASC Programme activity that Board (whose	mation Board. ard. me are include is presented o membership is	Programme ed in a council n a bi-monthly s the same as
'Deprivation of Liberty Safeguards' (DoLS) backlog clearance programme	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 (The OT Practice) to complete outstanding assessments and the number of outstanding assessments reduced to far lower levels (256 at the end of December 2018). However since April 2019 levels have once again continued to rise as in-house capacity struggles to meet demand.				
	Work is ongoing assessments compared fractice the first woutstanding requeactivity. This trend 2020 which would OT Practice (estimates)	oleted. A further veek of October. sts is approximad will increase out be counter-bala.	50 assessmen Year to date ately 50 per n atstanding requ	t requests will the average n nonth with cur uests by 300 b	be sent to OT et increase of rent in-house by 31st March
	Work is ongoing to this remains an is budget submission Deprivation of Libe meet pressures ac	sue within the de for 2020/21 whe erty standards aga	epartment. The ere the departr ainst the £3m a	is has been re nent will be ma additional 2020	eflected in the aking a bid for
Mental Health Action Plan	An action plan has mental health social engaged in its de manager in place a	al work practice – velopment and t	the Mental He his is on targ	ealth Team has et. Permane	s been heavily nt new group

the team and to support the AMPH out of hours services; dedicated expertise in S117 is in place and supporting policy is in final draft.
Leadership group approved new structure for out of hours service for Mental Health (AMHPs) this creates a relatively small budget pressure (£57k). We are now working with HR to undertake the necessary impact assessment and to gain approval from the Director of Corporate Services to implement the new structure.
Review of the practice guidance is complete; MSP toolkit for ASC practitioners in place.
We await the receipt of the most recent independent external MSP audit and a further action plan will be produced and implemented on the basis of that audit. Responsibility for Safeguarding is now also part of the statutory work undertaken within localities as opposed to only by the single safeguarding team.
All bar one of the 6 LD Homes are rated as Good by CQC. 2 homes will become Supported Living and the plans for the refurbishment of Westminster House have now been approved. Both the Service Manager and the Group Manager undertake routine audits across all of the homes the results of which are reported on a monthly basis to the departmental service board.
Service now located at Sandown Barrack Block and CM2000 system is fully operational.
An Independent mock inspection against CQC standards was undertaken in sept/oct 19, the results suggest that the service is consistently good with some outstanding features. A formal inspection is expected in the very near future. (because CQC will wish to assure itself that the new premises and the new management structure are operating to the required standards

Failure to secure the required outcomes from the integration of adult social care and health		Assigned to: Director of Adult Social Care			
Last updated September 2019		Director of Ac	iuit oociai o	aic	
Inherent score	Target score	Current	Previous s	cores	
		score	Sep 19	Jul 19	May 19
16 RED	6 GREEN	10 AMBER	12 RED	12 RED	12 RED
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	The onwards care and independence workstream of the Islands Health
and operational integration	and Care Plan comprises the following initiatives:-
	The ICDT
	The Regaining Independence service
	Integrated Localities
	Technology in Care Homes
	Early Help
	Raising Standards
	The Dementia Strategy
	LD Integration
	New Community Care model
	, , , , , , , , , , , , , , , , , , , ,
	The LCB (soon to be the Integrated Care Partnership) receives routine reports of progress across these areas via the system programme office with the Director of Adult Service being the joint Senior Responsible Officer for this programme.
Responsiveness to hospital	Senior ASC staff are on call seven days a week in order to direct
escalations	resources to those people deemed medically fit for discharge and the
	responsibility of ASC. In addition, the Single Point of Commissioning
	(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) Last updated September 2019		Assigned to	: leighbourhoo	ds	
Inherent score	Target	Current	Previous sco	ores	
	score	score	Sep 19	Jul 19	May 19
16 RED	5 GREEN	8 AMBER	8 AMBER	9 AMBER	9 AMBER
Mitigation					
Waste management contract monitoring arrangements	The Mechanical Treatment Plant has now achieved acceptance certification. All remaining snagging items will be completed by December 2019.				
	The Energy Recovery Plant installation has been delayed due to programming and supply chain issues. Acceptance testing is intended to be complete in early spring.				

	Construction risk sits with Amey and any delay will not be at the Council's cost.
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 £608,000 completed April 2019 Phase 2 £900,000 for completion 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.		Assigned to: Chief Executive	e		
Inherent score	Target	Current score	Previous so	ores	
	score		Sep 19	Jul 19	May 19
16 RED	6 GREEN	14 RED	14 RED	14 RED	14 RED
Mitigation					
Working group of senior officers in place to define IWC strategy for Brexit	The Brexit Impact Group is now meeting weekly in the build up to the current EU exit date of 31 January 2020 and is working under the assumption that no deal will be reached before then. A developed action plan is in place concentrating on key areas that could impact the Isle of Wight both immediately after Brexit and in later months and years. The group liaise with the IW Chamber of Commerce to ensure that local businesses can be as prepared as possible.				
Oversight of any potential	A key link officer has been appointed to monitor the potential impact on the Isle of Wight workforce. The Council is promoting the settlement scheme to existing staff and social care contractors. Internally the council has promoted the settlement scheme to its staff who are citizens of EU member states. Externally the Council has been working Social Care providers to make them aware of the settlement scheme.				

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.
Mitigate against issues with food and fuel shortages or price increases	The IWC is liaising closely with the Foodbank to ensure continuation of provision should food availability be affected.
	Work is underway to identify residents who may be vulnerable to increases in prices of food and fuel. This is particularly key given the introduction if Universal Credit which has the potential to create cash flow difficulties for those in receipt of it.
Management of change approach to mitigate against significant impact to the organisation and its staff	Council's Emergency Response Plan structures in place utilising the Brexit Impact Group to identify key and implement actions on Short (response phase), Medium and Long term (Recovery Phase) for wider council services.
	A Communications Strategy is in place to ensure that the relevant information is available in a consistent and useful manner that easily identifies issues as national, regional or local.
	A full briefing to members on the preparations for and the potential impact of Brexit took place on 7 October 2019
Detailed project plans to manage implementation of changes	A Detailed Programme Plan is in place as well as a full Risk Register associated with the impact of leaving the EU. Additional funding from central government to deal with Brexit preparations has been assigned to key potential areas of impact such as: • Business readiness • Food resilience • Vulnerable people • Supply chain logistics • Local labour supply
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	TFEU (Treaty of the Functioning of the European Union) principles applicable to the free movement of goods (equal treatment, non-discrimination, transparency and proportionality) are embodied in our national Public Contracts Regulations 2015, which were brought into force to implement the European Directive of 2014/24 on public sector contracts. These will remain in force, at least for now, and breaches of them can be challenged in the same way.

Achieving the vision for the Island		Assigned to:			
Last updated September 2019		Chief executive			
Inherent score	Target score	Current score	Previous scores		
	SCOIE	Score	Sep 19	Jul 19	May 19
14 RED	6 GREEN	9 AMBER	9 AMBER	10 AMBER	10 AMBER
	1	Mitigation			
Quarterly Performance Management Report (QPMR) updates	Regular reporting of finance and performance set against the corporate plan activities and metrics is made to the Cabinet and various committees with a scrutiny function. The corporate plan has been refreshed to take account of the achievements made by the council and changes in its operating environment. This plan is aligned to the council's vision for the Island and all of the council's key activities and performance metrics derive from it. Service plans and individual employee objectives are being refreshed and will align to the corporate plan A project is underway scoped that will improve the visualisation of the QPMR and enable reporting of the metrics in a range of formats to suit the audience. The revised format will be ready to implement for the Quarter 3 QPMR after being tested on various sections of the Quarter 2 report				
Strategic capacity and interventions	Additional capacity in the senior management team has been secured and is being used to address gaps in strategy and policy issues which will align to the corporate plan. A key challenge is in maintaining a planned proactive approach to the delivery of corporate objectives and not being distracted by populist agendas, which in themselves may require additional resource. Key themes for the coming period are: commercialisation, digitalisation, housing, financial sustainability and one public service.				
Robust Programme Management	The programme management framework is becoming embedded throughout the organisation; aided by the oversight of the Strategic Programme Board and the member review board chaired by the Leader. A greater degree of challenge is now being applied to the council's core programmes of work to ensure their timely delivery and impact on the Island's vision. This challenge includes periodic health checks on the programmes and projects that are reported to the Strategic Programme Board				

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	Strategic risks are those that are most likely to have a negative impact on the whole council and its aspirations, should they come to be. Therefore, these risk are reviewed by the corporate management team on a monthly basis.
	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 rollout of the system will be completed in line with the 2019/22 Service Planning process. 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 clearly indicates to them where mitigation has altered or has not been updated.

Additional demands placed upon the Isle of Wight Council and partners owing to		Assigned to: Director of Public Health			
Last updated September 20	pandemic flu Last updated September 2019		no ricaini		
Inherent score	Target score	Current score	Previous sc	ores	
			Sep 19	Jul 19	May 19
16 RED	16 RED	14 RED	14 RED	16 RED	9 AMBER
Internal arrangements	IWC Publi Managementhe Hamps Health Pro The Pand business of	Mitigation 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	Isle of Wig	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 date 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 was raised at the Multi agency Island Resilience Forum held on 05 June 2019.

		mpliance for	Assigned to:			
buildings under the Council's ownership.			Director of Regeneration			
Last updated S	Last updated September 2019		Director of Reg	Cheration		
Inherent	Target score	Current score		Previous scores		
score			Sep 19	Jul 19	May 19	
16 RED	6 GREEN	14 RED	14 RED	16 RED	16 RED	
		Mitig	ation			
		9				
		get date – January	/ 2020			
arrangements						
Services Ma (WSM)	_	ngements are cur he Corporate P	•	•	`	
(VVSIVI)		-		•	water systems	
	man	management. Retendering of this contract is overdue. Work is currently in progress to develop a new relevant specification on				
	Worl					
		h a new contra				
		documentation/specification is being prepared by Corporate Property				
		Maintenance Team in conjunction with Procurement and will be put out to				
	teria	tender shortly with a new contractor identified by January 2020				
Formalise arra	ngements Targ	get date – Decem	ber 2019			
with Isle of W	•					
and Rescue		RS are not unde	•	-		
(IWFRS) to und	•	rding potential ar	•		_	
risk assessmer on the council's		g hampered by the erty Service are			•	
on the council s		's across the cour		menin anangem	ents to phontise	
		5 451055 the 60th	ion ostato.			
Produce and n	naintain a Targ	et date – June 20	20			
full record of	buildings					

and their respective FRA details	In progress. Corporate Property Maintenance Team have now secured additional surveyor capacity to assist in developing this work which is underway.
Ensure all council properties occupied by	Target date – December 2019.
vulnerable people have an up to date FRA	IWFRS have undertaken FRA's of council properties which accommodate our most vulnerable people (Goldings, Adelaide, Beulieu etc) but given IWFRS are not undertaking further work, new arrangements are currently being put in place to update these FRA's, if required, by the New Year.
Review the required	Target date – January 2020
frequency of water risk assessments for all council properties	This is in progress and forms part of the new contract specification for Water systems Management. The risk assessment frequency is set out in
	the specification of the new water hygiene contact.
Identify a suitable mechanism to evidence	Target date – December 2019
the current safety status of all council properties	A way forward has been identified and will involve changes to existing ICT systems and how data is held and accessed. Initial scoping discussions with ICT have started. Options will be identified including the resources required to implement any new system.

Non-compliance with General Data Protection Regulations (GDPR)				Assigned to: Assistant Director of Corporate Services		
Inherent		oro	Current score	Previous scores		
score	score Target so			Sep 19	Jul 19	May 19
16 RED	6 GREEN		10 AMBER	10 AMBER	16 RED	16 RED
Review of Information Asset Register (IAR) template to better support GDPR compliance The council has now agreed a template that has been approved with the relevant information governance colleagues, notably ICT. The IAR template was approved by the IIGG on 4 September 2019. All 40 Services have been notified and partially completed IARs have were circulated to them on 10 October.						
Full upda Information Registers	te of Asset	Targ	et date – Decemb	per 2019		

The information asset owners will be responsible for updating their asset registers <i>now</i> the new template is available. To ensure this is achieved a Records Management Officer has been recruited to assist asset owners.
Target date – September 2019
All IOT related reliains are recovered as a significant of CODD and the
All ICT related policies are now under review and a central GDPR systems register is being developed.
Target date- July 2019
The records management officer is weaking classed areas remark and
The records management officer is working alongside procurement and service managers to identify all contracts
The records management officer, working alongside procurement and
service managers, has identified all contracts owners, and GDPR contract compliance requests have been issued to all 40 Services
Target date – March 2020
All contracts entered into after GDPR came in to force (25 May 2018) are compliant and contain GDPR provisions. All contracts before that need required updating id appropriate. Progress is as follows
There are 97 contracts with start dates before 25.5.18
Of these 97:
GDPR isn't applicable to 30 of those contracts; 32 contracts have either been revised or the contract is coming to an end and procurement process is underway.
A further 35 will require further investigation and possible action.
Target Date – August 2019
The terms of reference of the IIG is being reviewed. Whilst immediate changes, such as procurements team attending the group, have been made a further review to assess regular report content, meeting regularity and meeting Attendees is being completed.
The terms of reference of the IIG has been reviewed and agreed. Whilst immediate changes, such as procurements team attending the group, have been made, a further review to assess, meeting regularity and meeting Attendees is being completed. A monthly IGG report is now being generated and supplied.
Target date – January 2020
Policy has been updated and is available on the Council's Intranet

Update IWC Corporate	Target date – January 2020				
Retention Policy and					
cascade to all staff	All relevant policy documents have <i>been</i> included in the new IAR template.				
	Additionally all polices are currently being reviewed and relevant				
	amendments being made				

STRATEGIC CONTEXT

10. 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 1 report was presented on 12 September 2019.

CONSULTATION

11. 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

12. 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

13. 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

14. 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

15. Option 1 - Audit Committee approves the strategic risks of the council as set out in paragraph 9.

Option 2 - Audit Committee does not approve the strategic risks of the council as set out in paragraph 9.

RISK MANAGEMENT

16. 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

17. Option 1 - Audit Committee approves the strategic risks of the council as set out in paragraph 9.

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