# PAPER I

ISLE of WIGHT

Purpose: For Decision

# Committee report

Committee AUDIT COMMITTEE

Date 16 MARCH 2020

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 fourth 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 3 QPMR was reviewed by Cabinet on 12 March 2020.

### **RISK CHANGES**

- 4. Corporate Management Team (CMT) have made the following amendments to risk scores between the last report to Audit Committee (2 December 2019) and this current report. The register was considered by CMT on 18 February 2020:
  - (a) Strategic risk 1 Lack of financial resource and the ability to deliver the council's in-year budget strategy. Reduce from 8 AMBER to 7 AMBER
  - (b) Strategic risk 8 Failure to identify and effectively manage situations where vulnerable adults are subject to abuse. Increase from 9 AMBER to 12 RED
  - (c) Strategic risk 11 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. Reduction from 14 RED to 12 RED.
  - (d) Strategic risk 14 Insufficient regulatory compliance for buildings under the Council's ownership. Reduction from 14 RED to 10 AMBER.

5. Strategic Risk 13 regarding Pandemic Flu has been expanded to include the risk surrounding the Covid-19 virus and reflect the measures being taken around this threat. It is anticipated that a separate Strategic Risk will now be required for this matter.

## Reporting methods

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

# Strategic risks

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

STRATEGIC RISK 1						
Lack of financial resource and the ability to				Assigned to:		
deliver the cou	ncil's	in-year bud	dget strategy	Director of Fina	ince and Section	151 Officer
Inherent	Tar	get score	Current score	Pr	revious scores	
score	ıaı	get score	Current score	Dec 19	Sep 19	Jul 19
16 RED	5	GREEN	7 AMBER	8 AMBER	8 AMBER	3 GREEN
			Mitigat	ion		
Close monitoring of revenue spend		Budget positions are reported quarterly to service management, CMT and Cabinet. At the end of Quarter 3 the council is forecasting a balanced budget with £0 variance.  Further update will be provided in line with end of Quarter 4 reporting of finance to Cabinet (May 2020).				
Close monitoring of income realisation against target		Income realisation is monitored monthly and reported to cabinet quarterly. At the end of Quarter 3, the draft outturn indicated an under achievement of £359,000. This is mitigated by the overall budget position which is forecasting a balanced budget.  Further update will be provided in line with end of Quarter 4 reporting of finance to Cabinet (May 2020).				

Close monitoring of achievement of savings plans	Achievement of savings are monitored monthly and reported to cabinet quarterly. At the end of Quarter 3 it is forecast that we will underachieve by £1.4m. Mitigating underspends have been identified resulting in a current forecast balanced budget for year end  Further update will be provided in line with end of Quarter 4 reporting of finance to Cabinet (May 2020).
Close monitoring of capital spend	Budget positions are reported quarterly to service management, CMT and Cabinet. At the end of Quarter 3, the forecast outturn position for the capital programme indicated expenditure of £24 million against a budget of £28.7 million.  Further update will be provided in line with end of Quarter 4 reporting of finance to Cabinet (May 2020).

STRATEGIC RISK 2							
Lack of financial resource and the ability to deliver the council's medium-term financial strategy			Assigned to: Director of final	nce and section	151 officer		
Inherent	Tor	ant noore	Current coore	Р	revious scores		
score	ıar	get score	Current score	Dec 19	Sep 19	Jul 19	
16 RED	9	AMBER	13 RED	13 RED	13 RED	13 RED	
			Mitiga	ation			
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.					
2020/21 budget Setting process  The budget for 2020/21 was agreed by Full Council budget includes the identification of £4.5 million of which will be monitored throughout the year. A cap million was also agreed and will be subject to regulate the year.			lion of savings, ti A capital prograi	he delivery of mme of £44.2			
2021/22 budge setting proces		The budge financial ye	•	1/22 will commend	e in due course d	luring the next	

STRATEGIC RISK 3						
Insufficient st	affing capacity a	ınd skills	Assigned to:			
			Director of Corporate Services			
Inherent	Target score	Current score	Previous scores			
score			Dec 19	Sep 19	Jul 19	
16 RED	8 AMBER	6 GREEN	6 GREEN	7 AMBER	8 AMBER	
Mitigation						

# Delivery of recruitment and retention strategy and action plan

The overall aim to address known occupational staffing capacity issues is to secure:

- 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
- the right people, in the right place, at the right time.

The council's recruitment policy and practice guidelines have been refreshed to make sure that they are easily accessible and to navigate. On-line training resources are also being developed to support recruiting managers that can be accessed as and when it is required. This work is scheduled to be completed by 30 April 2020.

A review of agency spend and the challenges faced in securing agency staff in specific and specialist occupational roles has been completed and the corporate management team has considered the options to assist with both a reduction in costs and in the effective management of agency contracts. A transformation fund bid is to be prepared as a means to provide additional short-term officer capacity to assist with the delivery of these agreed actions in which it is anticipated there will be an overall reduction in the level of spend year on year on agency staff. This work is scheduled to also be completed by 30 April 2020.

Improvements to the council's front facing website pages for recruitment has given greater emphasis to the employment offer and the benefits of working for the local authority and living on the Isle of Wight. It is still early days to be able to provide any evidence that this is having a positive impact on recruitment success. In the absence of sufficient capital resources being available for the period 2020/21, the bid for the procurement of a new erecruitment system was unsuccessful. Consideration is now being given to the potential additional improvements that could be made by current automated systems and business processes as an alternative. This will be work that will be scheduled into workplans for completion by 31 March 2021. There have been positive reports received from recruiting managers following the introduction of dedicated HR support in the management of recruitment campaigns and processes required for authorisation and new starters.

The work undertaken to review the current benefits package for staff has been completed and is due for re-launch by 31 March 2020. It is anticipated that this will highlight to potential applicants, in a much more user-friendly format, what the employment offer is. It will also serve as a useful reminder to existing staff.

# 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 December 2019.

While there has been a continued downward trend in sickness absence, this is now showing signs of increase, particularly in relation to absences that are over 28 days in length. This has led to a review of the current absence management strategy with a view to considering the options for improvement which will be presented to the corporate management team in March 2020.

The corporate management team now receive a monthly sickness absence report to provide strategic oversight and monitoring of required actions to secure improvements. Directors also receive monthly reports for their directorate service areas, and which are required to be reviewed and follow up actions instigated with managers. This will continue throughout the year to ensure that proactive management action is taken to address any issues of concern.

The mental health working group that oversee the delivery of the agreed action plan that underpins the council's commitment to the mental health pledge continues to provide a range of information, guidance and signposting to sources of professional help. There are trained mental health first aiders in most service areas, who provide a valuable contact point for staff in need of help. The focus of the work of the group will now be to develop resources that help to promote wellbeing and personal resilience, and these will be developed over the next twelve months.

The annual staff survey results have now been discussed by the corporate management team and a revised BIG action plan will be developed in response. Each director has received a directorate report which they will be required to share and engage with staff to identify specific actions to address any concerns of staff in service areas to complement the corporate BIG action plan.

# Workforce planning

The council's quarterly pulse survey and staff survey results show that there have been significant improvements secured as a result of the revised performance review process that was introduced in 2019 and in completion rates. However, this new process needs to be embedded and continued effort to ensure that every member of staff has an annual BIG conversation to agree work objectives and to identify the support required in delivering them as well as identification of career development aspirations that can assist with longer term workforce planning.

STRATEGIC RISK 4						
A change in organisational culture fails to keep a pace with the speed of organisational change, negatively impacting on the delivery of the required transformation to deliver the corporate plan		Assigned to: Director of Corporate Services				
Inherent	Taro	et score	Current score	Previous scores		
l mmerenr	laig	et acoi e	Gairont Goor G		i icvious scores	
score	rary	et score		Dec 19	Sep 19	Jul 19
		GREEN	7 AMBER			
score			7 AMBER	Dec 19	Sep 19	Jul 19

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 aid 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.

A Local Government Association commercial skills programme has been commissioned for delivery in March 2020/21 to underpin the delivery of the council's recently agreed commercial strategy. Corporate Management Team and their direct reports will be invited to participate in order to provide the necessary leadership and management support in the development of our commercial practices.

# Workforce development programmes/ initiatives

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.

The newly procured Learning Management system is nearing its initial launch in March 2020. The new system will be integrating classroom and digital learning as well as providing employee and managers dashboards to view learning progress. An improved suite of content will be available to staff together with a manager "toolkit" providing access to a wide range of resources that can assist with their people management responsibilities.

# Delivery of the council's BIG Action Plan

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 now an ideas board in place that provides a forum for the development of initiatives put forward and to assess the potential of submitted ideas that could be pursued.

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.

A record number of nominations were received for this year's staff awards ceremony and the event held on 31 January 2020. This is an important event in the calendar to celebrate the successes, achievements and outstanding work of our workforce.

#### STRATEGIC RISK 5 Failure to improve educational attainment Assigned to: Director of Children's Services Inherent **Previous scores** Target score **Current score Dec 19** score Sep 19 **Jul 19 16 RED** 9 AMBER **6 GREEN** 9 AMBER 9 AMBER 10 AMBER

### 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
- Continue to work with schools preparing for inspection under the new Ofsted framework that was implemented in September 2019.

# 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. Seventy four per cent 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
- Provisional 2019/20 academic results will be available during summer 2020.

# 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

- 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

# for children based on effective partnership working

- 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.

STRATEGIC RISK 6							
Failure to ider	_			Assigned to:			
situations who		ılnerable cl	nildren are				
subject to abu	ıse			Director of Chil	dren's Services		
Inherent			0	Р	revious scores		
score	ıar	get score	Current score	Dec 19	Sep 19	Jul 19	
16 RED	5	GREEN	8 AMBER	8 AMBER	8 AMBER	8 AMBER	
			Mitiga	ation			
Corporate		The Ofstee	d inspection repor	t published on 7 J	lanuary 2019 high	nlights that:	
Parenting Boa	ard	"Corporate	norontina is	ich otronaan a	oo the cours!! -	since the lest	
			e parenting is mu . The Corporate P				
			ce data and report				
			Parenting Board				
			for children in ca supported to atte				
		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."					
		Corporate	Parenting Board	meetings take pla	ce quarterly. <i>Corp</i>	oorate parents	
		Corporate Parenting Board meetings take place quarterly. Corporate parents attended each activity during the Have Your Say Week during the Summer.					
Multi ogonov		Children's	ancial care in	waina aut ta aal	a tandar for a	"Dethyrors to	
Multi-agency integrated			social care is o	•		Pathways to	
commissionin	ng	Independent Adulthood" supported accommodation provision.					
board		"Care leavers have been actively involved in improving service delivery, such					
		as through the tendering process for the new supported housing pathway and					
		the local offer for care leavers." (Ofsted 2018)					
		This is one of four recommendations for improvement from the 2018 Ofsted					
			. There is a nee	•			
		•	nrough Housing	•			
			the risk is this cou	•			
			raised at the Hous				
		will now provide the oversight of all commissioning, activity and housing provision across the council.					
Quarterly			ice reports are		by the Policy	and Scrutiny	
performance		Committee	e for Children's Se	ervices.			
reports to Scrutiny		In Novemb	per 2019, as well a	as the quarterly pe	erformance report	the following	
Committee			wed by the Scruti	· · · · · · · · · · · · · · · · · · ·		o ronowing	

- IW Safeguarding Children Board Annual Report 2018/19
- <u>Hants and IW Children and Young Peoples Mental Health and Emotional</u> Wellbeing Local Transformation Plan
- Fostering progress report
- Adoption annual report

# Regular scrutiny of social work caseloads

The Ofsted inspection report published on 7 January 2019 highlights that: "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."

The average caseload is between 19 and 20.

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. Two new children's mental health professionals have been recruited as part of the Resilience Around Families Team (RAFT) to provide additional resources for social workers to draw upon.

# Quality assurance framework (monthly case audits concentrating on quality of practice)

Audits began in April 2018 and are continuing. They include practice observations, auditing of supervision files and quarterly 'windows into practice' weeks. Quarterly reports are provided to senior managers which identify key themes and these become a focus for workforce development.

"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 selfevaluation and annual conversation between Director and Ofsted

An Ofsted inspection of children's social care services took place in November 2018, with the report published in January 2019. <a href="https://files.api.ofsted.gov.uk/v1/file/50048228">https://files.api.ofsted.gov.uk/v1/file/50048228</a>

Judgement highlighted below:

The impact of leaders on social work practice with children and families Good
The experiences and progress of children who need help and protection Good
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 highlighted strengths and areas for development, which Ofsted will use as basis for future inspections. The current self-evaluation is being updated for the 2020 annual conversation.

STRATEGIC RISK 7						
Failure to recruit acceptable quality of professional practice across Adult Social Care (ASC) and Housing Needs			Assigned to: Director of Adult Social Care			
Inherent score	Target score	Current score	Dec 19	revious scores Sep 19	Jul 19	
14 RED	6 GREEN	8 AMBER	8 AMBER	9 AMBER	9 AMBER	
		   Mitiga	l tion			
ASC Programm Board	any exce Programm Highlights council wid bi-monthly the same a	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 Board 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 the Corporate Management Team) and a member review board chaired by the leader.				
ASC restructure support person centred care	Metropolita framework leadership the cultura management.  We have sorder to management alignment.	ue to work with Property and University and an University and a systems and be all change which unent teams.  Successfully restruction of the pote of the Managen with the Health of Learning Disability and the Successful of Learning Disability and University and I satisful of the Successful of Learning Disability and I satisful of Learning Disability and University an	d author of Streamealth and Social haviours through haviours strength- uctured the Care natial for integration and resource to the Care Plan, are	ngth-based approcare) to embed sout department and based practice and management Team with Health. So working to align	oach practice trength-based and to support cross our care ams in ASC in pecifically, we teams and, in	
ASC recruitmer and retention	Board Per appointed interviews of number rolling advobtained for continue the commence effective For The role with	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 proved successful. The department has obtained funding to retain the ASC Recruitment Officer for a further year to continue this progress  An Attendance Officer role has been successfully recruited to and will commence on 28 February 2020. The purpose of this role is to provide highly effective HR support to ASC management in the handling of staff absence. The role will ensure staff absence is managed appropriately and that policy is being followed thereby reducing the number of absences and need for temporary recruitment and additional agency staffing spend.				
ASC Learning a Development (L Plan	<b>&amp;D)</b> developme apprentice	esources and L& ent and career pa eship degree in so o a strategic partn	athways. Current ocial work. Consi	pathways alread deration is also b	dy include the	

Mobile working pilot Complete	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 Research in Practice for Adults (RIPFA) materials.  A substantial programme of training has been delivered in the Adelaide and Gouldings in support of CQC inspection preparation and action plans.  All the staff from Enterprise House that have relocated to County Hall have received new ICT equipment allowing them to work in an "agile" manner. ASC teams not based at Enterprise House (such as the Hospital Social Work Team) have now received their kit
	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.
New person- centred, strengths- based assessment forms	The new forms have been used by the Learning Disability team to positive reception of staff 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 January 2020.

STRATEGIC RIS	SK 8						
Failure to identify and effectively manage situations where vulnerable adults are subject to abuse		Assigned to:  Director of Adult Social Care Assistant Director of Operations					
Inherent	Target score	Current score	P	revious scores			
score			Dec 19	Sep 19	Jul 19		
16 RED	6 GREEN	12 - RED	9 AMBER	9 AMBER	9 AMBER		
		Mitiga	tion				
ASC Programm Board	any exce Programm Highlights council wid bi-monthly the same a	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 Board 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 the Corporate Management Team) and a member review board chaired by the leader.					
'Deprivation of Liberty Safeguards' (Do	awaiting a	ssessment, of wh	dentified some 75 ich 120 were clas ion an external	ssified as high pri	ority. Funding		

# backlog clearance programme

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 rose as in-house capacity struggled to meet demand. Additional resources have now been assigned to Best Interest Assessments and 138 were undertaken in Quarter 3 (compared with 33 in Quarter 2 and 49 in Quarter 1) and the number of outstanding assessments has now begun to fall and should continue to do so.

This matter was examined at the Policy and Scrutiny Committee for Health and Social Care held on 13 January 2020 where the Assistant Director of Adult Social Care (Commissioning) advised that this was a concern to the service and reassured that a temporary solution was in place to reduce the backlog. The progress was sufficient to meet statutory requirements and was monitored by the Adult Social Care service board. Members sought clarity over what was being done to prevent recurrence and were advised that additional funds had been requested for the budget 2020/21. It would be of benefit to have an updated briefing note outlining the current legal position regarding the risks arising from capacity issues in dealing with assessments for DoLS.

A briefing note was circulated to that committee outlining the current legal position regarding risks arising from capacity issues in dealing with assessments for Deprivation of Liberty Safeguards.

# Mental Health Action Plan

An action plan has been produced in response to the independent review of mental health social work practice – the Mental Health Team has been heavily engaged in its development and this is on target. Permanent new group manager in place and business case is being developed to increase the size of the team and to support the Approve Mental Health Practitioner (AMHP) 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.

# Safeguarding Action Plan

Review of the practice guidance is complete; Making Safeguarding Personal (MSP) toolkit for ASC practitioners in place.

We received our most recent independent review/audit of MSP in November 2019 and an action plan will be produced accordingly.

Responsibility for safeguarding is now also part of the statutory work undertaken within localities as opposed to only by the single safeguarding team.

# Learning Disability (LD) Homes Service improvement plans

All bar one of the six LD Homes are rated as Good by CQC. Two 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.

# Centralisation of outreach teams

Service now located at Sandown Barrack Block and CM2000 system is fully operational.

An independent mock inspection against CQC standards was undertaken in September/October 2019. The results suggest that the service is consistently good with some outstanding features. A formal inspection is expected in the very near future.

STRATEGIC RISK 9							
	Failure to secure the required outcomes from Assigned to:						
Failure to secure the required outcomes from the integration of adult social care and health			Assigned to:				
and moderate			Director of Adu	It Social Care			
Inherent	Target score	et score Current score Previous scores					
score			Dec 19	Sep 19	Jul 19		
16 RED	6 GREEN	10 AMBER	10 AMBER	12 RED	12 RED		
		Mitiga	tion				
ASC Programme Board  All ASC projects are reviewed monthly by the ASC Programme Board any exceptions being escalated to the ASC Transformation Programme board highlight report reflects the corporate standard.  Highlights and key issues from the ASC Programme Board are included council wide summary report of all programme activity that is presented bi-monthly basis to the Strategic Programme Board (whose member the same as CMT) and a Member review board chaired by the Leader				ation Board. rd. included in a resented on a nembership is			
Transformation programme and operational integration	Care Plan  The Inte Ea Ra The LD Ne The Local routine reposition	<ul> <li>The Regaining Independence service</li> <li>Integrated Localities</li> <li>Technology in Care Homes</li> <li>Early Help</li> </ul>					
Responsivenes hospital escalations	to those p ASC. In ac to identify to assess support. D Adult Soci	eople deemed moddition, the Single all providers willing people deemed are leaved transfers of	I seven days a we edically fit for disc Point of Commiss ng and able to res as requiring either of care (DTOC) me rs every Friday, v	charge and the resioning (SPOC) Te spond to requests residential care eeting chaired by t	sponsibility of am continues at weekends or domiciliary he Director of		

STRATEGIC RISK 10							
The council fails to achieve the required outcomes from its significant contractual relationships and fails to successfully resolve some anomalies in the contract's interpretation (in relation to the 25-year highways PFI contract)		Assigned to: Director of Neighbourhoods					
Inherent	Tar	get score	Current score		Previous scores		
score 16 RED		GREEN	8 AMBER	Dec 19 8 AMBER	Sep 19 8 AMBER	Jul 19 9 AMBER	
TORED		OKLLIN			OAMBLK	JAMBER	
				gation			
Waste management contract monitoring arrangement	ts	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 star of service being delivered. The level of reduction in service standards will balance between the need to achieve the required savings and maintain acceptable standard of service delivery. These changes also need accepted by the lenders who provide the required up-front capital investm.  A savings programme has been established and agreed with Island Road reports made to a dedicated savings board. The programme aims to desavings 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 are currently being delivered.					andards will be a d maintaining an lso need to be tal investment.  Sland Roads and a aims to deliver		

STRATEGIC	RISK 11					
	Brexit - Uncertainty during transition					
period, followed by potential legislative,						
funding and policy changes after the UK			Chief Executive			
leaves the EU may adversely affect the						
council and	its ability to	prov	ide services			
Inherent	Target score		e Current score		Previous scores	
score	Target 30	Jore   Curr	Ourient Score	Dec 19	Sep 19	Jul 19
16 RED	6 GREE	N	12 RED	14 RED	14 RED	14 RED
			Miti	gation		
Working gro	up of	The	Brexit Impact Gr	oup is now meet	ing <i>monthly durir</i>	ng the transition
senior office	rs in	perio	od until the end	of 2020. A dev	eloped action p	lan is in place
place to defi	place to define IWC		entrating on key	areas that could	d impact the Isle	e of Wight both
strategy for Brexit		imme	ediately after Brex	it and in later mor	nths 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 legislation changes in respect of right to live and work	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.
and freedom of movement that may affect our workforce	Internally the council has promoted the settlement scheme to its staff who are citizens of EU member states. Externally the Council <i>continues to work with</i> 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	The IWC is liaising closely with the Foodbank to ensure continuation of provision should food availability be affected.
price increases	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	These channels will continue to be monitored in the period running up to and after Brexit.

(CIPFA) and other local government	
sources	
Oversight of general	TFEU (Treaty of the Functioning of the European Union) principles
changes in legislation	applicable to the free movement of goods (equal treatment, non-
or governance	discrimination, transparency and proportionality) are embodied in our
arrangements that	national Public Contracts Regulations 2015, which were brought into force
may affect the council	to implement the European Directive of 2014-2024 on public sector
	contracts. These will remain in force, at least for now, and breaches of
	them can be challenged in the same way.

STRATEGIC RISK 12					
Achieving the vision for the Island			Assigned to:		
			Chief Executive		
Inherent	Target score	Current score		revious scores	
score	Tunger con c		Dec 19	Sep 19	Jul 19
14 RED	6 GREEN	9 AMBER	9 AMBER	9 AMBER	10 AMBER
		Mitiga	tion		
Quarterly Performance Management Report (QPMR) updates	activities a scrutiny further corporate made by the aligned to activities a semployee.  A project enable reprevised for	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 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 capac	hs being used the corpor A key chal of corpora in themsel	Additional capacity in the senior management team has been secured ar being used to address gaps in strategy and policy issues which will alig the corporate plan.  A key challenge is in maintaining a planned proactive approach to the delivor of corporate objectives and not being distracted by populist agendas, win themselves may require additional resource.  Key themes for the coming period are: commercialisation, digitalisate housing, financial sustainability and one public service.			to the delivery gendas, which
Robust Program Management	the organisation, aided by the and the member review board			ne Strategic Prog	•

	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 risks are reviewed by the corporate management team on a monthly basis.  The strategic risk register has been transferred to the council's new risk management system to enable formal reporting from the system and to further enable risk and mitigation owners to update directly. 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. A new training course has been developed for staff entitled "Introduction to Risk Management" which will further embed the Risk Management Framework.  The Strategic Risk Register is periodically presented to Audit Committee and clearly indicates to them where mitigation has altered or has not been updated.

STRATEGIC RISK 13					
Additional demands placed upon the Isle of Wight Council and partners owing to			Assigned to:		
	r similar large-so		Director of Public Health		
Inherent	Target score	Current score	Р	revious scores	
score	Target score	Current score	Dec 19	Sep 19	Jul 19
16 RED	12 RED	14 RED	14 RED	14 RED	16 RED
		Mitiga	tion		
Internal arrangements	Health Tea 2016, base Resilience The Pande continuity	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	during the	Hampshire and Is	n and IWC Pande sle of Wight table to to incorporate the	top exercise, held	l in December

	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 continue to have robust pandemic flu plans in place.
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 5 June 2019.
Preparedness for other novel infectious disease (including COVID-19)	With regards to COVID-19, the Isle of Wight Council continues to carefully monitor and respond to the emerging situation, alongside our partners in Public Health England and the NHS, to ensure we are well prepared should the situation change. The Isle of Wight Council is working as part of the Local Resilience Forum to ensure a coordinated response.
	Communications been provided to staff, education settings, social care and the voluntary sector on the latest guidance, where to find up to date information and on appropriate preventative hygiene methods.

STRATEGIC RISK 14						
Insufficient regulatory compliance for				Assigned to:		
buildings unde	r the Counc	CII'S OV	vnersnip.	Director of Reg	eneration	
Inherent	Target sc	ore	Current score		revious scores	
score				Dec 19	Sep 19	Jul 19
16 RED	6 GREE	N	10 AMBER	14 RED	14 RED	16 RED
			Mitiga	tion		
Implement appr	-	Targe	t date – January	2020		
arrangements f						
Services Manag	gement		•		an external provi	`
(WSM)		by the Corporate Property Maintenance team), for water systems				
		mana	gement. Retende	ering of this contra	act is overdue.	
		Work is currently in progress to develop a new relevant specification on				
			•	•	•	
					The contract an	
		documentation/specification is being prepared by Corporate Property Maintenance Team in conjunction with Procurement and will be put out				
		to tender shortly with a new contractor identified by <i>June 2020</i> .				
		to tender shortly with a new contractor identified by <i>Jurie 2020.</i>				
Formalise arrar	ngements	Targe	t date – Decemb	er 2019		
with Isle of Wig	•	, and the second				
and Rescue Se		IWFRS are not undertaking further any further FRA's and discussions				
(IWFRS) to und		regarding potential arrangements post the new combined authority are				
fire risk assessments		being hampered by the delay in moving to the new service				
(FRAs) on the c	ouncil's	arrangements. Property Services are putting in place interim				
behalf		arrangements to prioritise FRA's across the council estate to be in place				
		by Ju	ne 2020.			

Produce and maintain a full record of buildings and their respective FRA details	Target date – June 2020  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 vulnerable people have an up to date FRA	Target date – December 2019.  IWFRS have undertaken FRAs of council properties which accommodate our most vulnerable people (Gouldings, Adelaide, Beaulieu etc) but as IWFRS are not undertaking further work, new arrangements are currently being put in place to update these FRAs, if required, by <i>June 2020</i> .
Review the required frequency of water risk assessments for all council properties	Target date – January 2020  This is in progress and forms part of the new contract specification for Water systems Management which should be in place by April 2020. The risk assessment frequency is set out in the specification of the new water hygiene contact.
Identify a suitable mechanism to evidence the current safety status of all council properties	Target date – December 2019  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.

STRATEGIC RISK 15						
Non-compliance with General Data Protection Regulations (GDPR)		Assigned to:  Director of Corporate Services				
Inherent	T		C	Р	revious scores	
score	ıar	get score	Current score	Dec 19	Sep 19	Jul 19
16 RED	6	GREEN	10 AMBER	10 AMBER	10 AMBER	16 RED
Mitigation						
Review of Information Ass Register (IAR) template to bet support GDPR compliance		Target date – July 2019 The council has now agreed a template that has been developed with relevant information governance staff. The IAR template was approved by the Information Governance Group on 4 September 2019  Action completed.				
Full update of Information Ass Registers	set	Target date – December 2019  The new information asset register template together with instructions to assist in their completion was issued to 36 information asset owners who were requested to complete them. All 36 have been completed, reviewed and filed.  Action Completed.				

Identify the current	Target date – September 2019
GDPR status of all ICT systems and record on a central register	A central GDPR systems register for the council has been developed from the information contained in the completed information asset registers and the GDPR status recorded. This will form the basis of a full change management database. The immediate requirement for this action has been completed but will require on-going development with services in the longer term to ensure it captures all GDPR data processing/management information.
Identify all staff	Target date – July 2019
within services who hold contract management responsibilities	The records management officer, working with the procurement team and service managers, identified all contracts owners. For contracts with a value of under £25,000 which rest under the management of individual commissioning services, a GDPR compliance letter was prepared for issue to service providers. All 49 services have confirmed, where necessary, compliance to the revision of contracts has been completed.
Update all	Target date – March 2020
contracts over £25,000 to ensure GDPR compliance	The Procurement and Contracts Monitoring Team identified 77 contracts that have a value exceeding £25,000, and which required appropriate revision to
Obi it compliance	contracts. Of these 77, 32 were due to expire and were therefore discounted from required action. The remaining contracts in the list were risk assessed and those adjudged to be above low risk (based upon data processed and contracting period) were dealt with by way of unilateral notice to each of the contracting partners. 35 contracts are now deemed to be amended with 13 contract holders still in compliance negotiation. Work continues to bring these matters to successful conclusion.
Conduct gap	Target Date – August 2019
analysis of GDPR reporting to governance forums and ensure that all issues addressed	The terms of reference of the Information Governance Group (IGG) has been reviewed and agreed The meeting is chaired by the council's data protection officer and regular upward reporting to the corporate management team is being undertaken
	Action complete.
Update Protective	Target date – January 2020
Marking Policy and cascade to all staff	Policy has been updated and is available on the Council's Intranet.
	Action Complete
Update IWC	Target date – January 2020
Corporate Retention Policy and cascade to all staff	All relevant policy documents <i>have been</i> included in the new IAR template. Additionally, all policies have been reviewed <i>and published.</i>
	Action Complete.

### STRATEGIC CONTEXT

11. 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 3 report was presented on 12 March 2020.

## CONSULTATION

12. 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

13. 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

14. 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**

15. 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 reassignment, 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**

- 16. Option 1 Audit Committee approves the strategic risks of the council as set out in paragraph 10.
  - Option 2 Audit Committee does not approve the strategic risks of the council as set out in paragraph 10.

### RISK MANAGEMENT

17. 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 10.

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