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Queen Victoria Road High Wycombe Bucks HP11 1BB

Audit Committee (Supplement Agenda)

Date: 28 February 2019

Time: 7.00 pm

Venue: Committee Room 1

District Council Offices, Queen Victoria Road, High Wycombe Bucks

Membership

Chairman: Councillor M Appleyard Vice Chairman: Councillor R Scott

Councillors: G Hall, M Hanif, A Lee, Ms C Oliver, N Teesdale and R Wilson

Standing Deputies

Councillors P R Turner, D A C Shakespeare OBE, C Whitehead and K Ahmed

Agenda

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9 STRATEGIC RISK REGISTER MONITORING REPORT - 1 - 13
QUARTER 3 (To Follow)

For further information, please contact Iram Malik on 01494 421204, committeeservices@wycombe.gov.uk

Agenda Item 9

Report For:	Audit Committee
Meeting Date:	Audit 31 January 2019
Part:	Part 1 - Open
If Part 2, reason:	Choose a reason



Title of Report:	Strategic Risk Register - Quarter 3 Monitoring Report
Title of Report.	Strategic Nisk Negister - Quarter 3 Monitoring Neport
Officer Contact: Direct Dial: Email:	Michael Howard 01494 421357 Mike.howard@wycombe.gov.uk
Ward(s) affected:	All
Reason for the Decision:	Risk Management is the process of identifying and addressing the risks that either impact on the long term direction and sustainability of the Council (strategic risks), or arise from the delivery of objectives as set out on the Councils Corporate plan (corporate /operational risks). Risk Management forms part of the Wycombe District Council's approach to effective governance and is an essential element of good management. The Strategic Risk Register contains the most significant risks that could have an effect or impact on the delivery of the Councils' Corporate plan and in doing so damage the Councils financial standing and its reputation.
	During the reporting period, Strategic Management Board (SMB) agreed to the inclusion of a new risk, (SR08) - Unitary District Council Status (Pre-Structural Change Orders) and this has replaced SR04 - Local Government Re-Organisation. In addition, SMB also reconsidered the inclusion of Brexit and it was agreed that the risk would be included in the SRR as a subset of SR02 External and Internal Regulatory Framework, with applicable Service based risks being escalated via the operational risk register process (where applicable).

Proposed Decision/Recommendation:	The Committee is asked to NOTE the Quarter 3 Monitoring for the Councils Strategic Risk Register (SRR), attached at Appendix A).						
Sustainable Community Strategy/Council Priorities – Implications.	Risk: not applicable Equalities: not applicable Health & Safety: not applicable						
Monitoring Officer/ S.151 Officer Comments	Monitoring Officer: No direct Legal implications S.151 Officer: No direct financial implications.						
Consultees:	None						
Options:	None						
Next Steps:	None						
Background Papers:	None						
Abbreviations: SRR - Strategic Risk Register SMB – Strategic Management Board.							

Appendices to this report are as follows:

Appendix A - Strategic Risk Register - Quarter 3 Monitoring Report

Strategic Risk Report

Generated on: 25 January 2019 15:30



Risk	Current Risk	Key risk indicators	Consequences	Internal Controls	Supporting Description Internal Controls	Assurance Level	Evidence of Assurance	Actions	Action Actual Start Date	Latest Note	Assigned To
SR01 Workforce skills and knowledge	Likelihood	Recruitment levels Training needs analysis Competence framework Increased requests for partnership working	Work is not completed to expected quality standards Loss of key staff Increase in complaints Poor or inconsistent services Projects not delivered on time / budget /quality Unrealistic workloads leading to absence/increased sickness levels. Failure to attract, recruit and retain suitable staff Loss of knowledge and expertise	Key specialist roles identified and service resilience plan in place Up to date policies accessible to officers	based on role (legal requirement) or single manning role and service resilience plan in place e.g. Identification and assessment of role(s) Detailed work instructions. Up to date work plan for specialist role Centralised record retention. All Officers are made aware of Councils Policies with specific emphasis given to those relevant to	_	Quarterly performance reporting to Strategic Management Board, Personnel and Development Committee.	Progress Programme Board to consider the need to identify key specialist roles. NB - link to SR08 - Unitary District Council Status (Pre- Structural Change Order) The 5 Councils have introduced the Vacancy Management Protocol	10-Dec-2018	Mike Howard 25-Jan-2019. The Head of HR, ICT & SSS has confirmed the content of this risk for the purpose of Quarter 3 monitoring.	Head of HR, ICT and SSS
				Service based performance management information	service provision. Services have developed robust and reliable performance management system(s) that reflects the activities of the respective service including complaints, comments and FOI requests. Performance system to include meaningful comparison to external bench marking			Locally, may need to consider retention payments to key post holders (need to define key post holders): Back filling posts as necessary to support the delivery of customer services			

Risk	Current Risk	Key risk indicators	Consequences	Internal Controls	Supporting Description Internal Controls	Assurance Level	Evidence of Assurance	Actions	Action Actual Start Date	Latest Note	Assigned To
				Periodic formal quality reviews undertaken by Management	information (where available). System of periodic quality reviews are in place that allows for compliance with operational procedures, data integrity and accuracy.						
				Procedures reflect application of policy							
SR02 External and internal regulatory framework (Brexit)	pact act	 Strategic Risk Register action plan slippage. Legal challenges to decisions. Issues from annual assurance review not being addressed or slippage 	 Wrong or illegal decisions taken (Ultra Vires) Complaints (justifiable) Reputational damage Breach of legislation 	Published contract register used for contract renewal	Contract register is used to identify contracts that are due for renewal. This should allow the Contract Manager sufficient time to prepare a project plan.	Level 2 - Internal Governance (Risk / Performance Management)	Complaint monitoring and reporting to SMB quarterly			Mike Howard 25-Jan- 2019 The Head of DLP has confirmed the content of the risk entry for the purpose of Quarter 3 monitoring.	Head of DLP
Page 5	slippage. • Audit recommendations not being implemented,		Legal Service support	 All Cabinet reports are reviewed by the Monitoring Officer. Legal advice is provided /sought at Strategic Management Board meetings. Legal Services provide advice to Services as regards decision making. 							
SR03 Reduction in Government funding	Tikelihood	 External Networks and External Advisor Memberships highlighting emerging issues / policy changes Relationship Manager with Valuation Office Service Performance 	 Loss / reduction of discretionary services Reduction in service level for statutory services Reputational damage Inability to realise corporate plan/priorities / transformation programme. 	Monthly budgetary control reports Service based performance management information	Monthly budgetary control process are in place and complied with, enabling accurate financial reporting of expenditure against planned contractual delivery. Services have developed robust and reliable performance	Level 3 - Independent Assurance (Internal Audits, HSE)	External Audit through statutory assessment of value for money (VFM). Quarterly budget reports to Cabinet. Monthly budget reports to Strategic Management Board Budget report presented to Full Council			Mike Howard 25-Jan- 2019 The Head of Finance and Commercial has confirmed the content of this risk entry for the purpose of Quarter 3 monitoring.	Head of Finance and Commercial

Risk	Current Risk	Key risk indicators	Consequences	Internal Controls	Supporting Description Internal Controls	Assurance Level	Evidence of Assurance	Actions	Action Actual Start Date	Latest Note	Assigned To
		or lower usage			management system(s) that reflects the activities of the respective service including complaints, comments and FOI requests. Performance system to include meaningful comparison to external bench marking information		Audit Committee report on Statement of Accounts and Value for Money Opinion.				
Page 6					(where available). Compilation of Medium Term Financial Plan, which is based on the financial implications of the Corporate Plan, reviewed annually by Full Council, enabling Members to make informed amendments to the Corporate Plan based on the limitations of any funding constraints.						
					Financial forecasting and scenario planning Application of the Price Is Right guidance, led by the Finance Team to ensure that Services review their income streams as part of budget setting process.						
				Assessed budget volatility	Head of Service submission of a business justification for seeking release of						

Risk	Current Risk	Key risk indicators	Consequences		Supporting Description Internal Controls		Evidence of Assurance	Actions	Action Actual Start Date	Latest Note	Assigned To
					additional funding In year budget volatility managed through the use of Contingency and Equalisation Funds reported to Cabinet if it occurs on quarterly basis. Reserves Policy in place subject to annual review by Section 151 Officer and reported as part of the Budget Setting process. Subject to review by External Audit.						
SR05 Partnership working Page 7	Likelihood	Issues arising from Member/officer involvement with partners/partnerships. Breakdown of working relationships. Wycombe District issues not being adequately addressed.	for funding streams (LEP) Restricted range of services offered Failure to realise economies of scale Duplication of work Impact on public perception of the wider public sector	Periodic formal quality reviews undertaken by Management	Contract meetings are held in line with contractual agreement. Agenda and minutes taken to ensure contractual terms and conditions are being achieved. System of periodic quality reviews are in place that allows for compliance with operational procedures, data integrity and accuracy.	Operational Management (Policies & Procedures)	Strategic Management Board receive periodic updates on partnership relations			Mike Howard 25-Jan-2019 The Head of DLP has confirmed the content of this risk entry for the purpose of Quarter 3 monitoring. For Quarter 4, the Head of DLP is considering the relevance of this risk as part of the Councils SRR given the number and range of partnerships that the Council participates in.	Head of DLP
				Partnership oversight	Compliance with a Partnership protocol (or similar) with has clearly defined governance arrangements that provide clear oversight as to the number of partnerships and the relationship from inception / formation, through delivery and						

Risk	Current Risk	Key risk indicators	Consequences		Supporting Description Internal Controls	Assurance Level	Evidence of Assurance	Actions	Action Actual Start Date	Latest Note	Assigned To
SR06 Investment in infrastructure Page 8	Likelihood 16	Corporate Plan objectives are not delivered due to lack of funding. Schemes are put on hold, pending determination, source and release of funding. Annual Report provides information as regards the success in delivering the Corporate Plan.	lead to issues as regards both the short and long term sustainability of the local community and economy. • Deterioration of the Councils image and reputation as a place to live, work, visit and invest in. • Restriction in economic growth could impact on service provision & funding through reduced business rate growth. • Programmes /Project are funded by external borrowing rather than internal funds.	quality reviews undertaken by Management Established Programme Boards Quarterly report to SMB	eventual closure of the partnership. Governance arrangements - will also have due regard to the contribution from the Council in terms of £ and officer time. System of periodic quality reviews are in place that allows for compliance with operational procedures, data integrity and accuracy. Established programme boards are in place that enables the progress of individual projects to be reported upon Quarterly report to SMB providing information as regards level of sickness absence and staff turnover compared to National /Sector benchmark(s). Used to monitor "health" of the Council. Head of Service submission of a business justification for seeking release of additional funding? In year budget volatility managed through the use of Contingency and Equalisation Funds reported to Cabinet if it					Mike Howard 25-Jan-2019. The Corporate Director has confirmed the content of this risk entry for the purpose of Quarter 3 monitoring. In addition, from January 2019, the number of programme boards has been reduced from four formerly Place & People, Prosperity, Princes Risborough and Progress to two programme boards - 2 Progress and Place & People. In parallel, the embedding of project management software will strengthen both programme and project management arrangements.	Corporate Director;

Risk	Current Risk	Key risk indicators	Consequences	Internal Controls	Supporting Description Internal Controls	Assurance Level	Evidence of Assurance		Action Actual Start Date	Latest Note	Assigned To
SR07 Data and	12	Internal Information	Internal Information	Internal	occurs on quarterly basis. Reserves Policy in place subject to annual review by Section 151 Officer and reported as part of the Budget Setting process. Subject to review by External Audit.	Level 2 - Internal		Implementation and	02-Apr-2018	Mike Howard 25-Jan-	Head of DLP;
Page 9	Likelihood	Service Level Agreement (SLA) • Performance of implementing service requests / projects within SLA and /or agreed timescales • Activity reports for Phishing and Malware	Criminal proceedings against the Council and individuals. Reputational damage Complaints leading to ICO findings against the Council. Complaints leading to Ombudsman	Information Governance (Suite of Internal Controls)	Document Management approach across the Council Regular training for staff Information asset owners in each Service area. Appointed Senior Information Risk Owner (SIRO)-Head of Democratic, Legal and Policy Services. Annual certification process (information asset register). Up to date IT and resilience tools Responses from Annual Assurance Statement from each Head of Service. Annual Governance Statement with improvement actions. Council's complaints system. Designation of Statutory Officers. Information	Governance (Risk / Performance Management)		Overarching Data Sharing Agreement to reflect General Data Protection Requirements (GDPR)	17-Jan-2019 29-Jan-2019	In relation to Internal Information Governance, the Head of DLP has confirmed the content of the risk entry for the purpose of quarter 3 monitoring. In relation to External IT governance, the Head of HR, ICT & SSS has confirmed the content of the risk entry for the purpose of quarter 3 monitoring.	ICT and SSS Head of HR

Risk	Current Risk	Key risk indicators	Consequences	Internal Controls	Supporting Description Internal Controls	Assurance Level	Evidence of Assurance	Actions	Action Actual Start Date	Latest Note	Assigned To
					Governance Strategy. • Periodic review of Contract Standing Orders and Financial Regulations.						
Page 10				External Information Governance (Suite of Internal Controls)	• Encrypted			Develop and implement a cyber security action plan	04-Jan-2019		

Risk	Current Risk	Key risk indicators	Consequences	Internal Controls	Supporting Description Internal Controls	Evidence of Assurance	Action Actual Start Date	Latest Note	Assigned To
Page 11					regular data back- up routines; data held off-site; • Majority of hardware located off-site in provider data centres and use of virtual technologies means services are less location dependent; • Formal monthly performance service review meetings; • Contractual penalties in the event of below contractual standard of services; • Periodic inventory checks • Secure disposal of redundant equipment				
SR08 Unitary District Council Status (Pre Structural Change Order)	20 pedili Likelihood	internal control weaknesses. • Increase in reported and upheld complaints.	Organisational - Communications • Scheduled meetings/workshops/b riefings/newsletter not attended/produced, resulting in lack of awareness as regards Councils position. Organisational - Staffing • Lack of staff capacity to deliver core business, resulting in services not being delivered • Key officer commitment to supporting UDC preparation begins to conflict with business as usual requirements. • Key officers starting to move to the new	service resilience plan in place	Key specialist roles identified, based on role (legal requirement) or single manning role and service resilience plan in place e.g. Identification and assessment of role(s) Detailed work instructions. Up to date work plan for specialist role Centralised record retention. All Officers are made aware of Councils Policies	Communications		Mike Howard 25-Jan- 2019 Head of DLP has confirmed the content of this risk entry for the purpose of quarter 3 monitoring.	Head of DLP

Risk	Current Risk	Key risk indicators	Consequences		Supporting Description Internal Controls	Assurance Level	Evidence of Assurance	Actions	Action Actual Start Date	Latest Note	Assigned To
			Authority (through direct appointment or secondment opportunity)		with specific emphasis given to those relevant to service provision.		mandated (by Service or an exception basis by HR)				
			phased	Procedures reflect application of policy			Recruitment protocol established and disseminated				
		attract and recruit staff (replacing established and filling newly identified posts). • During period of		Service continuity plans is in place, known to staff, periodically tested.	across the Council. • Service resilience plans in place.						
Page 12			phased implementation there is an increased expectation on the contribution that individual officers can make, with the potential of breaching contractual employment terms/ working time directive. Organisational - Governance	SMB	Quarterly report to SMB providing information as regards level of sickness absence and staff turnover compared to National /Sector benchmark(s). Used to monitor "health" of the Council. 1. Detailed insight as the validity, content and volume of service based customer complaints.						
			Organisational - Financial • Wider public "default" on making				Organisational - Finance				
			payments to the Council for goods and services provided. • Increase in the risk that individuals and organisations may								

take the opportunity to	Assigned To
try and defraud the Council during a period of un- presidented change. Organisational - Information Increase in the provision of requests for information without reference to data sharing protocols, hierarchy of consent /agreement.	