



Haringey Council

Agenda item:

Audit Committee

On 24 June 2010

Report Title: Corporate Risk Register

Report authorised by: Director of Corporate Resources

J. Paine 16/6/10

Report of and Contact Officer: Anne Woods, Head of Audit and Risk Management

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Wards(s) affected: All

Report for: Non-key decision

1. Purpose of the report

1.1 To provide a copy of the latest Corporate Risk Register for review.

1.2 To report on business units' and departments' actions to monitor, review and update risk registers in compliance with the Council's risk management strategy.

2. State link(s) with Council Plan Priorities and actions and/or other Strategies:

2.1 Audit and Risk Management contribute to the Council priority to deliver excellent, customer focused, cost effective services by ensuring that the Council's risk management framework is in place and operating effectively. Internal audit reviews key risk registers, the controls in place to manage the identified risks. Recommendations for improvement are made, where appropriate.

3. Recommendations

3.1 The Audit Committee reviews the current version of the corporate risk register, which has been prepared in accordance with the Council's risk management strategy.

3.2 The Audit Committee considers whether any further risks should be included in the corporate risk register at this time.

4. Reason for recommendation(s)

4.1 The Audit Committee is responsible for approving the Council's Risk Management Policy and Strategy as part of its Terms of Reference. In order to facilitate this, and

provide information on its implementation across the Council, progress reports are provided on a regular basis for review by the Audit Committee.

5. Other options considered

5.1 Not applicable

6. Summary

6.1 The internal audit service makes a significant contribution to ensuring the Council's risk management framework is implemented across all departments and business units of the Council.

6.2 This report provides an updated corporate risk register for review and confirms the current status in respect of business units and departments' compliance with the corporate risk management strategy.

7. Head of Legal Services Comments

7.1 The Head of Legal Services has been consulted in the preparation of this report, and advises that there are no specific legal implications which arise out of the report, to include its recommendations.

8. Chief Financial Officer Comments

8.1 As stated in paragraph 12.1, there are no direct financial implications from this report as the work associated with implementing, updating and monitoring the Council's various risk registers is included within service budgets.

8.2 Clearly, the risks themselves highlighted within Appendix 1 could have financial implications if the risk materialises but, should this occur, the impact, mitigation and reporting of these would normally be addressed in a separate report. Any significant implications would be reported to the Audit Committee as part of the agreed Terms of Reference.

9. Head of Procurement Comments

9.1 Not applicable

10. Equalities and Community Cohesion Comments

10.1 This report deals with how risks are managed across all areas of the Council, which have an impact on various parts of the community. Improvements in managing risks and controls will therefore improve services the Council provides to all sections of the community.

11. Consultation

11.1 No external consultation was required or undertaken in the production of this report. Consultation is undertaken with respective service managers, Assistant Directors, Directors and Assistant Chief Executives when risk registers are reviewed and audit reports produced.

12. Service Financial Comments

12.1 There are no direct financial implications arising from this report. The work within internal audit to implement the Council's risk management framework is part of the contract with Deloitte and Touche which was awarded following a competitive tendering exercise in compliance with EU regulations from 1 April 2007. The costs of this contract and managing the corporate risk management policy are contained and managed within the Audit and Risk Management revenue budget. Service departments manage risks as part of the routine work to achieve their business plans and costs are contained within their revenue budgets.

13. Use of appendices

13.1 Appendix 1 – Corporate Risk Register May 2010.

14. Local Government (Access to Information) Act 1985

14.1 For access to the background papers or any further information please contact Anne Woods on 0208 489 5973.

15. Background

15.1 The Council's Risk Management strategy is reviewed on an annual basis to ensure that it reflects current operational requirements and best practice. The latest version was approved by the Audit Committee at its meeting on 25 March 2010.

15.2 The Chair of the Audit Committee requested that a report on risk management and compliance with the Council's strategy be presented to the Committee on a quarterly basis. The review and testing of risk registers forms part of the 2010/11 annual audit plan which was approved at the Audit Committee meeting on 25 March 2010. This is an ongoing process to ensure the key controls to manage identified risks are effective and operate as intended.

15.2 Risk registers for all business units, departments and the corporate register are all integrated into the Council's performance management system (Covalent) and managed by the respective business units.

16. Risk Registers

- 16.1 Risk registers for business units and directorates are reviewed in accordance with the Council's risk management strategy. As at 31 May 2010, all business units, departmental and corporate risk registers complied with the risk management strategy and had been reviewed in line with the quarterly reporting deadlines.
- 16.2 Covalent automatically sends email reminders to the business unit representatives when updates are due and the system will provide an audit trail to allow for monitoring and follow up by Internal Audit. Internal Audit also provides resources (as part of the annual audit plan) to assist business units on an ongoing basis and to ensure that all actions and updates are being done in accordance with the relevant timescales.
- 16.6 The corporate risk register is reviewed on a quarterly basis by the Chief Executive's Management Board and reported annually to the Audit Committee.






Haringey Council

Corporate Risk Register

Generated on: 16 June 2010

Risk Code	Risk Title	Internal Controls	Risk and Control Ownership	Date of last review	Residual Impact	Residual Likelihood	Residual Risk Score	RAG status	Further Action Code	Further Action(s)	Progress (% complete)	Further Action Complete Date
CEMB_R001	Poor national and local economic conditions impact adversely on Haringey Council, including an inability to deliver services due to increased demand	General contingency in budgets to help deal with pressures arising from economic downturn The Community Care Strategy's core objective is to reduce commissioning of residential care and reinvest revenue into improved services in the community. Demand led forecasts are employed by services in order to effectively profile budgets to meet demand. Contingency plans in place in order to deal with cases of service demand above forecast levels. 2nd phase of the JSNA completed. Maintaining close working relationships with Haringey Teaching PCT. ACCS Common Commissioning Framework sets out principles of joint working and commissioning. SCHS action plans address the market conditions for leases and continuous monitoring of supply and demand of housing.	Risk Owner: Chief Executive, Control - Corporate Resources; Chief Financial Officer; Director - ACCS	25 May 2010	6	6	36	●	AC02_R006_F001 AC02_R010_F001 CEMB_R001_F0006 CEMB_R001_F0005	Fully integrating the budget and business planning processes between LBH (ACCS) and HTPCT (proposal to be ready 31/3/2011). Corporate Policy & Performance are procuring a web based Local Information System (LIS) to enable sharing across the HSP. This data will include Health, Housing, crime, population and deprivation data. VFM will be achieved using the COUNT principle. Assessment and evaluations of any reductions in Area Based Grant/other grants and impact on service delivery being completed Specific needs mapping projects being undertaken where there are gaps in info and knowledge. Older Peoples Needs Analysis phase 1 complete, phase 2 due Summer 2010. Other client group specific needs assessments being undertaken or planned (ref: AC02_R010)	50 % 10 % 0 % 50 %	30 Sep 2010 31 Mar 2011 31 Jul 2010 31 Aug 2010


CEMB_R_002	An inability to provide accurate and robust data to support external corporate and departmental assessments.	New corporate performance management system is in place to manage PIs, business plans, and risks. Corporate Performance Management team established with responsibility for ensuring data quality and supporting corporate and directorate assessments. Regular reports to CEMB and Cabinet on performance issues. Ongoing data quality audits based on risk. Ongoing training on Covalent for all relevant staff. Data quality workshops undertaken.	Risk Owner: ACE - PPP&C; Control Owner: ACE - PPP&C; Chief Financial Officer	25 May 2010	7	3	21		CEMB_R00_2_F001 CEMB_R00_2_F002	Ensure performance management processes fully embedded for PIs Embedding of the Quality Assurance Framework in Adults and Childrens services	75 % 75 %	31 Mar 2011 30 Sep 2010
CEMB_R_004	Inadequate financial management and reductions in specific and general grant fund allocations are greater than expected impacting on the Council's ability to deliver services.	Council-wide efficiency programme in place which has reviewed and updated to take account of existing plans and new areas of work. Programme of Value for Money and service specific reviews ongoing during 2010 to identify further savings. Strategic functions reviews and support services reviews taking place during 2010/11. Budget Holders and Directors monitor their budgets on an ongoing basis with support from Heads of Finance. Formal monthly budget monitoring process with Finance and Performance report submitted to Cabinet. Three year financial strategy in place with regular reports to Members re Capital and Revenue budgets. Management of projects within a formal project management framework. Focused and urgent activity to reduce the cost of Emergency Accommodation by re-negotiation, disposal and replacement. Housing Subsidy Deficit Action Plan in place and Housing Improvement Plan in place and monitored on fortnightly basis. Establishment of Safeguarding & Strategic Services structure to embed controls and management oversight. Service departments undertaking budget review sessions.	Risk Owner: Chief Financial Officer. Control Owner: All Directors and ACE's	25 May 2010	9	6	54		CEMB_R00_4_F001 CEMB_R00_4_F002 CEMB_R00_4_F004 CEMB_R00_4_F006 CEMB_R00_4_F007 CEMB_R00_4_F008 CEMB_R00_4_F009 CEMB_R00_4_F010 CEMB_R00_4_F012 CEMB_R00_4_F013	Four strategic commissioning pilots to inform future roll out to secure increased value for money - including Parking and Regulatory Services. Action plan from service department budget reviews to be agreed and monitored to ensure outcomes achieved Support Functions Review to be completed and action plan for implementation agreed AD for Adult Services and Commissioning (ACCS) will authorise all Adult Services & Commissioning spend Work ongoing to ensure appropriate links across ACCS and to support controls in place to achieve VFM targets. Develop market management strategy to ensure Vfm services. All budget holders & 4th tier managers in ACCS to receive budget management training. Safeguarding & Strategic Services Division to identify linked functions between divisions in ACCS for rationalisation and integration. VFM review of Learning Disability Services is complete. ACCS considering VFM review of Mental Health Services. This will be progressed shortly. AD-S&CHS to prioritise reducing stock priced above future subsidy levels to minimise impact on General Fund	0 % 0 % 40 % 0 % 100 % 50 % 80 % 60 % 50 % 0 %	31 Jul 2010 31 Jul 2010 31 Mar 2011 31 Mar 2011 31 Mar 2011 31 Mar 2011 31 Mar 2011 31 Mar 2011 31 Mar 2011 31 Jul 2010






CEMB_R_005a	Lack of safety and well-being for clients within child protection services.	Joint Area Review (JAR) action plan being monitored and reported on a regular basis by CYPs and central government review team. Safeguarding training implemented. Mock inspection completed May 2010 - positive feedback on First Response performance received.	Risk Owner: Director - CYPs. Control Owner: Deputy Director Children & Families	25 May 2010	8	4	32		CEMB_R005_F002	Ensure that the recommendations in the JAR action plan are fully implemented and that governance and control issues are fully incorporated and embedded into operational working practices.	50 %	28 Feb 2011
CEMB_R_005b	Lack of safety and well-being for clients within adult safeguarding services.	Action Plan in place and monitored regularly following annual external inspection of Adult services. Safeguarding training implemented with records of attendance at training courses maintained. Deprivation of Liberty Safeguards (DoLS) has been established as standard practice.	Risk Owner: Director - ACCS. Control Owner: AD Safeguarding & Strategic Services - ACCS.	25 May 2010	6	2	12		AC05_R014_F001	All Service Managers have been instructed by the Assistant Director Adults to ensure all front line staff are trained in Safeguarding Adults.	95 %	31 Jul 2010
CEMB_R_005c	Lack of safety and well-being for staff.	Risk Management strategy in place with links to health and safety requirements. Corporate Health & Safety audits undertaken. Risk assessments undertaken. Compulsory DSE training for staff who use computer equipment. Home Safety advice provided by the crime reduction team. Directorate Safety Liaison Officers in place to implement H&S strategies/objectives.	Risk Owner: Chief Executive. Control Owner: All Directors and ACE's	25 May 2010	6	4	24		AC05_R014_F003 AC02_R003_F001	Establishment of new Safeguarding & DoLS Team Structure by 1st January 2010- posts have been advertised and team is to move to 2nd Floor Cumberland Road All establishments (including Sheltered Housing) to move to monthly Health & Safety Audits as currently undertaken by all residential homes.	80 %	31 Mar 2011

CEMB_R 006	Staffing issues impact on the ability to deliver high quality services	Posts filled using agreed Council procedures. Regular one to ones in place for all staff. Internal communications ensure that team briefing cascades to all staff. Management development programme in place for all managers/supervisors and various staff development programmes in place e.g. Springboard. Agreed performance appraisal process in place and monitored to ensure compliance at a corporate level. Corporate HR Policies & procedures in place. HR statistics produced and reviewed on a monthly basis. Exit interviews undertaken. People Plan and annual staff development programme in place and monitored for all Business Units. Corporate training programmes in place to recruit and develop new staff. UE.DMT sub-group (People Strategy) in place and addressing key issues, including an engagement strategy for staff across UE.	Risk Owner: ACE - P&OD. Control Owner: All Directors and ACE's	25 May 2010	6	6	6	36	AC03_R003_F001	Local Working Agreements (one delivered, one in progress), (AC01 B09 OB 3102 + AC01 B09 OB 3103)	10 %	30 Sep 2010
CEMB_R 007	Failure of key projects, e.g. Building Schools for the Future impact adversely on the council's overall objectives.	Delivery and monitoring of cross cutting strategic partnership programmes. Haringeley Forward programme in place and monitored by CEMB and Members on a regular basis. Specific Project Boards e.g. BSF in place and reports to CEMB and Members on a regular basis. Project Management arrangements in place which are monitored and reported on on a regular basis including key milestones. Effective programme delivery arrangements in place for Greenest Borough Partnership.	Risk Owner: Director - CYPs; Director Urban Environment. Control Owner: Deputy Director BSD - CYPs; AD Strategic Housing Services - UE	25 May 2010	6	2	12	CEMB_R007_F001	Staffing gaps identified at middle management level filled by temporary staff to prepare adequately for re inspection. Posts advertised and recruited to. Review and increase intake schemes e.g. apprenticeship programme and social care graduates. Ensure programme management arrangements for Better Places Partnership are fully implemented and aligned to Greenest Borough Strategy	50 %	31 Dec 2010	

CEMB_R 008	Lack of or reduced resources (financial and/or staffing) available to deliver the council's capital programme leading to a risk of non-delivery of the programme or achievement of Council objectives	Formal monthly budget monitoring process in place, with Finance and Performance report submitted to Cabinet. Stream Board monitoring (for individual projects). Capital Strategy in place and monitored on regular basis. The Joint Leadership Team will monitor the progress of well being priorities and report to the Well-Being Partnership Board. The effectiveness of the sub groups are monitored by the WBPB. Specific projects being monitored in Urban Environment (PRE and SCHS) in relations to the impact of wider economic developments	Risk Owner: Chief Financial Officer. All Directors and ACE's	25 May 2010	5	5	25		CEMB_R00 9_F001	Regular monitoring, review and prioritisation of action via UE DMT and relevant project/programme/partnership board, i.e. Housing Improvement Board, Better Haringey, and Better Places Partnership	50 %	31 Mar 2011
CEMB_R 009	Failure to meet statutory and legal requirements and targets	Council Constitution including scheme of delegation and finance/contract procedure rules in place and reviewed regularly by officers and Members. Data Quality Strategy in place and monitored. Random sample audits undertaken by internal and external audit and ongoing review by PPP&C. Regular reports on compliance with national and local performance measures to CEMB and Members. Procedure notes in place for key financial and other systems. Business Plans identify actions to meet targets. Performance improvement plans, Service Action Plan for Inspection Improvement and Balanced Scorecards highlight areas of risk in ACCS with monthly review. Joint Leadership Team (LBH, PCT, Vol Sector groups) now formed.	Risk Owner: ACE - PPP&C. Control Owner: All Directors and ACE's	25 May 2010	7	4	28					
CEMB_R 010	Failure of corporate I.T. systems, e.g. SAP.	Business process in place, including system disaster recovery and business continuity arrangements. Disaster recovery and business continuity plans in place and tested for all key corporate systems. Service review meetings with IT providers.	Risk Owner: Director - Corporate Resources. Control Owner: Head of IT Services, Head of Systems Development ACCS	25 May 2010	7	4	28					

CEMB_R 011	Failure to maximise and promote partnership working opportunities which may impact on the council's reputation with external organisations and different business sectors.	Establishment and development of key relationships with external organisations and business sectors. Code of Governance and annual governance statement for the HSP implemented. Community Engagement Forum for the HSP in place. Executive level performance management group for HSP in place. Ongoing work with statutory and voluntary/ community sector partners, e.g. the Police, LDA, Employment Service, Small Business Service and Health agencies.	Risk Owner: ACE - PPP&C. Control Owner: Corporate Head of Performance & Policy, Director ACCS	25 May 2010	6	5	30		CEMB_R01_1_F001 CEMB_R01_1_F002	Consider how the HSP could be used to promote positive aspects of the Haringey area Health Communities Sub-Group to be formed - agreement in principle reached (ref: AC02_R014)	50 % 50 %	31 Mar 2011 31 Mar 2011
CEMB_R 012	Council policies and procedures fail to manage the risk of fraud appropriately	Anti-fraud and corruption strategy, whistle-blowing policy and fraud response plan in place and reviewed on a regular basis. Programme of pro-active fraud work in internal audit and Housing Benefit plans. Risk of fraud included in departmental risk registers. Fraud awareness briefings provided on a regular basis in Team Brief and Smart Talk. Clear link between internal audit plans and the outcome of fraud work. Council participates in the National Fraud Initiative, positive feedback received from Audit Commission on work completed in 2009.	Risk Owner: Director - Corporate Resources. Control Owner:	25 May 2010	9	4	36		CEMB_R01_2_F001 CEMB_R01_2_F002	Publish details of successful fraud investigations on a regular basis during 2009/10 Scheme of delegation to be maintained/updated for ACCS (ref: AC05_R010)	80 % 80 %	31 Mar 2011 31 Mar 2011
CEMB_R 013	Failure to prepare appropriately for a flu pandemic, increasing risks to residents and staff.	Corporate contingency plan is in place, which complies with statutory requirements (Civil Contingencies Act), and has been approved by CEMB. Risk & Emergency Planning Group in place and meeting on a regular basis to identify and manage key risks and issues. Critical services to be maintained during a pandemic have been identified and plans are in place to ensure continuity of service. Haringey PCT Flu Plan is approved and in place. BCP's in place for all business units. Vaccination programme in place for key/frontline staff. ACCS business continuity and emergency planning sub-group meet bi-annually.	Risk Owner: Head of Safer Communities. Control Owner: Emergency Planning & Business Continuity Manager	16 Jun 2010	7	2	14		AC01_R001_F002 PP02_R009_F002	National emergency test held on 25th March (Exercise Safer City) with scenario of flooding in Ferry Lane area. Action from this is to review the cascade of information across ACCS from BECC to appropriate AD's and relevant officers and back. BU's to ensure suppliers have BCPs.	100 % 0 %	31 Mar 2011 30 Sep 2010

CEMB_R 014	Failure to promote the Council's achievements successfully and enhance its reputation locally and nationally	Managing the implementation of the communications strategy and other communication campaigns; Monitoring and responding to national and local media; Addressing the recommendations within CAA and other inspections.	Risk Owner: ACE - PPP&C. Control Owner: Head of Communications & Consultation	25 May 2010	8	6	48		CEMB_R01 4_F001	Ensure that positive media coverage is achieved across all Council departments	50 %	31 Mar 2011
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Risk Status	
	Alert
	High Risk
	Warning
	OK
	Unknown