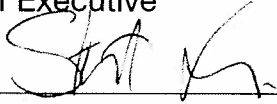




**Haringey** Council

<b>Report for:</b>	Corporate Committee 28 June 2012	<b>Item number</b>	
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<b>Title:</b>	Corporate Risk Register
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<b>Report authorised by :</b>	Assistant Chief Executive 
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<b>Lead Officer:</b>	Anne Woods, Head of Audit and Risk Management Tel: 020 8489 5973 Email: <a href="mailto:anne.woods@haringey.gov.uk">anne.woods@haringey.gov.uk</a>
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<b>Ward(s) affected: ALL</b>	<b>Report for: Non-Key Decision</b>
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**1. Describe the issue under consideration**

1.1 In accordance with recommended best practice, a copy of the current corporate risk register is provided for review by Members. An update on the Corporate Risk Management Policy and Strategy is also provided.

1.2 The Corporate 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, reports are provided to members on a regular basis.

**2. Cabinet Member Introduction**

2.1 Not applicable

**3. Recommendations**

3.1 That the Corporate Committee reviews the current version of the Corporate risk register and provides comments as appropriate and notes the current position regarding the corporate Risk Management Policy and Strategy.

**4. Other options considered**

4.1 Not applicable.

**5. Background information**



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5.1 The 2005 CIPFA publication 'Audit Committees – Practical Guidance for Local Authorities' recommends, as best practice, that an authority's audit committee consider the effectiveness of the Council's risk management arrangements. In addition, the Institute of Public Finance (IPF) toolkit, which provides a framework for assessing the effectiveness of audit committees, recommends that the committee should review the Council's corporate risk register on an annual basis. The responsibilities of the audit committee are contained within the Council's Corporate Committee.

5.2 In order to comply with CIPFA and IPF best practice recommendations, risk management is included within the Corporate Committee's terms of reference. In order to demonstrate that the terms of reference are fulfilled, the Council's Risk Management strategy and policy is reviewed on an annual basis to ensure that it reflects current operational requirements and best practice. The corporate risk register is also presented for review by Members on an annual basis.

5.3 The risk management policy was last reviewed and approved by the Corporate Committee at its meeting on 21 July 2011. At the same meeting, the corporate risk register was presented for review.

### **6. Risk Registers**

6.1 The Council uses an electronic system (Covalent) to record the risks faced by business units, departments and at a corporate level in a consistent manner. The output from Covalent is in the form of risk registers for business units, directorates and at the corporate level.

6.2 Covalent automatically sends email reminders to the business unit representatives when updates are due and the system provides an audit trail to allow for monitoring and follow up by Internal Audit. Internal Audit also include resources (as part of the annual internal audit plan) to review and test the effectiveness of key controls to manage identified risks and to ensure that all actions and updates are being done in accordance with the relevant timescales. The results of these audit reviews are reported separately to Members as part of the quarterly progress reports on internal audit work.

6.3 The corporate risk register is reviewed on a quarterly basis by the Chief Executive's Management Board. The latest review was undertaken at the CEMB meeting on 24 April 2012 and this version of the corporate risk register is attached as Appendix 1 to this report.

### **7. Risk Management Policy and Strategy**

7.1 The corporate risk management policy and strategy brings together all key processes involving risk, including business planning, health and safety, business continuity planning, emergency planning, performance management and project management. A corporate Risk and Emergency Planning Steering Group is in place, with representatives from all



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directorates, which reviews key risk issues on a regular basis and ensures implementation of the risk management policy and strategy across the Council.

7.2 The risk management strategy and policy has been reviewed to ensure that it reflects current operational practices and best practice requirements. The policy was updated extensively in 2011 to take account of organisational changes. No further changes are recommended at present. The policy is listed on the Council's website as part of Strategies and Policies: Haringey Council and available on the Council's intranet.

### **8. Comments of the Chief Financial Officer and Financial Implications**

8.1 There are no direct financial implications arising out of this report as the work associated with updating and monitoring the Council's various risk registers is included within service revenue budgets.

8.2 The risks included in the risk registers could have significant financial implications for the Council if they were to materialise, therefore regular review and monitoring of existing and emerging risks helps to mitigate any potential implications.

### **9. Legal Implications**

9.1 The Head of Legal Services has been consulted in the preparation of this report, and comments that there are no direct legal implications which arise out of it.

### **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. Head of Procurement Comments**

11.1 Not applicable.

### **12. Policy Implications**

12.1 There are no direct implications for the Council's existing policies, priorities and strategies. However, ensuring that the Council has effective risk management arrangements in place and taking appropriate action to mitigate identified risks where required will assist the Council to use its available resources more effectively.

### **13. Use of Appendices**

13.1 Appendix A – corporate risk register - May 2012







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## CEMB corporate risk register (Including inherent risks)

Generated on: 09 May 2012



Risk Code	Risk Title	Internal Controls	Risk and Control Ownership	Date of last review	Inherent Risk Score	Residual Impact	Residual Likelihood	Residual Risk Score	RAG status	Further Action Code	Further Action(s)	Progress (% complete)	Further Action Completed on Date
CEMB... R001	Poor national and local economic conditions impact adversely on Haringey Council, including an inability to deliver services due to increased demand	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. Rethinking Haringey programme in place, addressing key service changes and ways of working more effectively at a corporate level via e.g. commissioning and procurement activities. Close links with partner organisations in health and other services to address key/high areas of demand e.g. housing, adult care. Review taking place within Housing Services regarding options under the Welfare Reform Act. Programme of reviews in place to monitor looked after children demand and expenditure. Implementation of a local Council Tax scheme is being planned in line with statutory and local requirements	Risk Owner: Chief Executive. Control Owner: Director - CR; Director - A&HS; Director CS	03-May-2012	56	6	6	36	●	AH02_R0 04_F001	Engaging with outgoing PCT and GP collaboratives re joint commissioning opportunities and looking at opportunities for the Council to commission on behalf of Gp's.	100 %	31-Mar-2013


CEMB_R002	The Council does not perform or respond to required local and national performance standards, or policy changes, which results in failing to deliver the desired outcomes for the borough.	Regular briefings on central government policy updates and changes are provided to CEMB, senior managers and Members. New outcomes based corporate performance framework is linked to the Council's priorities and will take account of national frameworks e.g. OFSTED, adult social care. Regular reports to CEMB and Cabinet on performance issues. Ongoing data quality audits, based on risk, including a review of performance data to ensure its continued appropriateness. Local Code of Corporate Governance is in place which links key corporate and service policies and strategies to required CIPFA/SOLACE governance framework. Increased capacity put in place to support schools.	Risk Owner: ACE - P&OD. Control Owner: All Directors and ACE - P&OD; Head of Policy, Intelligence and Partnerships	03-May-2012	32	7	3	21		AH02_R007_F004 CEMB_R002_F001 CEMB_R002_F002	Production of Adult Services Quality Assurance Framework Ensure performance framework processes are fully embedded across the Council by 31 March 2012 Completion of Annual Governance Statement action plan	100 % 50 % 90 %	31-Mar-2013 31-Mar-2013 31-Mar-2013
CEMB_R004	The Council fails to identify and manage the required reductions in expenditure and fails to deliver its agreed budget	The Council's 2011/12 savings programme is in place and has successfully delivered £4.1m of savings in 2011/12 and is on target to meet the planned £84m by the end of 2013/14. Future years planning for 2013/14 and beyond has commenced in order to mitigate risks in the future. Budget Holders and Directors monitor their budgets on an ongoing basis with support from Heads of Finance, this monitoring will include specific savings programme budget reductions in 2012/13 and will form part of the formal monthly budget monitoring process with subsequent reports submitted to Cabinet. The Medium Term Financial Plan and strategy is in place with regular reports to Members re: Capital and Revenue budgets.	Risk Owner: Director - CR. Control Owner: All Directors and ACE - P&OD	03-May-2012	63	9	5	45		CEMB_R004_F008	Develop market management strategy to ensure Vfm services.	50 %	31-Mar-2013



CEMB- R005a	Lack of safety and well-being for clients within child protection services.	Multi-agency Safeguarding Hub in place and operational. Safeguarding training implemented and ongoing across all relevant services. Unannounced inspections undertaken by central government (latest completed November 2011) and no significant issues reported or recommendations made. Any review points and recommendations are incorporated into the ongoing service improvement plans.	Risk Owner: Director - CYPS. Control Owner: Deputy Director Children & Families	03- May- 2012	42	8	3	24		CEMB_R0 05_F002	Ensure that the recommendations of any audits and inspections are implemented and that governance and control issues are fully incorporated and embedded into operational working practices.	50 %	31-Mar- 2013
CEMB- R005b	Safety of Adults in care establishments. Ensuring Safeguarding practices.	Action Plan in place and monitored regularly following annual external inspection of Adult services. Multi-agency Safeguarding Hub in place and operational. Safeguarding training implemented with records of attendance at training courses maintained. Deprivation of Liberty Safeguards (DoLS) has been established as standard practice. Members Panel - Safeguarding in Adults is in place.	Risk Owner: Director - A&HS. Control Owner: Deputy Director Adult Services - A&HS	03- May- 2012	42	6	2	12		AH02_R0 01_F002	New PAN London Procedures now published. Safeguarding staff are acquainted with new procedures and implementation to progress.	100 %	31-Mar- 2012

CEMB- R005c	Lack of safety and well-being for staff, especially in light of reduced resources and changes to work pressures.	Risk Management strategy in place with links to health and safety requirements. Corporate Health & Safety audits undertaken. Risk assessments undertaken and the results reported regularly to CEMB and Members. 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. 'Supporting Change' advice and guidance available to all staff via intranet, regular reminders on available support provided via Team Brief and Smart Talk. Corporate staff Wellbeing programme in place, supported by Occupational Health Unit and sickness absence procedures, includes offer of NHS health checks to staff aged 40+ to identify health risks (April - July 2012) and 'healthy workplace' guidance and procedures.	Risk Owner: Chief Executive. Control Owner: All Directors and ACE - P&OD	03- May- 2012	42	6	5	30		AH02_R0 01_F001	All establishments (including Sheltered Housing) to move to monthly Health & Safety Audits as currently undertaken by all residential homes.	100 %	31-Mar- 2012
CEMB- R009	Failure to meet Council Priorities, and statutory requirements and targets	Council Constitution including scheme of delegation and finance/contract procedure rules in place and reviewed regularly by officers and Members. Council Plan being developed for agreement at Cabinet in June 2012. Regular reports on compliance with national and local performance measures to CEMB and Members. Key legislation changes identified by Policy and Legal Services, with action plans in place to address e.g. 2010 Equalities Act Performance improvement plans, Service Action Plans in place in response to external and internal Inspection processes Joint Leadership Team (LBH, PCT, Vol Sector groups) in Adults & Housing in place.	Risk Owner: ACE - P&OD; Director - CR. Control Owner: Head of Legal Services; All Directors and ACE - P&OD	09- May- 2012	42	7	4	28		CEMB_R0 09_F001	Regular monitoring, review and prioritisation of action via DMTs and relevant project/programme/partnership boards	0 %	31-Mar- 2013



CEMB_R010	Failure of corporate I.T. operating framework.	IT Strategy in place and subject to regular review. IT Services achieved ISO accreditation, with regular audits and ongoing internal review to ensure compliance with ISO requirements. IT infrastructure renewal programme in place, with identified Project Sponsors, and Project Managers to ensure objectives of the programme delivered and benefits realised. Corporate firewalls upgraded with no impact on council business continuity. Disaster recovery and business continuity plans in place and tested for all key corporate systems. Regular service review meetings with key IT providers.	Risk Owner: Director - CR. Control Owner: Head of IT Services	09-May-2012	32	7	4	28					
CEMB_R011	Failure to ensure viability of services delivered through partnership working, especially where changes to funding arrangements occur or costs shunted to the council	Public Health directorate sit within the Council and transition plan in place to ensure that the formal move of Public Health to the Council is effective. Partnership arrangements are the subject of ongoing development including the establishment of the Shadow Health and Wellbeing Board, and are subject to high level review and monitoring by CEMB. Establishment and development of key relationships with external organisations and business sectors. Ongoing work with statutory and voluntary/ community sector partners, e.g. the Police, LDA, Employment Service, Small Business Service and Health agencies. Voluntary Sector commissioning framework being implemented (June 2012).	Risk Owner: ACE - P&OD. Control Owner: Corporate Head of Performance & Policy; Director A&HS; Director of Public Health	09-May-2012	30	6	5	30		AH02_R008_F002	Shadow Health & Wellbeing Board established. Priorities now set.	100 %	31-Mar-2012
										CEMB_R011_F001	CEMB to monitor resource allocation and funding of all key partners, especially where costs may be transferred to the Council.	50 %	31-Mar-2013
										CEMB_R011_F002	Ensure that the Public Health guidance and Health and Social Care Bill due to be issued in the Autumn 2011 is implemented in accordance with requirements	0 %	31-Dec-2012

CEMB- R012	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, work ongoing with departments during 2012 to investigate latest potential fraud matches. Corporate anti-fraud team in place within Corporate Resources, working with housing to develop tenancy fraud project across council housing stock and Registered Providers' housing stock. Publicity on proven frauds on council website and local media.	Risk Owner: Director - Corporate Resources. Control Owner: All Directors and ACE - P&OD; Head of Audit & Risk Management	09-May-2012	36	9	3	27		CEMB_R012_F001	Publish details of successful fraud investigations and prosecutions on a regular basis	0 %	31-Mar-2013
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CEMB- R013	Failure to prepare appropriately for an emergency e.g. severe weather, or emerging events 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. Planning groups in place, with key services and partners, for specific events e.g. severe weather 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 flu pandemic have been identified and plans are in place to ensure continuity of service. Business Continuity Plans in place for all business units and regular programme of testing is in place to ensure fit for purpose. Flu vaccination programme in place for key/frontline staff. Adults & Housing business continuity and emergency planning sub-group meet bi-annually.	Risk Owner: Joint Director of Public Health, ACE - P&OD, All Directors. Control Owner: Emergency & Business Continuity Manager	09-May-2012	28	7	2	14		CEMB_R014_F001	Develop a programme of proactive positive reputation management for the Council and review opportunities for promoting the Council's successes	50 %	31-Mar-2013
CEMB- R014	Failure to promote the Council's achievements successfully and enhance its reputation locally and nationally	Programme of Community engagement as part of the regeneration programme for Tottenham Managing the implementation of the communications strategy and other communication campaigns; Monitoring and responding to national and local media; Addressing the recommendations within external inspections.	Risk Owner: ACE - P&OD. Control Owner: Head of Communications & Consultation	09-May-2012	45	8	5	40					

CEMB- R015	Failure to prepare appropriately for the London 2012 Olympics, not achieving benefits for the borough or increasing risks to residents and staff	Olympic Planning and Steering Group in place within the Council, regular meetings and liaison with community groups and other public sector organisations Liaison processes in place with the organising bodies for the Holland House and Olympic Torch Relay events planned within the borough Pan-London Olympic Planning and Delivery Group in place with council representation Risk and planning issues discussed as part of the standing agenda items on risk and emergency planning group	Risk Owner: Chief Executive Control Owner: All Directors and ACE	09- May- 2012	63	9	3	27			
CEMB- R016	Failure to fully identify and implement the regeneration opportunities following the 2011 disturbances	Project Manager appointed to oversee the regeneration programme Community engagement processes in place, regular meetings with key stakeholders from local and business communities Ongoing financial and other support offered to local businesses to assist in continuing with the regeneration of Tottenham High Road and other parts of the borough Liaison with central government departments regarding financial compensation schemes to maximise the funding available to support the regeneration programme	Risk Owner: Chief Executive, Director of Place and Sustainability Control Owners: Director CR,	09- May- 2012	54	9	4	36			

Risk Status	
	Alert
	High Risk
	Warning
	OK
	Unknown