Warwick District Council	Finance & Audit Scrutiny Committee - 7th January 2014	Agenda Item No. 5

Title	Review of Health & Community Protection Risk Register by Finance & Audit Scrutiny Committee
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Wards of the District directly affected	Not applicable
Is the report private and confidential and not for publication by virtue of a paragraph of schedule 12A of the Local Government Act 1972, following the Local Government (Access to Information) (Variation) Order 2006?	No
Date and meeting when issue was last considered and relevant minute number	12 November 2013 – Finance & Audit Scrutiny Committee 11 January 2012 – Executive
Background Papers	WDC risk management policy & guidelines

Contrary to the policy framework:	No
Contrary to the budgetary framework:	No
Key Decision?	No
Included within the Forward Plan? (If yes include reference number)	No
Equality & Sustainability Impact Assessment Undertaken	N/A: no direct service implications

Officer/Councillor Approval		
With regard to report approval all reports _must_ be approved as follows		
Title	**Date**	**Name**
Chief Executive/Deputy Chief Executive	13 Dec 2013	Andrew Jones
Head of Service	Co-author	Richard Hall
CMT		
Section 151 Officer	Various	Mike Snow (through Richard Barr)
Monitoring Officer		As Deputy Chief Executive
Finance		As S151 Officer
Portfolio Holder(s)	13 Dec 2013	Councillor Coker

Consultation & Community Engagement
None other than consultation with members and officers listed above.

Final Decision?	Yes
Suggested next steps (if not final decision please set out below)	

1   **SUMMARY**

1.1   This report sets out the process for the review by Finance & Audit Scrutiny Committee of the Health & Community Protection Risk Register.

2   **RECOMMENDATIONS**

2.1   That Finance & Audit Scrutiny Committee should review the Health & Community Protection Risk Register attached at Appendix 1 and make observations on it as appropriate.

3   **REASON FOR THE RECOMMENDATIONS**

3.1   To enable members to fulfil their role in managing risk (see section 7, below).

4   **POLICY FRAMEWORK**

4.1   The Health & Community Protection (H&CP) Risk Register is part of the Council's corporate risk management framework. The Register reflects the Council's corporate priorities and key strategic projects that are contained in Fit for the Future.

5   **BUDGETARY FRAMEWORK**

5.1   Although there are no direct budgetary implications arising from this report, risk management performs a key role in corporate governance including that of the Budgetary Framework. An effective control framework ensures that the Authority manages its resources and achieves its objectives economically, efficiently and effectively.

5.2   The risk register sets out when the realisation of risks might have financial consequences. One of the criteria for severity is based on the financial impact.

6   **ALTERNATIVE OPTION(S) CONSIDERED**

6.1   This report is not concerned with recommending a particular option in preference to others so this section is not applicable.

7   **RESPONSIBILITY FOR RISK MANAGEMENT**

7.1   In its management paper "Worth the risk: improving risk management in local government", the Audit Commission sets out clearly the responsibilities of members and officers:

> "Members need to determine within existing and new leadership structures how they will plan and monitor the council's risk management arrangements. They should:
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> • decide on the structure through which risk management will be led and monitored;
> • consider appointing a particular group or committee, such as an audit committee, to oversee risk management and to provide a focus for the process;

- agree an implementation strategy;
- approve the council's policy on risk (including the degree to which the council is willing to accept risk);
- agree the list of most significant risks;
- receive reports on risk management and internal control – officers should report at least annually, with possibly interim reporting on a quarterly basis;
- commission and review an annual assessment of effectiveness: and
- approve the public disclosure of the outcome of this annual assessment, including publishing it in an appropriate manner.

The role of senior officers is to implement the risk management policy agreed by members.

It is important that the Chief Executive is the clear figurehead for implementing the risk management process by making a clear and public personal commitment to making it work. However, it is unlikely that the Chief Executive will have the time to lead in practice and, as part of the planning process, the person best placed to lead the risk management implementation and improvement process should be identified and appointed to carry out this task. Other people throughout the organisation should also be tasked with taking clear responsibility for appropriate aspects of risk management in their area of responsibility."

8   **BACKGROUND**

8.1   Executive agreed on 11th January 2012 that:

(a)   Portfolio Holders should review their respective Service Risk Registers quarterly with their service area managers.

(b)   Portfolio Holder Statements should include each service's top three risks.

(c)   Executive should note the process for the review by Finance & Audit Scrutiny Committee of service risk registers.

(d)   The relevant Portfolio Holders should attend the Finance & Audit Scrutiny Committee meetings at which their respective service risk registers are reviewed.

8.2   The full framework endorsed by Executive at that meeting is set out as Appendix 3.

8.3   Risk registers are in place for all significant risks facing service areas in the provision of their services. In addition to service risk registers for all service areas there is the Significant Business Risk Register that contains the organisation's corporate and strategic risks (the latest version of this being presented to the January Executive meeting). Also, across the organisation, there are risk registers for specific projects such as the Clarendon Arcade.

9   **HEALTH & COMMUNITY PROTECTION RISK REGISTER**

9.1   **Introduction**

9.1.1   The latest version of the H&CP Risk Register is set out as Appendix 1 to this report.

9.1.2   The scoring criteria for the risk register are subjective and are based on an assessment of the likelihood of something occurring, and the impact that might have. Appendix 2 sets out the guidelines that are applied.

9.1.3   In line with the traditional risk matrix approach, greater concern should be focused on those risks plotted towards the top right corner of the matrix whilst the converse is true for those risks plotted towards the bottom left corner of the matrix. If viewed in colour, the former-described set of risks are within the area shaded red, whilst the latter-described set of risks are within the area shaded green; the mid-range are in the area seen as yellow.

9.2   **Overview of H&CP Risk Management**

9.2.1   The H&CP Service Risk Register is owned and managed by the Departmental Management Team and the Portfolio Holder. It is reviewed at Management Team meetings on a quarterly basis. The Head of Service meets with the Portfolio Holder on a monthly basis and the risk register is discussed. Specific risks will be discussed more frequently as they arise.

9.2.2   Members of staff within the service are made aware of the register and have input through team meetings.

9.2.3   The service has been recently formed following the merger of Community Protection with Environmental Services. Therefore the register has been recently reviewed and updated to take account of the new service structure. The review has also taken into account feedback from Finance and Audit Committee on other services' risk registers.

9.2.4   The H&CP service has a wide variety of functions including responsibility for corporate health & safety management, civil contingency, business continuity planning and flood risk management. Proactive service functions also include the delivery of the Food Safety inspection programme and the Health & Safety intervention programme for local businesses. Risk assessment, rating and management are therefore embedded in much of its service delivery.

9.3   **H&CP Service Risks**

9.3.1   In common with other Service Risk Registers risks have been grouped into Generic and Specific. Because of the wide variety and type of functions within the department, the majority have been grouped under Generic risks. However, where there might be a very specific service connotation they will have been picked up in the Specific risks as well. An example of this is risk 7, loss of accommodation, which is rated as a generic service risk but at the Crematorium the impact of such a failure would be significant to the community and Council, and this is therefore reflected in the Specific risks.

9.3.2   The three main risks at the time of writing are considered to be:
            Staff resource and competence

The reason for this is that we deliver technical and specialised services, which have a direct impact on health outcomes. For example, with Food Safety the implications for not having sufficient competent staff are that we put the public at increased risk of infection and the Council at risk for not providing a fit for purpose service. A number of food poisoning outbreaks in other parts of the country have led not only to loss of life, but to Councils and individuals being faced with significant legal liabilities. A similar case can be made for health and safety management and our response to emergency situations. The availability of competent staff is essential.

We control this risk firstly, through the selection process, to ensure that we employ people with the right qualifications and experience. We then ensure that relevant staff are trained and can access CPD to maintain their professional competence. This is monitored through the Appraisal system.

Failure of the Crematorium facility

This may be failure of the buildings such that cremations can't be carried out, or the failure of the cremator equipment itself. Either could result in damage to the reputation of the Council, lack of provision to the community and significant loss of income.

Business continuity and service crisis plans are in place to mitigate the risks. Good procurement practice is necessary to ensure that we select reliable and efficient contractors, which are essential in delivering of the service. Good maintenance of the buildings and equipment is required and there are plans in place to improve the facilities, part of which will be measures to improve ICT provision.

Failure of contractors, stakeholders and partners

A number of our service functions are very dependent on contractors and partners. An example is the work we do in relation to safer communities and Licensing. It relies on working with partners and other stakeholders such as the Police, contractors (e.g. Street Marshalls, Street Pastors) and the voluntary sector. Likewise the work we do in relation to Health & Wellbeing depends on close working with Warks CC, Public Health and others to deliver the service.

Mitigation of the risk is by close liaison and cooperation with partners. Also it is important to ensure that work streams and projects are sustainable financially. Grants and sources of external funding are used where available.

9.3.3 The implementation of the service re-design gave rise to some temporary risks. In particular the potential for disruption of service delivery and failure of IT systems had to be carefully managed. The relocation of staff and re-assignment in some cases has meant that new tasks and duties have had to be accommodated.

The process has now been successfully completed and staff have been re-trained where necessary and have been given access to further development, as necessary.

9.3.4   Two large-scale projects, with significant financial commitments, are being managed by the service, namely Oakley Wood Crematorium Improvement and the Cubbington Flood Mitigation scheme. There are project plans, with risk their own risk registers in place, but they are also monitored through the regular Departmental Management Team and Portfolio Holder meetings.

9.4   **Review of Risk Register by Members**

9.4.1   It is proposed that Members should review the risk register set out as Appendix 1, confirming that risks have been appropriately identified and assessed and that appropriate measures are in place to manage the risks effectively. Members may wish to challenge the Portfolio Holder and the H&CP Management Team on these aspects and assure themselves that their risk register is a robust document for managing the risks facing the service.