## **Finance and Audit Scrutiny Committee**

### Tuesday 31 October 2017

A meeting of the Finance and Audit Scrutiny Committee will be held at the Town Hall, Royal Leamington Spa on Tuesday 31 October 2017 at 6.00pm.

#### Membership:

#### Councillor Barrott (Chair)

Councillor Cain
Councillor Illingworth
Councillor Davies
Councillor Gallagher
Councillor Gifford
Councillor Gouncillor Quinney
Councillor Howe
Councillor Councillor Quinney
Councillor Howe

#### **Emergency Procedure**

At the commencement of the meeting, the Chairman will announce the emergency procedure for the Town Hall.

## Agenda Part A – General Items

#### 1. Apologies and Substitutes

- (a) to receive apologies for absence from any Councillor who is unable to attend; and
- (b) to receive the name of any Councillor who is to act as a substitute, notice of which has been given to the Chief Executive, together with the name of the Councillor for whom they are acting.

#### 2. **Declarations of Interest**

Members to declare the existence and nature of interests in items on the agenda in accordance with the adopted Code of Conduct.

Declarations should be entered on the form to be circulated with the attendance sheet and declared during this item. However, the existence and nature of any interest that subsequently becomes apparent during the course of the meeting must be disclosed immediately. If the interest is not registered, Members must notify the Monitoring Officer of the interest within 28 days.

Members are also reminded of the need to declare predetermination on any matter.

If Members are unsure about whether or not they have an interest, or about its nature, they are strongly advised to seek advice from officers prior to the meeting.









#### 3. **Minutes**

To confirm the minutes of the meeting held on 26 September 2017 (To follow)

#### 4. Minutes of Joint Scrutiny Committee

To confirm the minutes of the meeting held on 18 September 2017

(Pages 1 to 2)

#### **Part B Audit Items**

#### 5. National Fraud Initiative Update

To receive a report from Finance

(Pages 1 to 6)

#### Part C - Scrutiny Items

#### 6. Review of Health & Community Protection Services Risk Register

To consider a report from Health & Community Protection (Pages 1 to 27)

#### 7. Comments from the Executive

To consider a report from Democratic Services

(Pages 1 to 5)

#### 8. Review of the Work Programme and Forward Plan

To consider a report from Democratic Services

(Pages 1 to 15)

## 9. Executive Agenda (Non Confidential Items and Reports) – Wednesday 1 November 2017

To consider the non-confidential items on the Executive agenda which fall within the remit of this Committee. The only items to be considered are those which Committee Services have received notice of by 9.00am on the day of the meeting.

You are requested to bring your copy of that agenda to this meeting.

(Circulated separately)

#### 10. **Public and Press**

To consider resolving that under Section 100A of the Local Government Act 1972 that the public and press be excluded from the meeting for the following item by reason of the likely disclosure of exempt information within the paragraphs of Schedule 12A of the Local Government Act 1972, following the Local Government (Access to Information) (Variation) Order 2006.

## 11. Executive Agenda (Confidential Items and Reports) – Wednesday 1 November 2017

To consider the confidential items on the Executive agenda which fall within the remit of this Committee. The only items to be considered are those which Committee Services have received notice of by 9.00am on the day of the meeting.

# You are requested to bring your copy of that agenda to this meeting. (Circulated separately)

#### 12. **Confidential Minutes**

To confirm the minutes of the meeting held on 30 August 2017

(Pages 1 to 3)

(Not for Publication)

Agenda published Monday 23 October 2017

General Enquiries: Please contact Warwick District Council, Riverside House, Milverton Hill, Royal Leamington Spa, Warwickshire, CV32 5HZ.

Telephone: 01926 456114 E-Mail: <a href="mailto:committee@warwickdc.gov.uk">committee@warwickdc.gov.uk</a>

For enquiries about specific reports, please contact the officers named in the reports

You can e-mail the members of the Committee at f&a@warwickdc.gov.uk

Details of all the Council's committees, Councillors and agenda papers are available via our website <a href="www.warwickdc.gov.uk/committees">www.warwickdc.gov.uk/committees</a>

Please note that the majority of the meetings are held on the first floor at the Town Hall. If you feel that this may restrict you attending this meeting, please call (01926) 456114 prior to this meeting, so that we can assist you and make any necessary arrangements to help you attend the meeting.

The agenda is also available in large print, on request, prior to the meeting by calling 01926 456114.

# Joint meeting of the Finance & Audit and Overview & Scrutiny Committees

Minutes of a joint meeting of the Finance and Audit and Overview & Scrutiny Committees held on Monday 18 September 2017, at the Town Hall, Royal Leamington Spa at 6.00pm.

**Present:** Councillors G Cain, Mrs Cain, D'Arcy, Davies, Davison, Mrs Falp,

Gifford, Miss Grainger, Illingworth, Mrs Knight, Margrave, Naimo,

Noone, Parkins, Quinney, Mrs Redford, Shilton and Weed.

**Also Present:** Councillors Coker, Cooke, Cross, Doody, Mrs Hill, Mobbs and

Rhead.

#### 1. **Appointment of Chairman**

It was proposed and duly seconded that Councillor Mrs Falp be appointed as Chairman for the meeting.

**Resolved** that Councillor Mrs Falp be appointed as Chairman for the meeting.

#### 2. **Apologies and Substitutes**

- (a) Apologies for absence were received from Councillor Gallagher.
- (b) Councillor D'Arcy substituted for Councillor Bromley and Councillor Weed substituted for Councillor Barrott.

#### 3. **Declarations of Interest**

Minute 4 - Executive Agenda (Non-Confidential Items & Reports - Wednesday 20 September 2017) - Item 2 and Council Agenda (Non-Confidential Items & Reports - Wednesday 20 September 2017) - Item 11 - Local Plan Adoption

All Members declared an interest because the report concerned adoption of Warwick District Council's Local Plan.

# 4. Executive Agenda (Non Confidential Items and Reports) – Wednesday 20 September 2017

The Committees considered the following non-confidential item which would be discussed at the meeting of the Executive on Wednesday 20 September 2017.

<u>Item 2 and Council Agenda (Non-Confidential Items & Reports – Wednesday 20 September 2017) – Item 11 – Local Plan Adoption</u>

The Committees considered a report from the Policy & Projects Manager which sought agreement from the Council to adopt the Local Plan 2011-2029, subject to the main modifications put forward by the Inspector in his report, set out in Appendix 2 to the report, and encompassing a number of minor modifications set out in Appendix 3 to the report. The report also sought agreement to adopt the Policies Map to accompany the Local Plan as set out in Appendix 4 to the report.

The Committees agreed with the Local Plan as set out in the report and supported the Plan going forward.

(The meeting ended at 6.07 pm)

<u>'ಚಿಕೆಚ</u>	
WARWICK DISTRICT COUNCIL	

#### Finance and Audit Scrutiny Committee 31<sup>st</sup> October 2017

Agenda Item No.

5

COUNCIL		
Title	National Fraud Initiative	
For further information about this	Ian Wilson, Senior Internal Auditor	
report please contact	·	
Wards of the District directly affected	None	
Is the report private and confidential	No	
and not for publication by virtue of a		
paragraph of schedule 12A of the		
Local Government Act 1972, following	j	
the Local Government (Access to		
Information) (Variation) Order 2006?		
Date and meeting when issue was	Finance and Audit Scrutiny Committee	
last considered and relevant minute	1 <sup>st</sup> November 2016 (Minute 64)	
number		
Background Papers	NFI Referrals Database (Cabinet Office)	
	NFI Internal Working Papers (Internal	
	Audit)	

Contrary to the policy framework:	No
Contrary to the budgetary framework:	No
Key Decision?	No
Included within the Forward Plan? (If yes include reference	No
number)	
Equality Impact Assessment Undertaken	No

Subject matter relates to mandatory participation under statute in a long established national process overseen by the Cabinet Office (taken over from the former Audit Commission).

Officer/Councillor Approval			
Officer Approval	Date	Name	
Chief Executive/Deputy Chief	16/10/2017	Andy Jones	
Executive			
Head of Service	13/10/2017	Mike Snow	
CMT	13/10/2017	CMT	
Section 151 Officer	13/10/2017	Mike Snow	
Monitoring Officer	16/10/2017	Andy Jones	
Finance	13/10/2017	Mike Snow	
Portfolio Holder(s)	16/10/2017	Councillor Whiting	
<b>Consultation &amp; Community</b>	Engagement		
Not applicable			
Final Decision?		Yes	

#### 1. **Summary**

1.1 The purpose of this report is to present to Members details of progress to date on the Council's investigations into the data matches from the 2016-17 National Fraud Initiative (NFI) programme.

#### 2. Recommendation

2.1 That this Committee notes outcomes to date and relevant explanations from the 2016-17 round of the NFI.

#### 3. Reasons for the Recommendation

- 3.1 Members have requested annual updates on NFI activities.
- 3.2 The NFI considers itself to be a major contributor to public sector counter-fraud activity and continually seeks to expand its influence in both the public and private sectors. From Warwick District Council's perspective the contribution of NFI to counter fraud activity has always been marginal overall, but offers significant value as a source of independent assurance on the effectiveness the Council's preventative controls and as a deterrent against fraud.
- 3.3 The results to date from the 2016-17 NFI programme are discussed in Section 9 below.

#### 4. Policy Framework

#### 4.1 Fit for the Future (FFF)

The Council's FFF Strategy is designed to deliver the Vision for the District of making it a Great Place to Live, Work and Visit. To that end amongst other things the FFF Strategy contains several Key projects.

The FFF Strategy has 3 strands – People, Services and Money and each has an external and internal element to it. The table below illustrates the impact of this proposal if any in relation to the Council's FFF Strategy.

FFF Strands			
People	Services	Money	
External			
Health, Homes, Communities	Green, Clean, Safe	Infrastructure, Enterprise, Employment	
Intended outcomes: Improved health for all Housing needs for all met Impressive cultural and sports activities Cohesive and active communities	Intended outcomes: Area has well looked after public spaces All communities have access to decent open space Improved air quality Low levels of crime and ASB	Intended outcomes: Dynamic and diverse local economy Vibrant town centres Improved performance/ productivity of local economy Increased employment and income levels	
Impacts of Proposal None directly applicable			

FFF Strands			
People	Services	Money	
Internal			
Effective Staff	Maintain or Improve Services	Firm Financial Footing over the Longer Term	
Intended outcomes: All staff are properly trained All staff have the appropriate tools All staff are engaged, empowered and supported The right people are in the right job with the right skills and right behaviours	Intended outcomes: Focusing on our customers' needs Continuously improve our processes Increase the digital provision of services	Intended outcomes: Better return/use of our assets Full Cost accounting Continued cost management Maximise income earning opportunities Seek best value for money	
Impacts of Proposal			
None directly applicable	None directly applicable	The report relates to ongoing processes that contribute to continued cost management by helping to minimise financial loss through fraud, error and failure in duties to report circumstances impacting on entitlement to Council benefits and liability reductions.	

#### 4.2 **Supporting Strategies**

Each strand of the FFF strategy has a number of supporting Strategies, but direct reference to them is not necessary in considering the subject matter of this report.

#### 4.3 Changes to Existing Policies

This section is not applicable.

#### 4.3 **Impact Assessments**

This section is not applicable.

#### 5. **Budgetary Framework**

There are no direct budgetary impacts arising.

#### 6. Risks

Effective participation in the NFI reinforces the Council's measures for mitigating the risk of fraud.

#### 7. Alternative Option(s) considered

7.1 There are no alternative options to participating in the NFI as it is a statutory requirement.

#### 8. Background

- 8.1 The National Fraud Initiative (NFI) is a national inter-organisational data matching service developed by the Audit Commission but now managed by the Cabinet Office.
- 8.2 While the NFI has traditionally focused on housing benefit fraud as its main target area, recent years have seen pensions and council tax discount overtake housing benefits in terms of monetary value attributed to fraud and irregularities detected through its activities. Of the other areas targeted by NFI, those relevant to Warwick District Council are:
  - council tax reduction (under local scheme)
  - employment
  - social housing tenancies
  - right to buy
  - social housing waiting lists
  - trade creditors
  - licensing (taxi and alcohol)
  - insurance claims.
- 8.3 To meet its obligations under the NFI, Warwick District Council is required to:
  - extract and supply data to the managing body (now the Cabinet Office);
  - review and, where appropriate, investigate output referred back from the data matching processes and report the outcomes to the managing body.
- 8.4 To comply with law and best practice in handling and sharing personal information, the process is governed by a Code of Data Matching Practice adopted (and currently under review by) the Cabinet Office.
- 8.5 The Responsible Financial Officer has overall management responsibility for the NFI at each local authority. NFI operations at Warwick District Council are overseen by a member of Internal Audit as designated 'Key Contact'.
- 8.6 Results of NFI data matches are processed through a secure web-based application system. Only a small number of Council and contracted-in staff have access to this system and they are required to observe special data handling instructions in addition to the Council's policies on information security.

#### 9 **NFI Outcomes**

9.1 The following table summarises the results to date for the 2016-17 round of the NFI alongside the final outcomes of the 2014-15 round for comparison. This is followed by explanatory notes where appropriate.

Match Type	No. of	No. of	Outcomes 2016-17		Outcomes	s 2014-15
	matches received	matches processed	No. of cases of fraud/error identified	Over- payments identified £	No. of cases of fraud/error identified	Over- payments identified £
Housing Benefit	488	163	1	181	3	1,721
Payroll	40	40	1	-	Nil	-
Housing Tenants	209	206	Nil	-	4	-
Right to Buy	13	13	Nil	-	1	-
Taxi Drivers	7	5	Nil	-	Nil	-
Creditors – duplicate suppliers	158	158	3	-	12	-
Creditors – duplicate payment transactions	44	44	2	9,596.91 (incl. VAT)	1	9,208 (incl. VAT)
Creditors – VAT overpaid	148	148	Nil	-	Nil	-
Council Tax Discount	3,670	403	2	1,865	271	139,720
Waiting List	98	51	6	-	12	-
Council Tax Reduction	552	472	1	247	3	1,112

- 9.2 While the matches in relation to payroll and creditors have been processed by the Key Contact, the remaining matches have been assigned to two officers of the Council's fraud investigation partnership with Oxford City Council Investigation Service for review. The performance of the Partnership is due to be reported to Finance and Audit Scrutiny Committee later in November.
- 9.3 It should be emphasised that there is no strict requirement under the NFI to examine all matches processed and it is expected that match groups will be prioritised on a risk basis, especially where there are large numbers. This is particularly so in the case of the Housing Benefit, Council Tax Discount and Council Tax Reduction categories.
- 9.4 Although investigation of housing benefit fraud is now the responsibility of the Single Fraud Investigation Service (Department for Work and Pensions), the Cabinet Office advised that the Council is expected to 'sift' all NFI housing benefit matches initially.

- 9.5 The low proportion of Housing Benefit matches processed is due to risk-based prioritisation which has concentrated primarily on:
  - matches flagged as recommended priority by the NFI;
  - other new matches (i.e. matches not repeated from previous NFI cycles).
- 9.6 What appears to be a substantial proliferation of Council Tax Discount matches is the result of a new report with 2,396 matches released in April 2017 in addition to the annual routine match reports. Unlike the routine reports which solely match council tax accounts to the electoral register, the new report comes from matching with a wide range of internal and external data, most predominantly blue badge and concessionary travel records held by Warwickshire County Council.
- 9.7 While the annual routine council tax matches to the electoral register are normally processed and referred back promptly by the NFI, those in the new report are based on data submitted almost 5 months before the matches were received. Such a time lapse often leads to false positives and creates additional work for staff.
- 9.8 The Council Tax Team periodically undertakes a review of all single person discount awards and now has access to additional data matching technology to assist with this process which will return more up to date information. A full single person discount review by the Team has been planned to begin in November, and a decision was made not to process the 2016 NFI matches per se to avoid duplication.
- 9.9 It was agreed, with the approval of the Head of Finance, that a more resource-effective way to deal with these matches would be to submit them for independent matching on the data intelligence solution used by the Oxford Investigation Service. The same approach is also envisaged for the next round of Council Tax Discount matches due in December.
- 9.10 The overpayment of £2,337 on one of the two duplicate creditor payments has been refunded and recovery of the remaining overpayment is still being pursued.

WARWICK DISTRICT COUNCIL FINANCE & AUDIT SCRU	ITINY	Agenda Item No.
Title	Review of Healt Services Risk R	th & Community Protection egister
For further information about this report please contact	Marianne Rolfe , Head of Health & Community Protection Tel: 01926 456700 Email: Marianne.rolfe@warwickdc.gov.uk or Richard Barr, Audit & Risk Manager Tel: 01926 456815 email:richard.barr@warwickdc.gov.uk	
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?	If yes state why	
Date and meeting when issue was last considered and relevant minute number	12 January 2016, Agenda Item No. 5 Finance & Audit Scrutiny Committee (last service risk register review)	
Background Papers WDC risk management policy & guidelines		gement policy &

Contrary to the policy framework:	<del>Yes/</del> No
Contrary to the budgetary framework:	<del>Yes/</del> No
Key Decision?	<del>Yes/</del> No
Included within the Forward Plan? (If yes include reference number)	<del>Yes</del> /No
Equality Impact Assessment Undertaken	Yes/No (If No state why below)
Not applicable as no direct service implications	

Officer Approval	Date	Name	
Chief Executive/Deputy Chief	20/09/17	Chris Elliot/ Andrew Jones	
Executive			
Head of Service	20/09/17	Marianne Rolfe	
CMT	20/09/17	Chris Elliot/ Andrew Jones	
Section 151 Officer		Mike Snow	
Monitoring Officer	20/09/17	Andrew Jones	
Finance		Mike Snow	
Portfolio Holder(s)	06/10/17	Cllr Andrew Thompson	
Consultation & Community Engagement			
Final Decision?		Yes <del>/No</del>	
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 Services Risk Register.

#### 2. Recommendation

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

#### 3. Reasons for the Recommendation

3.1 To enable members to fulfil their role in managing risk (see section 8, below).

#### 4. **Policy Framework**

#### 4.1 Fit for the Future (FFF)

The Council's FFF Strategy is designed to deliver the Vision for the District of making it a Great Place to Live, Work and Visit. To that end amongst other things the FFF Strategy contains several Key projects.

The FFF Strategy has 3 strands – People, Services and Money and each has an external and internal element to it. The table below illustrates the impact of this proposal if any in relation to the Council's FFF Strategy.

FFF Strands				
People	Money			
External				
Health, Homes, Communities	Green, Clean, Safe	Infrastructure, Enterprise, Employment		
Intended outcomes: Improved health for all Housing needs for all met Impressive cultural and sports activities Cohesive and active communities	Intended outcomes: Area has well looked after public spaces All communities have access to decent open space Improved air quality Low levels of crime and ASB	Intended outcomes: Dynamic and diverse local economy Vibrant town centres Improved performance/ productivity of local economy Increased employment and income levels		
Impacts of Proposal				
Managed the risks associated with service delivery in order to ensure the delivery of the intended outcomes	Managed the risks associated with service delivery in order to ensure the delivery of the intended outcomes	Managed the risks associated with service delivery in order to ensure the delivery of the intended outcomes		
Internal				
Effective Staff	Maintain or Improve Services	Firm Financial Footing over the Longer Term		
Intended outcomes: All staff are properly trained	Intended outcomes: Focusing on our customers' needs	Intended outcomes: Better return/use of our assets		

All staff have the appropriate tools All staff are engaged, empowered and supported The right people are in the right job with the right skills and right behaviours	Continuously improve our processes Increase the digital provision of services	Full Cost accounting Continued cost management Maximise income earning opportunities Seek best value for money
Impacts of Proposal		
Managed the risks associated with service delivery in order to ensure the delivery of the intended outcomes	Managed the risks associated with service delivery in order to ensure the delivery of the intended outcomes	Managed the risks associated with service delivery in order to ensure the delivery of the intended outcomes

#### 4.2 Supporting Strategies

Each strand of the FFF Strategy has several supporting strategies and the relevant ones for this proposal are contained within the WDC Risk Management Policy & Guidelines.

#### 4.3 Changes to Existing Policies

No proposed changes to existing policies.

**4.3 Impact Assessments** – An impact assessment has not been carried out as this report does not require a change or amendment of policy.

#### 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. Risks

The risks are contained in the Service's Risk Register, set out as Appendix 1A.

#### 7. Alternative Option(s) considered

7.1 This report is not concerned with recommending a particular option in preference to others so this section is not applicable. In this section the reporting officer would set out the alternative options which have been considered before making their recommendation. This section is required because it is a requirement of any Executive decision taken to consider and record alternative options before taking the decision.

#### 8. Responsibility for Risk Management

- 8.1 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:
  - 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.
- 8.2 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."

#### 9. Background

- 9.1 Executive agreed on 11th January 2012 that:
  - a) Portfolio Holders should review their respective Service Risk Registers
  - b) guarterly with their service area managers.
  - c) Portfolio Holder Statements should include each service's top three risks.
  - d) Executive should note the process for the review by Finance & Audit
  - e) Scrutiny Committee of service risk registers.
  - f) The relevant Portfolio Holders should attend the Finance & Audit Scrutiny
  - g) Committee meetings at which their respective service risk registers are
  - h) reviewed.
- 9.2 The full framework endorsed by Executive at that meeting is set out as Appendix 3.
- 9.3 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).

#### 10 **Health & Community Protection Service Risk Register**

- 10.1 The latest version of the Health & Community Protection Risk Register is set out as Appendix 1A to this report. The register is regularly reviewed and updated.
- 10.2 Health & Community Protection also maintain a summary table as a supplement to the Risk Register to manage their key risks more closely. This is set out as Appendix 1B.
- 10.3 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.
- 10.4 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.

#### 10.5 **Overview of Health & Community Protection Services Risk Management**

- 10.6 The Health & Community Protection Risk Register is owned and managed by the Portfolio Holder & the Health & Community Protection Management Team. The register is reviewed on a monthly basis by the Management Team and is discussed on a regular basis by Head of Health & Community Protection and Portfolio Holder at their one-to-one meetings.
- Amendments to existing risks are made to the register as appropriate and 10.7 when any new risks are identified. Any changes to risks are shown on the matrix attached as Appendix 1B, allowing officers to track the history of the risk and the impact of mitigation.
- The Risk Register includes the significant business risks across the service; 10.8 some of these are common across the service and others, given the broad range of services, are specific to a particular part of the service. Sitting beneath this Risk Register are a series of detailed risk assessments within each part of the service which identify the day to day risks which exist within the service. In general terms these are health & safety risks relevant to the type of service being provided. There are also the Service Area Crisis Plan and Business Continuity Plans which address emergency situations.

#### **Health & Community Protection Service Risks** 10.9

- 10.10 Health & Community Protection is responsible for the provision of a wide range of services. The risk register (Appendix 1A) includes generic risks at the start of the document. These are divided in to various categories. Service-specific risks are then listed, relevant to the various sections of the service.
- 10.11 There are 46 risks contained in the Risk Register; 24 are service-specific risks and 22 are generic risks. There are currently 1 risks in the "red zone". One risks has moved from the "red" to the yellow since the last review. The table in Appendix 1B summarises changes since the last review.
- 10.12 The three main risks within the service are considered to be:-

- **GR 1– staff resources and loss of key staff**. There are a number of reasons for this, not least the recent departmental restructure, carried vacancies (3 of which active recruitment is underway and 1 of which are awaiting persons to start their employment, 1 of which non active recruitment until the supervisor post is filled).
- GR2 Health and Safety risks to staff evening/ night time enforcement, Lone working, staff safety, Injuries and abuse. The recent lone worker audit commissioned by SMT has highlighted the risk officers face during lone working. The service as always felt that this is an area of higher risk due to the nature of the work of many of the officers within the service.
- **GD8 Unable to meet levels of service expected.** The service has experiencing an increased workload in a number of areas due to the increase in workload that is also being experienced in other service areas. In addition the service is carrying a number of vacancies as outlined in GR1.

#### 10.13 Review of Risk Register by Members

10.14 It is proposed that Members should review the risk register set out as Appendix 1A, 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 Head of Health & Community Protection Services on these aspects and assure themselves that their risk register is a robust document for managing the risks facing the service.

	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
GR1	Staff Resources - Loss of key staff/skills, Appointment & Retention, ill health and other emergencies.  Staff Transitions, Settling in of restructure arrangements, vacant post	<ul> <li>Ill health inc infectious disease outbreaks, stress</li> <li>Staff turnover (finding work elsewhere, low pay, dissatisfaction, low morale, qualifications, poor working conditions, shortage of skilled staff, lack training opportunities, lack development opportunities, Redundancy, retirement)</li> <li>Lack of key staff/knowledge.</li> <li>Lack of adequate cover bank holidays/emergencies, including outbreaks/epidemics</li> <li>Lack of succession planning and Unfilled Vacancies</li> <li>External emergency situation (Flood, Act of Terrorism, Pandemic Flu, other hazard).</li> <li>Retirements or other duties (elections)</li> </ul>	<ul> <li>Skills shortage. Unable to respond to service area matters.</li> <li>Insufficient resources to maintain adequate service/ reduced service/ service failure</li> <li>Lack of Proper officer/officer with delegated authority/officer with relevant certification/ qualifications available to progress workflow.</li> <li>Failure to meet customer expectations</li> <li>Failure to meet statutory requirements</li> <li>Unable to respond to emergencies</li> <li>Low staff morale.</li> <li>Additional pressure on remaining staff</li> <li>Loss of additional Key Staff.</li> <li>Impacts on the Councils financial Profile.</li> <li>Loss of IIP award.</li> <li>Threat to business critical tasks.</li> <li>Financial penalties.</li> <li>Additional budgetary pressure if agency staff or overtime is required to fill the gap</li> <li>Breach of working</li> </ul>	<ul> <li>Effective staff management, including stress management, one to ones/appraisals &amp; staff development.</li> <li>Supportive, equitable, transparent and consistent corporate culture.</li> <li>Adherence to the principles, aims and objectives of Investors in People, the Health &amp; Wellbeing Strategy and the Wellbeing Charter</li> <li>Succession planning as part of Service Planning process.</li> <li>Maintenance of competence, CPD,</li> <li>Knowledge pairing within department.</li> <li>Use of temporary staff as needed/appropriate</li> <li>Effective monitoring of performance.</li> <li>Enhance resilience by encouraging staff to train in additional competencies and certification, share knowledge.</li> <li>Encourage phased retirement if appropriate to enable transfer of knowledge</li> <li>Regular review of Business Continuity Plan</li> </ul>	DMT HR HHCP STL	<ul> <li>(if appropriate)</li> <li>Awaited start of persons recruited (9<sup>th</sup> Oct)</li> <li>Active recruitment process for 3 posts</li> <li>One post not under active recruitment process at this time.</li> </ul>		ASAP	Decreased with current changes inc restructuring, vacancy filling numbers. However, posts filled in October.

GEN	ERIC – STAFF/HUMAN RESO	URCES							
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
GR2	Health and Safety risks to staff - evening/ night time enforcement, Lone working, staff safety, Injuries and abuse.	<ul> <li>Failure to implement safe systems of work</li> <li>Insufficient knowledge of required procedures</li> <li>Inadequate corporate systems in place</li> <li>System failure</li> <li>Lone working;</li> <li>Abusive applicants and disgruntled customers</li> <li>Exposure to drunk people, taxi drivers, publicans and customers</li> <li>Working outside daylight hours</li> <li>Condition of premise being visited</li> </ul>	<ul> <li>Staff at risk from accidents etc. Injury to staff</li> <li>Risk of prosecution/ litigation</li> <li>Insurance claim/ compensation</li> <li>Loss of reputation</li> <li>Physical and verbal activities.</li> <li>Staff reduction due to ill health.</li> <li>Accident outcome may be worsened by not being able to readily summon aid</li> <li>Increased perception of peril leading to stress</li> </ul>	<ul> <li>Competent Corporate         Health &amp; Safety staff in         place.</li> <li>Work Procedures and         use of Lone Worker         system (Tunstall)</li> <li>Good health &amp; safety         practice through         management system</li> <li>Training at induction         and updating</li> <li>Risk assessments         completed. Dynamic         risk assessments         undertaken.</li> <li>Staff awareness and         training.</li> <li>Liaison with CCTV staff         and Street Marshals.</li> <li>Use of radio system to         remain in contact, panic         alarms and torches.</li> <li>Support from specialist         officers in locations         where specific problems         identified</li> <li>Office layout</li> <li>Regular review, use and         update of Staff Alert List</li> <li>Updated ICE lists</li> </ul>	H&S Advisor CMT DMT HHCP	<ul> <li>Introduction of Total mobile technologies</li> <li>Participation and lead in the lone worker review activities</li> <li>Re enforce use of the current system whilst reviews under way.</li> </ul>	Staff time	APR 18	Likelihood
GR3	Driving for work (council and personal vehicles) – Accidents.	<ul> <li>Poorly maintained vehicles</li> <li>Staff not trained in their responsibilities</li> <li>Stress/Tiredness</li> <li>Illness/ Medications</li> </ul>	<ul> <li>Damage to vehicle or property</li> <li>Personal injury, Legal action, insurance claims etc.</li> <li>Convictions for driving poor maintained vehicles.</li> <li>Accidents/ Unable to work as result.</li> </ul>	<ul> <li>Knowing where the council vehicles are.</li> <li>Regular maintenance and checks of council vehicles</li> <li>Staff training at commencement of job role.</li> <li>Effective health &amp; safety controls and risk assessments</li> <li>Staff Provision of own insurance for Business use of personal vehicles</li> </ul>	DMT	Insurance and driving licence to be checked.	Staff Time	DEC 17	Impact

GEN	ERIC - STAFF/HUMAN RESO	URCES							
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
GR4	Home & Mobile working – poor service delivery level and health and safety risks present.	<ul> <li>IT provision not working</li> <li>H&amp;S risks not mitigated</li> <li>Appropriate level of service delivery not maintained</li> <li>Loss of staff buy in</li> <li>Condition of premises</li> </ul>	<ul> <li>Inability to deliver work programme</li> <li>Legal challenge</li> <li>Customer expectation not met</li> <li>Poor staff welfare/increased stress/ Isolation</li> <li>Insurance claim</li> <li>Accident</li> </ul>	<ul> <li>Effective H&amp;S controls in place for work place assessment and lone working.</li> <li>Effective management of service delivery</li> </ul>	DMT HHCP	Introduction and development of total mobile systems		MAR 18	Likelihood
GR5	Inadequate training provided to staff	<ul> <li>Lack of time/money to invest in training</li> <li>Budget pressures</li> <li>Non identified skills gaps</li> </ul>	<ul> <li>Staff not skilled to provide service</li> <li>Wrong advice/decisions</li> <li>Non-compliance with statutory instrument where specific qualifications or delegations are required.</li> <li>Loss of IIP status.</li> <li>Loss of professional competence and thus ability to do role</li> <li>Legal challenge on decisions</li> <li>Complaints</li> </ul>	<ul> <li>One to ones/appraisals personal development plans</li> <li>Legal support</li> <li>Budget for training</li> <li>Identify necessary training (via effective methods)</li> </ul>	DMT	<ul> <li>Continuing use of RDNA and GRIP tools</li> <li>Ongoing work with external bodies to identify training need/free training.</li> <li>Food Law Code of Practice Competences</li> <li>Ongoing legal skills training to maintain competences</li> </ul>			Eikelihood  Food Officers completed food law competences. SMT Enforcement project. HCP training matrix and PDP training planner. Legal Skills enforcement training provided
GR6	Failure to identify legislative changes	<ul> <li>Staff not keeping up to date (awareness/ competence/ short notice implementation etc)</li> <li>Not being implemented or brought into force at proposed time.</li> </ul>	<ul> <li>Statutory procedures not followed</li> <li>Reviews</li> <li>Complaints upheld</li> <li>Transfer of budgets to new statutory authority</li> </ul>	<ul> <li>personal development plans</li> <li>Legal support</li> <li>Service planning</li> <li>Management practices</li> <li>Completing adequate training and CPD up to date</li> <li>Attendance at regional and county technical groups</li> </ul>	DMT				Likelihood

GEN	ENERIC - INFRASTRUCTURE & ACCOMODATION								
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
GI1	Loss of IT and records Web-site Maintaining Computerised Systems and Records Integration of different software solutions	<ul> <li>Loss of Building,         Flood, Fire, external         emergency situation         affecting access</li> <li>Power and system         Failures</li> <li>Contractor failure</li> <li>Data Corruption</li> <li>IT security issue</li> <li>Staff resources</li> <li>Sabotage,         Malfunction,         Hacking/malicious         acts</li> <li>Poor Procedures,         Ineffective computer         systems for service         needs.</li> <li>IT not able to rectify         the problem</li> <li>Poor knowledge         /understanding</li> <li>Broadband         connections lost</li> <li>Loss of hardware</li> <li>Staff understanding         of software and         'drives'</li> </ul>	<ul> <li>Loss of access to data, Data loss.</li> <li>Operating systems not working</li> <li>Failure to meet customer expectations or to provide requested information</li> <li>Reduced service provision, failure to meet statutory requirements</li> <li>Unable to deliver online services</li> <li>Out of date information</li> <li>Adverse Publicity,</li> <li>Impacts on the Councils financial Profile.</li> <li>Systems not set up adequately resulting in additional work</li> <li>Unable to continue service</li> <li>Complaints &amp; claims</li> </ul>	<ul> <li>Emergency and Business Continuity Planning, including arrangements for Homeworking.</li> <li>Good procurement procedures and contract management</li> <li>Implementation of effective backing up and storage procedures.</li> <li>Introduction of checking systems.</li> <li>On-going training and engagement of staff Adequate training and resourcing of web authors and editors</li> <li>Regular review procedures and systems</li> <li>Insurance cover.</li> </ul>	SMT  DMT  ICT  HHCP	Review number of web editors and provide required training		Ongoing	Likelihood  Refresher training on CIVICA app provided. Software testing activities provided. Phased integrations
GI2	Loss of accommodation/ Non availability of Office Building  Non availability of CCTV control room	<ul> <li>Flood, Fire, Gas explosion, Tempest etc.</li> <li>External emergency situation affecting access</li> <li>Power Failures</li> </ul>	<ul> <li>Loss of access to data</li> <li>Loss of access to equipment and materials</li> <li>Restriction of service provision</li> <li>Danger to occupants.</li> <li>Non availability of service.</li> <li>Additional expenditure.</li> <li>Bad Publicity.</li> <li>Loss of records, IT equipment.</li> </ul>	<ul> <li>Emergency and Business Continuity Planning and their regular review.</li> <li>Normal operating procedure.</li> <li>Homeworking availability</li> </ul>	SMT DMT				Likelihood

	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
GS1	Supplier failure or unable to provide services as agreed/expected. I.e., royal mail, ADT, kennels i.e. Contractor, legal, Street Marshalls  Voluntary sector contractors – CAB, The Gap, Healthy Living centre	<ul> <li>Inability to provide service or providing a sub-standard service.</li> <li>Organisational changes not taken into account</li> <li>Partnership agreement breakdown</li> <li>Financial commitment not covered within budget</li> <li>Contractor goes out of business</li> <li>Emergency situation prevents contract delivery</li> <li>Disagreement as to contract delivery and /or cost</li> <li>External emergency situation, Flood, Fire affecting access</li> <li>Power and system failures</li> <li>Staff resources</li> <li>Full scope of works not included in contract tender</li> <li>Contractor resource (kennels full)</li> </ul>	Unacceptably poor service.  Legal challenge  Loss of reputation  Not meeting customer expectations  Air Pollution monitoring interrupted  Failure to meet customer expectations  Unexpected additional expenditure	<ul> <li>Maintain contact with account managers/contractors.</li> <li>Effective budgetary control through management processes.</li> <li>Good lines of communication with key staff.</li> <li>Business Continuity planning</li> <li>Good procurement practises</li> <li>Staff training</li> <li>Contract terms &amp; contract monitoring</li> </ul>	CMT DMT SMT	Continuing monitoring of services delivered		Ongoing	Likelihood
GS2	Failure of other WDC/ partners/ stakeholders department to provide services as agreed / expected (neighbourhood/ property)	<ul> <li>Reorganisation of collaborative departments</li> <li>Failure to recognise workflow through other departments</li> <li>Insufficient staff / resource available</li> </ul>	<ul> <li>Disjointed services to customers</li> <li>Missed opportunities</li> <li>Negative impact on staff morale</li> <li>Increased customer complaints</li> <li>Reputational damage</li> </ul>	communication between key members of staff, partners and stakeholders  Joint working groups  SMT intervention	DMT SMT	Monitoring of services delivered			Likelihood

	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
GE1	Increased demand on services due to Emergency situation; Emergency stops basic Council Operations	<ul> <li>Extreme Weather,         Flood, Act of         Terrorism, Fuel         Strike, Pandemic         outbreak, other         realized hazard.</li> <li>Structural/Building         failure.</li> <li>Fire/Loss of data/         Electronic         Attack/Denial of         Access.</li> <li>Loss of internet         service/wifi/phones</li> </ul>	<ul> <li>Threat to business critical tasks.</li> <li>Inability to meet demand.</li> <li>Staff workload increases, leading to potential stress.</li> <li>Loss of public confidence.</li> <li>Inability to meet statutory duties.</li> <li>Loss of data/information/documents.</li> <li>Adverse effect on health and wellbeing of population</li> </ul>	<ul> <li>Service Area plans for business interruptions.</li> <li>Regular review of Business Continuity Plan</li> <li>Training and exercises.</li> <li>Work towards BS25999.</li> <li>Implementation of building security and fire safety measures.</li> <li>ICT work to secure data.</li> </ul>	STL				Likelihood
GE2	Widespread disaster beyond local capabilities to cope and reasonable attempts to plan	<ul> <li>Risk Assessment process fails to detect significant risk.</li> <li>Extreme Weather, Flood, Act of Terrorism, Pandemic outbreak, other realized hazard.</li> <li>Structural/Building failure.</li> <li>Fire/Loss of data/ Electronic Attack/Denial of Access.</li> </ul>	<ul> <li>Damage to property/ Environment in District.</li> <li>Threat to life and business critical tasks.</li> </ul>	<ul> <li>Risk Assessment process at Local Resilience Forum.</li> <li>Multi-Agency working/plans.</li> <li>Mutual Aid agreements.</li> <li>Emergency plan</li> <li>Regular review of Business Continuity Plan.</li> </ul>	STL				Likelihood

GEN	GENERIC - EMERGENCY SITUATIONS												
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating				
GE3	Ineffective Emergency preparedness	<ul> <li>Failure of Officers to carry out parts/all of responsibilities under the WDC Duty Officer Role/Normal business duties.</li> <li>Officers unavailable to fulfil duties</li> </ul>	<ul> <li>Loss of public confidence.</li> <li>Damage to property/environment in District.</li> <li>Ineffective use of resources.</li> </ul>	<ul> <li>Training of staff for emergency situations.</li> <li>24/7 Duty Officer role and Reserve Duty Officer, to offer support.</li> <li>Flood Plan.</li> <li>Continued Training and Exercising.</li> <li>Service Area Plans</li> <li>Business Continuity Plans</li> <li>Major Emergency Plan and standard operating procedures</li> </ul>	STL	<ul> <li>Ongoing training of named staff</li> <li>Phased review of MEP, SOP etc in light of incidents</li> </ul>		APR 18	Impact				

GENE	RIC - SERVICE DELIVERY  Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
GD1	Provision of incorrect/poor quality information/advice	<ul> <li>Error in transferring information</li> <li>Staff error</li> <li>Insufficiently trained staff</li> <li>Confrontation</li> <li>Advice not fit for purpose</li> <li>Poor decision making</li> </ul>	<ul> <li>Failure to meet customer expectations.</li> <li>Corporate /LGO Complaints dissatisfaction of customers.         Reputational damage</li> <li>Poor working relationships</li> <li>Remedial actions and litigation costs</li> <li>Information Commissioner criticism or fine</li> <li>Staff stress</li> <li>Compensation claims</li> </ul>	<ul> <li>Effective systems and procedures in place.</li> <li>Staff training and knowledge sharing</li> <li>Appraisals</li> <li>Performance monitoring</li> <li>Specialist area of Flood Engineering transferred to SLA with WCC.</li> </ul>	DMT	Contract monitoring of specialist SLA contractor	Staff time	Ongoing	Likelihood

GENE	RIC - SERVICE DELIVERY								
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
GD2	Possibility of Fraud/ Corruption	Insufficient finance and IT security controls in place.	<ul><li>Loss of money</li><li>Loss of reputation</li><li>Legal action</li></ul>	<ul> <li>Abide by Finance and IT procedures and rules through effective internal management.</li> <li>Attendance of appropriate staff at training provided and refresher training</li> <li>Staff permissions/authorities/authorisati ons threshold limits</li> </ul>	SMT				Likelihood
GD3	Possibility of Non- compliant procurement  Ineffective procurement	<ul> <li>Lack of awareness of issues</li> <li>Deliberate act</li> <li>Poor standard of documentation produced upon which procurement is based</li> <li>Insufficient time allowed</li> </ul>	<ul> <li>Legal challenge</li> <li>Loss of reputation</li> <li>Failure to achieve best value</li> <li>No commercial interest</li> <li>Bidder mistakes invalidating applications</li> <li>Failure to have contract in place</li> </ul>	<ul> <li>Effective staff training and management of procurement processes</li> <li>Staff training</li> <li>Regular review of contracts register and forecast of future procurement needs.</li> </ul>	DMT	<ul> <li>Continuing refresher training and training for new starters</li> <li>Continuing liaison with procurement</li> </ul>			Likelihood
GD4	Failure to correctly monitor/ manage budgets  Impact of the self-service system upon budget control	<ul> <li>Insufficient staff training</li> <li>Pressure of work leading to insufficient resource being committed</li> <li>Expanding use of self-service systems</li> </ul>	<ul> <li>Uncertainty for corporate budgets</li> <li>Unable to meet service commitments</li> <li>Monies coded to wrong budgets due to system of self service</li> </ul>	<ul> <li>Regular budget monitoring</li> <li>Regular meetings with Finance</li> <li>Training of Budget Managers</li> </ul>	HHCP DMT	<ul> <li>Continuing training and for new starters.</li> <li>Active monthly monitoring</li> <li>Testing of solution to miscoding through self serve</li> </ul>			Likelihood  Manual adjustments replaced with solution.

GENE	RIC - SERVICE DELIVERY	,							
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
GD5	Compliance with legal duty. / Failure to deliver service within statutory timescales/ Failure to meet requirements of civil contingencies act.	<ul> <li>Insufficient resources</li> <li>Negligence</li> <li>Deliberate act</li> <li>Failure to understand or be aware of new/ changing legislation and regulations</li> <li>Staff workload, poor training, motivation,</li> <li>Inappropriate planning/preparedn ess works prior to event</li> <li>Failure of officers to carry out parts/ all of responsibilities under the WDC major incident plan and response.</li> <li>Scale of incident</li> <li>Temporary staff vacancy/seasonal shortages</li> <li>Long term absence/vacancy</li> </ul>	<ul> <li>Legal challenge</li> <li>Compensation claims</li> <li>Loss of reputation and public confidence.</li> <li>Impact on resources and finances</li> <li>Reduced service effectiveness, poor customer service, impacts on motivation and stress levels,</li> <li>Damage to property/environment in district</li> <li>Threat to life</li> <li>Public enquiry</li> </ul>	<ul> <li>Sufficient resource of competent staff.</li> <li>Effective training and development for staff</li> <li>Effective management controls in place through service planning and monitoring</li> <li>Major Emergency Plan and Annual review.</li> <li>Training and exercising</li> <li>24/7 duty officer role</li> <li>Flood plan</li> <li>Local resilience forum</li> <li>Adherence to best practice advice.</li> <li>Performance management</li> <li>Regular review of Business Continuity Plan</li> </ul>	DMT STL HHCP				Likelihood
GD6	Not applying Equality and Diversity principles	<ul> <li>Non-compliance         with legal         requirements</li> <li>Discrimination         against group or         person</li> <li>Policies not suitable</li> </ul>	<ul> <li>Challenge by Govt         Department or         external agency</li> <li>Legal action and/or         compensation claim         by group or         individual</li> </ul>	<ul> <li>Staff training and awareness raising</li> <li>Regular review of Equality Impact assessments</li> </ul>	SMT				Likelihood  Staff attendance on EIA training.
GD7	Changes to Economic climate	<ul> <li>National and International factors</li> <li>Changes in Govt policy which affect national and local issues</li> <li>Local factors affecting businesses</li> </ul>	<ul> <li>Impact on service delivery generally either increase or decrease</li> <li>Loss of revenue, unexpected shortfall in budget surplus</li> </ul>	<ul> <li>Service Planning and Business Continuity planning</li> <li>Budget monitoring</li> </ul>	CMT DMT				Likelihood

GENE	GENERIC - SERVICE DELIVERY										
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating		
GD8	Unable to meet levels of service expected  Responding to statutory consultations within time  HS2 workload	<ul> <li>Insufficient staff</li> <li>Increase in demand from public or new work areas</li> <li>Pressure from external agencies</li> <li>Corporate issues</li> <li>Specific problem occurring in district e.g. pollution incident etc.</li> <li>New development e.g. impacting on contaminated land or noise, food poisoning outbreak</li> <li>Through unexpected surge / Increased workload</li> <li>HS2 workload</li> </ul>	<ul> <li>Customer dissatisfaction</li> <li>Complaints to Ombudsman</li> <li>Reputational damage</li> <li>Stress on staff</li> </ul>	<ul> <li>Service Planning</li> <li>Resource planning</li> <li>MoU with other Councils</li> <li>Stress Assessment</li> <li>One to one Meetings</li> <li>Open communication and discussion.</li> <li>Resources for planning application responses merged.</li> <li>Restructured service to address the changing demands.</li> </ul>	DMT	<ul> <li>Review of service delivery methods</li> <li>Continue to review the resource requirement from HS2</li> <li>Recruiting to the carried vacancies.</li> <li>Evidence being collated in order to evidence resource need.</li> </ul>		ongoing	Likelihood		
GD9	Failure to make progress on corporate and departmental priorities	Unable to provide sufficient resources to support these areas of work	<ul> <li>Reputation undermined due to failure to meet commitments that have been made publically.</li> <li>Refusal of staff to use cars</li> <li>Strike action</li> </ul>	<ul> <li>Regular prioritisation of work through services and corporate meetings</li> <li>Managing expectations by publishing and sticking to realistic time scales</li> <li>Continually monitor workloads</li> <li>Open communication</li> </ul>	DMT				Likelihood  Decrease due to time passed since Terms and Conditions Review, restructure.		
GD10	Inappropriate third party disclosure  Non-compliance with Sharing of Information Protocol	<ul> <li>Personal information shared with individuals not party to the WSIP</li> <li>Information becoming public which should not be.</li> <li>Poorly trained staff.</li> <li>Loss or theft of equipment</li> </ul>	<ul> <li>Legal Challenge</li> <li>Reputational damage to partnership working/ council</li> <li>Risk to vulnerable person increases</li> <li>Legal action and/or compensation claim by group or individual</li> <li>Failure of formal actions by council</li> </ul>	<ul> <li>Check info going out under Freedom of Information Act.</li> <li>Training of appropriate staff</li> <li>Use of E-CINs software</li> <li>Mobile Device hardware locked to prevent unauthorised access to data.</li> <li>Administrative remote deactivation.</li> <li>Retention and disposal of records</li> </ul>	DMT	Complete review of HCP retention policy	Staff Time	MAR 18	Impact		

GENE	GENERIC - SERVICE DELIVERY									
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating	
GD11	Failure to deliver projects to target	<ul> <li>Lack of support after Public consultation.         Non Commitment by the Council due to no financial allocations.         Executive         Committee delays.</li> <li>Poorly scoped project/programme</li> <li>Third party failure</li> <li>Support from other service areas</li> </ul>	<ul> <li>Design delays resulting in Project slippage, impact on Service Delivery, the Council's Financial Profile, and Failure to Achieve Targets.</li> <li>Contracts not being assigned and started on time.</li> <li>Failure to meet corporate strategy.</li> <li>Failure to meet DDA and equality standards.</li> <li>Failure to deliver expected savings</li> <li>Failure to meet customer expectations</li> </ul>	<ul> <li>Work Early with Members to gain Commitment.</li> <li>Resource management sufficient time in programme with SMART targets.</li> <li>Review of quality Manual to ensure compliance.</li> <li>Review the Equality &amp; Diversity Impact Assessments</li> <li>Training requirements, having correct skills in team, and undertake duties aligned to experience.</li> <li>Outsource if in-house services cannot be provided in desired timescales.</li> <li>Appropriate training</li> <li>Effective management control and project management.</li> <li>Project management training</li> </ul>	HHCP				Likelihood  No longer delivering construction projects May 2017	
GD12	Failure to maintain equipment calibration e.g. sound level meters, thermometers, test calibrators.	<ul> <li>Human error missing the test dates.</li> <li>Equipment Company going out of business.</li> <li>Failure to follow work instructions.</li> </ul>	<ul> <li>Inaccurate/ unreliable data produced</li> </ul>	<ul> <li>Work instructions</li> <li>Regular supervision of the calibration activities by supervisor</li> <li>Diarise calibration retests dates.</li> </ul>					Impact	

SER	VICE SPECIFIC - SERVICE DE	LIVERY (REGULATOR)	<b>(</b> )					
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource Due Date	Residual Risk Rating
SR 1	Inappropriate issue of licence/ misuse by licensee Failure to properly determine licence	<ul> <li>Fraudulent         application</li> <li>Poor staff training</li> <li>Out of date         procedures</li> <li>Application of         incorrect or out         dated procedures</li> </ul>	<ul> <li>Reputation         Bad publicity</li> <li>Impact of challenges         /appeals.</li> </ul>	<ul> <li>Maintain accurate controls and vigilance</li> <li>Proactive monitoring of staff training needs.</li> <li>Continues monitoring and improvement of procedures.</li> <li>Consulting with other responsible bodies and the Licensing Officers.</li> </ul>	RM	<ul> <li>Continuing Staff training &amp; training of new starters</li> <li>Continuing Quality monitoring</li> <li>Continuing procedural review</li> </ul>		Likelihood
SR 2	Incorrect conditions attached to licence	<ul> <li>Staff error</li> <li>incorrect information provided</li> </ul>	<ul> <li>Injury and Nuisance</li> <li>Reputation damage</li> <li>Bad publicity</li> <li>Impact of challenge/ appeals</li> </ul>	<ul> <li>Continues monitoring and improvement of procedures.</li> <li>Maintain accurate controls and vigilance</li> <li>Staff training</li> <li>Consulting with appropriate bodies</li> </ul>	RM	<ul> <li>Continuing Staff training &amp; training of new starters</li> <li>Quality monitoring scheme</li> </ul>		Likelihood
SR 3	Failure to set appropriate fees	<ul> <li>Incorrect record keeping</li> <li>failure to follow guidance</li> <li>failure to advertise fees</li> <li>legislative and case law changes</li> </ul>	<ul> <li>legal challenge</li> <li>reputation damage</li> </ul>	<ul> <li>Record keeping for time spent/ monies spent to allow accurate fee setting.</li> <li>Referral to guidance</li> <li>Use of well documented and challenged methodologies</li> <li>Staff training</li> <li>Councillor challenge of fees</li> <li>Advertisement of fees</li> </ul>	RM	<ul> <li>Continuing Staff training &amp; training of new starters</li> <li>Systems development to introduce time monitoring</li> <li>Annual review</li> </ul>		Likelihood  Historical 6 year review completed
SR 4	Loss of Paper records	<ul><li>Fire, flood</li><li>Incorrect disposal</li></ul>	Loss of history, plans, of premises.	Move to digital competed	RM			Likelihood  Project to digitise records completed.

	1							1	
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
SR S	Failure to carry out routine/ reactive work  Failure to deal with those failing to comply with licence conditions	<ul> <li>Staff levels, capacity,</li> <li>Inadequate staff knowledge or experience</li> <li>Increase in reactive workload or required formal action</li> <li>Lack of respect by licence holders for the conditions of licence</li> </ul>	<ul> <li>Failure to meet statutory targets</li> <li>Failure to act upon non compliance</li> </ul>	<ul> <li>Prioritisation of workload to those businesses that are non-compliant.</li> <li>Incidents of mandatory nature prioritised.</li> <li>Fleet inspections of taxis</li> <li>Increased monitoring of taxis, premises through compliance inspections</li> <li>Routine fleet inspections</li> <li>Routine premises compliance inspections.</li> <li>Policies review completed for street trading, sex establishments, taxi trade in 2016.</li> </ul>	RM	Ongoing review of policies associated with licensing and procedures.			Likelihood  Policies reviewed new enforcement policy and method implemented.
SR 6	Incorrect FHRS management	<ul> <li>Human error</li> <li>Poor staff training</li> <li>Out of date procedures</li> <li>Reference to out of date standards</li> <li>Software integration</li> </ul>	<ul><li>Reputation</li><li>Bad publicity</li><li>Appeals</li></ul>	<ul> <li>Maintain accurate controls and vigilance</li> <li>Proactive monitoring of staff training needs.</li> <li>Continuous monitoring and improvement of procedures.</li> </ul>	RM				Impact
SR 7	Failure of Primary authority arrangements.  Provision of poor or incorrect assured guidance	<ul> <li>Staff Error</li> <li>Insufficiently trained staff.</li> <li>Failure to understand primary authority process and arrangements</li> <li>Advice not fit for purpose</li> <li>Poor decision making</li> <li>Poor service delivery</li> </ul>	<ul> <li>Not meeting terms of primary authority arrangement</li> <li>Not recovering cost of the service provided</li> <li>Impact of advice implementation on business and WDC</li> <li>Poor reputation</li> <li>Revocation of arrangement</li> </ul>	<ul> <li>Maintain accurate records</li> <li>Nominated named signatory for assured advice</li> <li>Advice provision monitoring</li> <li>Staff training</li> <li>Competency Professional development</li> <li>Effective systems and procedures.</li> </ul>	RM				Impact
SR 8	Legal challenge to fee setting	Request from licence holder, previous licence holder or legal representative for evidence of six year accounts	<ul> <li>Unable to demonstrate that no profit or loss has been made for the services for which a fee is set.</li> <li>Unable to demonstrate that excess income was not entered into council funds rather than remaining ring-fenced.</li> <li>Refund licence holders</li> </ul>	<ul> <li>Fee setting review annually</li> <li>Account review</li> <li>Contained within separate budget</li> </ul>	RM	<ul> <li>Ongoing annual fee reviews</li> <li>review of animal licensing budgets</li> </ul>			Likelihood  Completed historic

SER	SERVICE SPECIFIC - SERVICE DELIVERY (REGULATORY)														
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	<b>Due Date</b>	Residual Risk Rating						
			the monies paid for six years.  • Legal challenge and costs associated						6 year review.						

						Further Action(s)	Resource	Due	
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	(if appropriate)	Resource	Date	Residual Risk Rating
SS1	Non-compliance with Section 17 of the Crime & Disorder Act (1998)	<ul> <li>Community safety not a consideration in the design and delivery of services or the decision making process.</li> </ul>	• Legal Challenge	Input to relevant Committee Reports	CMT				Likelihood
S2	Provision of incorrect information to police or other agencies	<ul> <li>Not following procedures</li> <li>Obtrusiveness.</li> <li>Wrongful arrest,</li> <li>Infringement to civil liberties</li> <li>Incorrect identification of offender on CCTV</li> </ul>	<ul><li>Reputation.</li><li>Claims.</li></ul>	<ul> <li>Operating procedures.</li> <li>Trained staff.</li> <li>Partnerships with Police.</li> </ul>	CCTV Manager				Likelihood
<b>S3</b>	Reduced Funding for Community Safety Partnership Initiative	Economic Climate	<ul> <li>Less money to spend on partnership priorities and greater pressure to mainstream.</li> <li>Unable to operate all initiatives</li> </ul>	<ul> <li>Bid for alternative funding</li> <li>Funding from PCC and University of Warwick</li> </ul>	SCM				Likelihood
<b>54</b>	Loss of power to CCTV & Control room	Failure of electrical supply to CCTV and Control room	<ul> <li>Systems Failure</li> <li>Partners not Supported</li> <li>Increased response time to incidents/threats to life.</li> </ul>	<ul> <li>Extra police resource to be called</li> <li>Retail radio system</li> <li>Some cameras now Wi-Fi</li> </ul>	SCM HHCP				Impact Likelihood
S5	Effectiveness of Dog Service	Current kennels going out of business	<ul> <li>Increased journey time to alternative kennels in Redditch.</li> <li>Increased cost of petrol and depreciation of vehicle.</li> </ul>	<ul> <li>Work with kennels to ensure billing is accurate and on time.</li> <li>Meet regularly with kennels owner</li> </ul>	SCM				Likelihood
SS6	vehicles  • Poorly maintained vehicles allowing access • Staff not trained in their responsibilities • Stress/Tiredness • Accidents  • Poorly maintained properties • Personal Poorly maintained vehicles allowing access • Legal claim their responsibilities • Poorly maintained vehicles allowing access • Legal claim their responsibilities • Poorly maintained vehicles allowing access • Legal claim their responsibilities • Poorly maintained vehicles allowing access • Legal claim their responsibilities • Poorly maintained vehicles allowing access • Legal claim their responsibilities • Poorly maintained vehicles allowing access • Legal claim their responsibilities • Poorly maintained vehicles allowing access		<ul> <li>Damage to vehicle or property</li> <li>Personal/wildlife injury</li> <li>Legal action, insurance claims etc.</li> <li>Pest control vehicles stolen</li> <li>Poison &amp; contents stolen and or dumped.</li> </ul>	<ul> <li>Knowing where the vehicles are. Trackers</li> <li>Regular maintenance and checks of vehicles</li> <li>Staff training at commencement of job role.</li> <li>Effective health &amp; safety controls and risk</li> </ul>	DMT				Likelihood

Risk Description	Access to the poisons room by other staff	Possible Consequences  • Poisonings of	Risk Mitigation/Control assessments	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
ble use of poisons	room by other staff	<ul> <li>Poisonings of</li> </ul>						
ble use of poisons	room by other staff	<ul><li>Poisonings of</li></ul>						
ble use of poisons	room by other staff	Poisonings of						
ble use of poisons	room by other staff	Poisonings of						
ble use of poisons	room by other staff	Poisonings of						JI
ble use of poisons	room by other staff	Poisonings of						
ble use of poisons	room by other staff	Poisonings of						
	<ul><li>members</li><li>Use of poisons</li><li>New brands/change of bait type</li></ul>	<ul><li>human/animal/ wildlife and environment</li><li>Use of inappropriate poison</li></ul>	<ul><li>Staff training</li><li>COSHH assessments</li><li>H&amp;S procedures in place</li><li>Locked storage</li></ul>	SCM	Keeping up to date with changes in the legislation surrounding poison application.			Likelihood
	Change in legislation/guidance							
ed Flood Alleviation is unable to be ed or supported	<ul> <li>Lack of support after Public consultation.</li> <li>Non Commitment by the Council due to no financial allocations.</li> <li>Executive Committee delays. Refusal of Planning Permission.</li> <li>Staff resource</li> </ul>	<ul> <li>Possible flooding events.</li> </ul>	<ul> <li>Work Early with Members to gain Commitment.</li> <li>Joint Working with EA and WCC</li> <li>Engage suitable contractor to deliver projects.</li> </ul>	ННСР	Work in partnership with corporate assets team and head of housing			Likelihood
								Decrease as no current projects for delivery by WDC. However supporting those delivered by partners.
own of affiliated AURN ring station (Hamilton )	<ul> <li>Loss of connectivity.</li> <li>Failure to carry out routine servicing.</li> <li>Vandalism/ fire or theft</li> </ul>	<ul> <li>Loss of data.</li> <li>Loss of DEFRA contract.</li> <li>Removal of DEFRA equipment.</li> </ul>	<ul> <li>Regular service schedule.</li> <li>Maintenance contract with specialist supplier.</li> </ul>	SCM EPTL				Impact
i		<ul> <li>Failure to carry out routine servicing.</li> <li>Vandalism/ fire or</li> </ul>	<ul> <li>Failure to carry out routine servicing.</li> <li>Vandalism/ fire or</li> <li>Loss of DEFRA contract.</li> <li>Removal of DEFRA equipment.</li> </ul>	<ul> <li>Failure to carry out routine servicing.</li> <li>Vandalism/ fire or</li> <li>Loss of DEFRA contract.</li> <li>Removal of DEFRA equipment.</li> <li>Maintenance contract with specialist supplier.</li> </ul>	<ul> <li>Failure to carry out routine servicing.</li> <li>Vandalism/ fire or</li> <li>Loss of DEFRA contract.</li> <li>Removal of DEFRA with specialist supplier.</li> <li>Waintenance contract with specialist supplier.</li> <li>EPTL</li> </ul>	<ul> <li>Failure to carry out routine servicing.</li> <li>Vandalism/ fire or</li> <li>Loss of DEFRA contract.</li> <li>Removal of DEFRA equipment.</li> <li>Maintenance contract with specialist supplier.</li> <li>EPTL</li> </ul>	<ul> <li>Failure to carry out routine servicing.</li> <li>Vandalism/ fire or</li> <li>Loss of DEFRA contract.</li> <li>Removal of DEFRA equipment.</li> <li>Maintenance contract with specialist supplier.</li> <li>EPTL</li> </ul>	• Failure to carry out routine servicing. • Vandalism/ fire or • Loss of DEFRA contract. • Removal of DEFRA equipment. • Maintenance contract with specialist supplier. • Waintenance contract with specialist supplier.

	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating
SS 10	Failure to maintain contaminated land database	<ul> <li>Staff error</li> <li>Inaccurate         identification of land</li> <li>Poor record         maintenance</li> <li>Change or software         and poor integration</li> </ul>	<ul> <li>Impact on human health and/or environmental damage.</li> <li>Financial liability.</li> <li>Reputation.</li> <li>Development of land without appropriate remediation.</li> <li>Incorrect information provided to land charges</li> <li>Failure to identify land in planning applications</li> </ul>	<ul> <li>Keeping database up to date.</li> <li>Effective assessment of relevant planning applications.</li> <li>Staff training</li> <li>Effective integration of data</li> </ul>	SCM EPTL				Likelihood
SS 11	Failure to improve air pollution (NO2) levels	<ul> <li>NO2 levels continue to exceed EU standards</li> <li>Failure to deliver air quality action plans</li> </ul>	Potential EU infraction fines against the UK are likely to be passed on to local authorities	<ul> <li>Partnership working with WCC to reduce traffic congestion in town centres</li> <li>Ongoing local air quality monitoring</li> <li>2015 Action Plan adopted</li> </ul>	SCM EPTL	Continuous working in partnership with WCC and PHE to deliver air quality action plan			Likelihood

SER	SERVICE SPECIFIC - SERVICE DELIVERY (COMMUNITY PARTNERSHIP)														
	Risk Description	Possible Triggers	Possible Consequences	Risk Mitigation/Control	Officer	Further Action(s) (if appropriate)	Resource	Due Date	Residual Risk Rating						
SC1	Informal Partnership working with WCC fails	<ul> <li>Staff integration</li> <li>Reduced funding</li> <li>Reduced support</li> <li>Policy changes at WCC or WDC</li> <li>Further WDC restructure</li> </ul>	<ul> <li>Reduced resources available</li> <li>Reduced service level and or quality</li> <li>Reduced support for communities</li> </ul>	<ul> <li>Regular dialogue &amp; monitoring</li> <li>Regular review of policy and changes</li> </ul>	СРТМ	Revising and developing new partnerships			Decrease due to Informal partnership in place for 18+ months						

SC2	Failure to or delay in payments to grants recipients  Incorrect amounts paid	<ul> <li>Untrained staff</li> <li>Loss of key staff</li> <li>Inaccurate data</li> <li>Lack of planning</li> <li>Resource Capacity</li> <li>Failure of the payment system</li> <li>Forget to make payment</li> </ul>	<ul> <li>Grant recipients         distressed</li> <li>Community activities         stopped or delayed due         to financial shortfall</li> <li>Negative publicity</li> </ul>	<ul> <li>Monthly monitoring of budgets against SLA's</li> <li>Trained staff</li> <li>Forward planning</li> </ul>	СРТМ		Impact
-----	--	---	---	--	------	--	--------

## <u>Key:</u>

CMT = Corporate Management Team
CPTM = Community Partnership Team Manager

DMT = Departmental Management Team

**ESTL** = **Environment Protection Team Leader** 

**HHCP** = **Head** of **Health** and **Community Protection** 

RM = Regulatory Manager

SCM = Safer Communities Manager

**SMT = Senior Management Team** 

**STL** = **Service Team Leader** 

Generic																					
		Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb		Mar		Apr	Мау	Jun	Jul	Aug		Sept Annual Review (Peer etc)	Oct	Nov	Nov Portfolio Holder	Dec	Jan 2017
GR1.	Staff Resources - Loss of key staff/skills, Appointment & Retention, ill health and other emergencies. HCP restructure, Staff Transitions						PH Review		PH Review						PH Review	Risk Decrease - Recruitment to vacant posts. Officers not yet in post (october)			review		
GR2.	Health and Safety risks to staff - evening/ night time enforcement, Lone working, staff safety, Injuries and abuse.																				
GR3.	Driving for work (council and personal											1									
GR4.	vehicles) – Accidents.  Home & Mobile working – poor service delivery level and health and safety risks present.																				
GR5.	Inadequate training		Training Provided																		
GR6.	provided to staff Failure to identify		Frovided																		
GI1.	legislative changes Loss of IT and records Web-site Maintaining Computerised Systems and Records Integration of different software solutions																				
GI2.	Loss of accommodation/ Non availability of Office Building			'																	
GS1	Impact of climate change on service delivery																				
GS2	Failure of other WDC/ partners/ stakeholders department to provide services as agreed / expected (neighbourhood/ property)																				
GE1	Increased demand on services due to Emergency situation; Emergency stops basic Council Operations																				
GE2	Widespread disaster beyond local capabilities to cope and reasonable attempts to plan																				
GE3 GD1	Ineffective Emergency preparedness Provision of incorrect/ poor quality																				
GD2	information/ advice Possibility of Fraud/																				
GD3	Corruption  Possibility of Non- compliant procurement Ineffective procurement																				
GD4	Failure to correctly monitor/ manage budgets Impact of the self service system upon budget control										Decreased Risk – Implemente d a solution (under test)										
GD5	Compliance with legal duty. / Failure to deliver service within statutory timescales/ Failure to meet requirements of civil contingencies act.																				
GD6	Not applying Equality and Diversity principles																				
GD7 GD8	Changes to Economic climate Unable to meet levels																				
000	Shabic to meet levels																	1	1		

		ı	T.	1			•	T.	II.	Ti .				 ,	
GD9	of service expected Failure to make										D	ecreased			-
GD9	progress on corporate			1							Ri	isk			
	and departmental														
GD10	priorities Inappropriate third														
GD10	party disclosure			'						1		1			
	Non-compliance with														
	Sharing of Information Protocol														
GD11	Failure to deliver	Completed													
	projects to target	Construction													
	e.g. complete design and construction	projects													
	projects on time														
GD12	Failure to maintain calibration of														
	equipment														
	SPECIFIC														
SR1	Inappropriate issue of														
	licence/ misuse by														
	licensee Failure to properly														
	determine licence														
SR2.	Incorrect conditions attached to licence														
SR3	Failure to set		Approved &												
	appropriate fees		Review												
SR4	Loss of Paper records	Project	completed												-
	•	Completed													
SR5	Failure to carry out routine/ reactive work														-7
	Failure to deal with														
	those failing to														
	comply with licence conditions														
SR6	Incorrect FHRS														
	management														
SR7	Failure of Primary authority														
	arrangements.														
	Provision of poor or														
	incorrect assured guidance														
SR8	Legal challenge to fee														
SS1	setting Non-compliance with														+
331	Section 17 of the			'								1			
	Crime & Disorder Act														
SS2	(1998) Provision of incorrect														+
	information to police			'						'		'			
SS3	or other agencies Reduced Funding for														
333	Community Safety			'											
00.4	Partnership Initiative														
SS4	Loss of power to CCTV & Control room														
SS5	Effectiveness of Dog														
	Service														1
SS6	Theft of council pest control vehicles														
SS7	Unsuitable use of														
SS8	poisons Identified Flood							SLA				ecreased			<del>  </del>
330	Alleviation Schemes							introduced				ecreased sk			
	unable to be delivered														
SS9	or supported Breakdown of														+
	affiliated AURN														
	monitoring station (Hamilton Terrace)														
SS10	Failure to maintain														<del>                                     </del>
	contaminated land														
SS11	database Failure to improve air														+
5511	pollution (NO2) levels														<u>                                     </u>
SC1	Informal Partnership										D	ecreased			
	working with WCC fails										Ri	isk			
SC2	Failure to or delay in														
	payments to grants recipients														
	Incorrect amounts														
	paid														1
		·	· · · · · · · · · · · · · · · · · · ·		 	 ·		·			·		 · · · · · · · · · · · · · · · · · · ·	 	

# Methodology for assessing risk: Criteria for scoring residual risk rating

## **Probability of Occurrence**

Estimation	Description	Indicators
5: High (Probable)	Likely to occur each year (e.g. considered as more than 50% chance of occurrence in any year).	<ul> <li>Potential of it occurring several times within the specified period (for example - ten years).</li> <li>Has occurred recently.</li> </ul>
4: Medium to High	Apply judgement	Apply judgement
3: Medium (Possible)	Likely to occur during a 10 year period (considered as between 5% and 25% chance of occurrence in any year).	<ul> <li>Could occur more than once within the specified period (for example - ten years).</li> <li>Could be difficult to control due to some external influences.</li> <li>There's a history of occurrence</li> </ul>
2: Low to Medium	Apply judgement	Apply judgement
1: Low (Remote)	Not likely to occur in a 10 year period (considered as less than 2% chance of occurrence in any year).	<ul><li>Has not occurred.</li><li>Unlikely to occur.</li></ul>

#### **Consequences**

Estimation	Description			
5: High	<ul> <li>Financial impact on the organisation is likely to exceed £500K</li> <li>Significant impact on the organisation's strategy or</li> </ul>			
	operational activities			
	Significant stakeholder concern			
4: Medium to High	Apply judgement			
3: Medium	<ul> <li>Financial impact on the organisation likely to be between £100K and £250K</li> </ul>			
	<ul> <li>Moderate impact on the organisation's strategy or operational activities</li> </ul>			
	Moderate stakeholder concern			
2: Low to Medium	Apply judgement			
1: Low	<ul> <li>Financial impact on the organisation likely to be less that £10K</li> </ul>			
	<ul> <li>Low impact on the organisation's strategy or operational activities</li> </ul>			
	Low stakeholder concern			

# Risk Management Framework: Engagement of Members Endorsed by Executive 11<sup>th</sup> January 2012

#### **Executive**

S The SBRR to continue to be reviewed on a quarterly basis by Executive (and so by extension Finance & Audit Scrutiny Committee).

#### **Finance & Audit Scrutiny Committee**

S In conjunction with this, Finance & Audit Scrutiny Committee will also review each quarter a specific Service Area's Risk Register, focusing on the high risks.

This will necessitate the attendance of the relevant Service Area Manager to present their risk register and answer questions from members of Finance & Audit Scrutiny Committee on it. This approach will mean that over a two year period, the Committee will review all Service Risk Registers (SRR).

#### **Portfolio Holders**

- S Portfolio Holders to review their respective SRR quarterly with their service area managers.
- Although not mandatory, Shadow Portfolio Holders are encouraged to review the SRR of their respective Portfolios with service area managers on a quarterly basis also.
- S Portfolio Holder Statements (PHS) are to include the top three risks facing their services.

WARWICK DISTRICT COUNCIL		y Committee	Agenda I	tem No.
Title		Comments from	m the Exe	cutive
For further information aboreport please contact	ut this	Amy Barnes Senior Committee Services Officer 01926 456114 committee@warwickdc.gov.uk		
<b>Wards of the District direct</b>	v affected	n/a	go	- Cart
Is the report private and co and not for publication by v paragraph of schedule 12A Local Government Act 1972 the Local Government (Acco Information) (Variation) On	infidential irtue of a of the f, following ess to der 2006?	No		
Date and meeting when iss last considered and relevan number		n/a		
Background Papers		Executive - 08	.02.2017	
Contrary to the policy frame				No No
Koy Docicion?		No		
Key Decision?	d Dia2 (Tf.	! l		NI -
Included within the Forwar number)	d Plan? (If y	es include refe	erence	No
<b>Included within the Forwar</b>	t Undertake		erence	No No
Included within the Forwar number) Equality Impact Assessmen	t Undertake		erence	
Included within the Forwar number)  Equality Impact Assessmen  Officer/Councillor Approval  Officer Approval  Chief Executive/Deputy Chief Executive	t Undertake	en	erence	
Included within the Forwar number) Equality Impact Assessmen  Officer/Councillor Approval  Officer Approval  Chief Executive/Deputy Chief Executive Head of Service	t Undertake	en	erence	
Included within the Forwar number)  Equality Impact Assessmen  Officer/Councillor Approval  Officer Approval  Chief Executive/Deputy Chief Executive  Head of Service  CMT	t Undertake	en	erence	
Included within the Forwar number)  Equality Impact Assessmen  Officer/Councillor Approval  Officer Approval  Chief Executive/Deputy Chief Executive  Head of Service  CMT  Section 151 Officer  Monitoring Officer	t Undertake	Name		
Included within the Forwar number)  Equality Impact Assessmen  Officer/Councillor Approval  Officer Approval  Chief Executive/Deputy Chief Executive  Head of Service  CMT  Section 151 Officer	t Undertake	Name		
Included within the Forwar number)  Equality Impact Assessmen  Officer/Councillor Approval  Officer Approval  Chief Executive/Deputy Chief Executive  Head of Service  CMT  Section 151 Officer  Monitoring Officer	t Undertake	Name		
Included within the Forwar number)  Equality Impact Assessmen  Officer/Councillor Approval  Officer Approval  Chief Executive/Deputy Chief Executive  Head of Service  CMT  Section 151 Officer  Monitoring Officer  Finance	Date	Name Andrew Jor		
Included within the Forwar number)  Equality Impact Assessmen  Officer/Councillor Approval  Officer Approval  Chief Executive/Deputy Chief Executive  Head of Service  CMT  Section 151 Officer  Monitoring Officer  Finance  Portfolio Holder(s)	Date	Name Andrew Jor		

#### 1. **Summary**

1.1 This report summarises the Executive's response to comments given by the Finance & Audit Scrutiny Committee on reports submitted to the Executive on 27 September 2017.

#### 2. Recommendation

2.1 That the responses made by the Executive be noted, as set out in Appendix 1 to the report.

#### 3. Reasons for the Recommendation

3.1 This report is produced to create a dialogue between the Executive and the Finance & Audit Scrutiny Committee, ensuring that the Scrutiny Committee is formally made aware of the Executive's responses.

#### 4. **Policy Framework**

#### 4.1 Fit for the Future (FFF)

The Council's FFF Strategy is designed to deliver the Vision for the District of making it a Great Place to Live, Work and Visit. To that end amongst other things the FFF Strategy contains several Key projects.

The FFF Strategy has 3 strands – People, Services and Money and each has an external and internal element to it. The table below illustrates the impact of this proposal if any in relation to the Council's FFF Strategy.

FFF Strands							
People	Services	Money					
External							
Health, Homes, Communities	Green, Clean, Safe	Infrastructure, Enterprise, Employment					
Intended outcomes: Improved health for all Housing needs for all met Impressive cultural and sports activities Cohesive and active communities	Intended outcomes: Area has well looked after public spaces All communities have access to decent open space Improved air quality Low levels of crime and ASB	Intended outcomes: Dynamic and diverse local economy Vibrant town centres Improved performance/ productivity of local economy Increased employment and income levels					
Impacts of Proposal							
Nil	Nil	Nil					
Internal							
Effective Staff	Maintain or Improve Services	Firm Financial Footing over the Longer Term					
Intended outcomes: All staff are properly trained All staff have the appropriate tools	Intended outcomes: Focusing on our customers' needs Continuously improve our processes	Intended outcomes: Better return/use of our assets Full Cost accounting Continued cost					

All staff are engaged, empowered and supported The right people are in the right job with the right skills and right behaviours	Increase the digital provision of services	management Maximise income earning opportunities Seek best value for money
Impacts of Proposal		
Nil	Nil	Dialogue between Scrutiny and Executive enables robust decision making and ensures all elements of the proposal are taken into account.

#### 4.2 **Supporting Strategies**

Each strand of the FFF Strategy has several supporting strategies; however, this report is for governance purposes. It is important that when the Executive has not accepted a recommendation by the Scrutiny Committee, an explanation is provided.

#### 4.3 **Changes to Existing Policies**

There are no changes to existing policies.

#### 4.4 Impact Assessments

There are no new policy changes in respect of equalities.

#### 5. **Budgetary Framework**

5.1 There is no impact on the budgetary framework. This is for the Committee's information only.

#### 6. Risks

6.1 This Committee contributes to the effective minimisation of risk by fulfilling its duties in a timely manner and scrutinising the work undertaken by the Executive.

#### 7. Alternative Option(s) considered

7.1 The only alternative option is not to undertake this aspect of the overview and scrutiny function.

#### 8. **Background**

- 7.1 As part of the scrutiny process, the Committee no longer considers the whole of the Executive agenda.
- 7.2 Councillors are emailed at the time of the publication of the Executive and Scrutiny Committee agendas, asking them to contact Committee Services by 9.00 am on the day of the Scrutiny Committee, to advise which Executive items they wish the Scrutiny Committee to pass comment on and the reasons why.

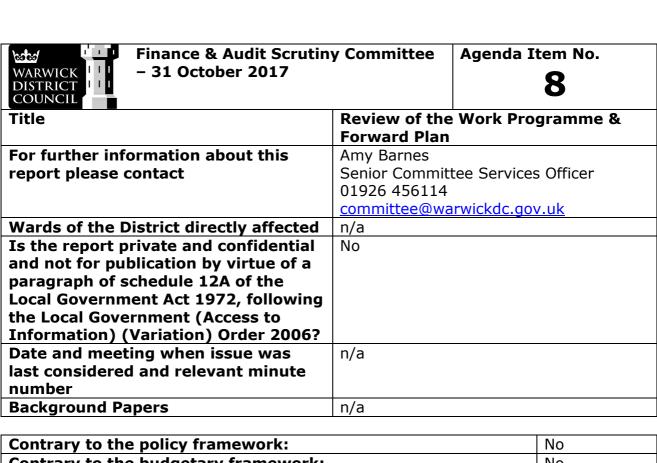
7.3	As a result, at its meeting on 4 April 2017, the Finance & Audit Scrutiny Committee considered the items detailed in the appendices. The responses which the Executive gave are also shown.

7.3

# Responses from the meeting of the Executive held on 27 September 2017 to the Finance and Audit Scrutiny Committee's comments

Item no	3	Title	Fees and Charges 2018/19
Scrutiny Commer			nce & Audit Scrutiny Committee supported the endations in the report.
Executive Response		The Exec	utive noted the support.

Item no	7	Title	Risk Management Annual Report 2016-17
_	Scrutiny Comment		nce & Audit Scrutiny Committee supported the endations in the report.
Executive Response		The Exec	utive noted the support.



Contrary to the budgetary framework:	No
Key Decision?	No
Included within the Forward Plan? (If yes include reference number)	No
Equality Impact Assessment Undertaken	No

Officer Approval	Date	Name
Chief Executive/Deputy Chief	Date	Name
Executive		
Head of Service		
CMT		
Section 151 Officer	19/10/2017	Andrew Jones
Monitoring Officer		
Finance		
Portfolio Holder(s)		
<b>Consultation &amp; Community</b>	Engagement	
n/a		
,		
Final Decision?		Yes
Suggested next steps (if no		

#### 1. **Summary**

1.1 This report informs the Committee of its work programme for 2017/18 (Appendix 1) and the current Forward Plan (Appendix 2).

#### 2. Recommendation

- 2.1 Members consider the work programme and agree any changes as appropriate.
- 2.2 The Committee to; identify any Executive items on the Forward Plan which it wishes to have an input before the Executive makes its decision; and to nominate a Member to investigate that future decision and report back to the Committee.

#### 3. Reasons for the Recommendation

- 3.1 The work programme should be updated at each meeting to accurately reflect the workload of the Committee.
- 3.2 If the Committee has an interest in a future decision to be made by the Executive it is within the Committee's remit to feed into the process.
- 3.3 The Forward Plan is the Executive's future work programme. If any non-Executive Member or Members highlight items which are to be taken by the Executive which they would like to be involved in, those Members can then provide useful background to the Committee when the report is submitted to the Executive and when the Committee passes comment on it.

#### 4. Policy Framework

#### 4.1 Fit for the Future (FFF)

The Council's FFF Strategy is designed to deliver the Vision for the District of making it a Great Place to Live, Work and Visit. To that end amongst other things the FFF Strategy contains several Key projects.

The FFF Strategy has 3 strands – People, Services and Money and each has an external and internal element to it. The table below illustrates the impact of this proposal if any in relation to the Council's FFF Strategy.

FFF Strands							
People	Services	Money					
External							
Health, Homes, Communities	Green, Clean, Safe	Infrastructure, Enterprise, Employment					
Intended outcomes: Improved health for all Housing needs for all met Impressive cultural and sports activities Cohesive and active communities	Intended outcomes: Area has well looked after public spaces All communities have access to decent open space Improved air quality Low levels of crime and ASB	Intended outcomes: Dynamic and diverse local economy Vibrant town centres Improved performance/ productivity of local economy Increased employment and income levels					

Impacts of Proposal	_	_
Nil	Nil	Nil
Internal		
Effective Staff	Maintain or Improve Services	Firm Financial Footing over the Longer Term
Intended outcomes: All staff are properly trained All staff have the appropriate tools All staff are engaged, empowered and supported The right people are in the right job with the right skills and right behaviours	Intended outcomes: Focusing on our customers' needs Continuously improve our processes Increase the digital provision of services	Intended outcomes: Better return/use of our assets Full Cost accounting Continued cost management Maximise income earning opportunities Seek best value for money
Impacts of Proposal		
Nil	Nil	Dialogue between Scrutiny and Executive enables robust decision making and ensures all elements of the proposal are taken into account.

#### 4.2 **Supporting Strategies**

Each strand of the FFF Strategy has several supporting strategies; however, this report is for governance purposes. Members need to be mindful of the objectives above, when deciding what topics to add to the work programme.

The work carried out by the Committee helps the Council to improve in line with its priority to manage services openly, efficiently and effectively.

- 4.3 **Changes to Existing Policies -** There are no changes to existing policies.
- 4.3 **Impact Assessments** There are no new policy changes in respect of equalities.

#### 5. **Budgetary Framework**

5.1 All work for the Committee has to be carried out within existing resources. Therefore, there is a limit to the time available that officers will have to assist Members, so the Committee may wish to prioritise areas of investigation.

#### 6. Risks

6.1 This Committee contributes to the effective minimisation of risk by fulfilling its duties in a timely manner and scrutinising the work undertaken by the Executive.

#### 7. Alternative Option(s) considered

7.1 The only alternative option is not to undertake this aspect of the overview and scrutiny function.

#### 8. **Background**

- 8.1 The five main roles of overview and scrutiny in local government are: holding to account; performance management; policy review; policy development; and external scrutiny.
- 8.2 The pre-decision scrutiny of Executive decisions falls within the role of 'holding to account'. To feed into the pre-decision scrutiny of Executive decisions, the Committee needs to examine the Council's Forward Plan and identify items which it would like to have an impact upon.
- 8.3 The Council's Forward Plan is published on a monthly basis and sets out the key decisions to be taken by the Council in the next twelve months. The Council only has a statutory duty to publish key decisions to be taken in the next four months. However, the Forward Plan was expanded to a twelve month period to give a clearer picture of how and when the Council will be making important decisions.
- 8.4 A key decision is a decision which has a significant impact or effect on two or more wards and/or a budgetary effect of £50,000 or more.
- 8.5 The Forward Plan also identifies non-key decisions to be made by the Council in the next twelve months, and the Committee, if it wishes, may also prescrutinise these decisions.
- 8.6 The Committee should be mindful that any work it wishes to undertake would need to be undertaken without the need to change the timescales as set out within the Forward Plan. The Committee may wish to give greater consideration to the reports in Section 2 of Appendix 1, to maximise the time available for Members to input into the process.

# Finance and Audit Scrutiny Committee WORK PROGRAMME 2017/18

#### 31 October 2017

1	Service Risk Register Review (Health & Community Protection)	Audit Item	Marianne Rolfe
2	Significant Business Risk Register	Audit Item	Richard Barr
3	National Fraud Initiative Update	Audit Item	Ian Wilson

#### **28 November 2017**

1	Internal Audit Quarter 2 2017/18 Progress Report	Audit Item	Richard Barr
2	Annual Governance Statement Qtr 2 Action Plan	Audit Item	Richard Barr
	Report		
3	Treasury Management Half Year Review	Audit Item	Karen Allison
4	Update on Corporate Fraud Team	Scrutiny	Mike Snow /
		Item	Andrea Wyatt

## 3 January 2018

1	Contracts Register - Chief Executive	Scrutiny	Chris Elliott
		Item	

#### 6 February 2018

1	Service Risk Register Review (Cultural Services)	Audit Item	Head of Service
2	Significant Business Risk Register	Audit Item	Richard Barr

#### 6 March 2018

1	Internal Audit Quarter 3 2017/18 Progress Report	Audit Item	Richard Barr
2	Annual Governance Statement Qtr 3 Action Plan	Audit Item	Richard Barr
	Report		

#### 4 April 2018

2	Internal Audit Strategic Plan (2018/19 to 20/20/21 plan)	Audit Item	Richard Barr
3	Procurement Strategy Annual Review	Audit Item	John Roberts
4	2018/19 External Audit Plan	Audit Item	Mike Snow
5	End of Term Report	Scrutiny	Amy Barnes /

# Appendix 1

		item	Chair
6	Health & Community Protection – Contracts Register	Scrutiny	Marianne Rolfe
		Item	

# 30 May 2018

1	Annual Governance Statement	Audit Item	Richard Barr
2	Internal Audit Quarter 4 Progress Report	Audit Item	Richard Barr
4	Service Risk Register Review (Finance)	Audit Item	Rob Hoof
1	1 Significant Business Risk Register		Richard Barr

## June 2018

1	Treasury Management Annual report	Audit Item	Karen Allison
---	-----------------------------------	------------	---------------



# Warwick District Council Forward Plan November 2017 to January 2018

# **Councillor Andrew Mobbs Leader of the Executive**

The Forward Plan is a list of all the Key Decisions which will be taken by the Executive in the next four months. The Warwick District Council definition of a key decision is: - a decision which has a significant impact or effect on two or more wards and/or a budgetary effect of £50,000 or more.

Whilst the majority of the Executive's business at the meetings listed in this Forward Plan will be open to the public and media organisations to attend, there will inevitably be some business to be considered that contains, for example, confidential, commercially sensitive or personal information.

This is formal notice under the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 that part of the Executive meeting listed in this Forward Plan will be held in private. This is because the agenda and reports for the meeting will contain exempt information under Part 1 of Schedule 12A to the Local Government Act 1972 (as amended) and that the public interest in withholding the information outweighs the public interest in disclosing it. Those items which are proposed to be considered in private are marked as such along with the reason for the exclusion in the list below.

If you would like to make representations or comments on any of the topics listed below, including the confidentiality of any document, you can write to the contact officer, as shown below, at Riverside House, Milverton Hill, Royal Learnington Spa, Warwickshire, CV32 5HZ. Alternatively you can phone the contact officer on (01926) 456114. If your comments are to be referred to in the report to the Executive or Committee they will need to be with the officer 7 working days before the publication of the agenda. You can, however, make comments or representations up to the date of the meeting, which will be reported orally at the meeting. The Forward Plan will be updated monthly and you should check to see the progress of the report you are interested in.

(907)

Section 1 – The Forward Plan November 2017 to January 2018						
Topic and Reference	Purpose of report	If requested by Executive - date, decision & minute no.	Date of Executive, Committee or Council meeting	Publication Date of Agendas	Contact Officer & Portfolio Holder	External Consultees/ Consultation Method/ Background Papers

29 November 2017					
12 Month Review of New Housing Allocations Policy (Ref 858)	To review the working of the new Housing Allocations Policy.	Executive 29/11/2017	21/11/2017	Ken Bruno Cllr Phillips	
General Fund Base Budgets 2018/19 to include Budget Review for the current year and FFF update (Ref 877)	To consider the following year revenue budgets for the General Fund and update Members on the latest Budgets for 2017/18 and Fit for the Future (FFF) update.	Executive 29/11/2017	21/11/2017	Marcus Miskinis Cllr Whiting	
HRA Base Budgets 2018/19 (Ref 878)	To consider the following year revenue budgets for the HRA and update Members on the latest position for the current year.	Executive 29/11/2017	21/11/2017	Andrew Rollins Cllr Phillips	
Consideration of a Hackney Carriage Vehicle Limitation Policy (Ref 851)	To update members on the results of the WDC Hackney Carriage Unmet Demand Survey and:  Meeting1 – Introduce highlights of survey and propose a 6 week consultation on recommended options outlined in the survey.  Meeting 2 – Update on the consultation & determine any	Executive 29/11/2017	21/11/2017	Lorna Hudson Cllr Thompson	Taxi trade, local business, safer communities, disability, equality and other local group representatives, Town Councils, Police. Questionnaire on website/email.

	change to policy, following the consultation.				CTS Traffic & Transportation Final Report - July 2016 Licensing & regulatory Committee 25/9/2017
Corporate Apprenticeships Funding (Ref 903)	To consider the funding for the corporate apprenticeship scheme	Executive 1/11/2017 29/11/2017	21/11/2017	Elaine Priestley Cllr Mobbs	

**December 2017 –** No scheduled Executive meetings at this time

<b>4 January 2018 –</b> No	items planned for consideration at	this time				
Re-commissioning of services provided by the Voluntary and Community Sector 2018-2021 and review of VCS investment (Ref 884)	For members to approve the tender specification for the recommissioning of VCS services for 2018-2021 and to approve the recommendations for savings relating to the Council's investment in the VCS within the H&CP budget for 2018 – 19.  (It is anticipated that part or all of this report will be considered in confidential session by the Executive because it contains information relating to the financial or business affairs of any particular person (including the authority holding that information))		Executive 29/11/2017 Reason 5 4/1/2018	19/12/2018	Liz Young Cllr Thompson	To follow

Revisions to the Constitution/ Delegation Agreement (Ref 819)	To request revisions to the Constitution/ Delegation Agreement with regard to the determination of Planning	Executive 4/1/2018	19/12/2018	Tracy Darke/Gar y Fisher	
	Applications.			Cllr Rhead	
Business Improvement District Leamington (Ref 906)	To receive an update on the renewal process for Leamington Spa BID	Executive 4/1/2018	19/12/2018	Suzee Laxton Cllr Butler	

Section 2 Key decisions which are anticipated to be considered by the Council between February and April 2018						
Topic and Reference	Purpose of report	If requested by Executive – date, decision & minute no.	Date of Executive, Committee or Council meeting	Publication Date of Agendas	Contact Officer & Portfolio Holder	External Consultees/ Consultation Method/ Background Papers
7 February 2018				•	•	
General Fund 2018/19 Budgets & Council Tax (Ref 885)	To update Members on the overall financial position of the Council, consider the General Fund Revenue and Capital Budgets for the following financial Year. To propose the Council Tax for the following year		Executive 7/2/2018	30/1/2018	Mike Snow Cllr Whiting	
HRA Rent Setting 2018/19 (Ref 886)	To report on the proposed level of Housing Rents for the following year and the proposed budget		Executive 7/2/2018	30/1/2018	Mike Snow Cllr Phillips	
Heating, Lighting and Water Charges 2018/19 – Council Tenants (Ref 887)	To propose the level of recharges to council housing tenants to recover the costs of communal heating, lighting and water supply		Executive 7/2/2018	30/1/2018	Mike Snow Cllr Phillips	
Treasury Management Strategy (Ref 888)	To seek member approval of the Treasury Management Strategy and Investment Strategy for the		Executive 7/2/2018	30/1/2018	Mike Snow Cllr Whiting	

	forth coming year				
7 March 2018					
One Stop Shop Business Case (Ref 894)	Provide a Business Case to ensure that the shared One Stop Shop Service is in line with Warwick District Council's ICT & Digital Strategy 2015-19	Executive 7/3/2018	27/2/2018	Graham Folkes- Skinner Cllr Grainger	
Car Park Strategy (Ref 895)	To seek approval for the proposed car parking strategy 2018-2028	Executive 7/3/2018	27/2/2018	Paul Garrison Cllr Grainger	

Section 3 Key	decisions which are anticipate	d to be conside	red by the Co	uncil but the date for	which is to be	confirmed
Topic and Reference	Purpose of report	History of Committee Dates & Reason code for deferment	Contact Officer & Portfolio Holder	Expansion on Reasons for Deferment	External Consultees/ Consultation Method/ Background Papers	Request for attendance by Committee
Council Development Company (Ref 727)	To consider a report on establishing a Council Development Company.	Executive 9/3/2016 2/6/2016 29/6/2016 Reasons 1 & 2	Bill Hunt Cllr Phillips	Awaiting further information on the implications of the Housing & Planning Act.		
Leisure Development – Phase II (Kenilworth) (Ref 803)	To agree the scope of Phase II.	Executive 28/9/2016 Reason 5	Rose Winship Cllr Coker			

	<u> </u>		I =	T	T
HRA Asset			Bill Hunt		
Management			Cllr Phillips		
and					
Development					
Policy					
(Ref 829)					
Recording and	To inform members of the	Council	Graham	Currently being	
Broadcasting of	research into the potential to	29/6/2016	Leach	investigated in	
Public Meetings	record and broadcast all Council	Executive	Cllr Mobbs	tandem with Council	
(Ref 840)	meetings as per the Notice of	<del>5/1/2017</del>		Chamber PA issues.	
	Motion to Council.	<del>8/2/2017</del>			
		Reason 3			
Councillors IT	To report back on the work of	Executive	Graham	Awaiting the	
(Ref 841)	the Councillor IT Working Party.	<del>5/1/2017</del>	Leach	outcome of	
		<del>8/2/2017</del>	Cllr Mobbs	Members'	
		Reason 3		Allowances Review.	
WDC Enterprise	To seek approval to establish a	Executive	Gayle		
- New Trading	Local Authority Trading	<del>2/11/2016</del>	Spencer		
Arm	Company, to expand support	Reason5	Cllr Butler		
(Ref 817)	provision whilst capitalising on	<del>5/1/2017</del>			
	existing skills to maximise	Reason5			
	income.	<del>8/2/2017</del>			
		Reason 5			
Events Review	To review the provision and	Executive	James		
(Ref 832)	support of events in the District.	<del>8/3/2017</del>	DeVille		
		Reason 4	Cllr Butler		
HQ Relocation	To consider the outcomes of the	Executive	Bill Hunt	Timing is dependent	
Project -	phase 1 work and, if	<del>26/07/2017</del>	Cllrs Mobbs,	on the completion of	
outcome of	appropriate, seek approval for	Reason 3	Whiting,	the planning,	
phase 1 work	commencement of the phase 2		Rhead,	marketing and	
(Ref 801)	delivery works.		Butler,	procurement	
, ,	,		Grainger	processes.	
Proposed	To agree the Council's level of	Executive	Andrew	•	
Relocation of	support in enabling the school	<del>28/06/2017</del>	Jones		
Kenilworth	to take its proposals forward.	Reason 3	Cllr Mobbs		
School		_			
(Ref 869)					

Policy on Regulating the Private Rented Sector (Ref 880)	To adopt a revised policy on private rented sector regulation in light of new legislation and guidance.		Ken Bruno Cllr Phillips	Awaiting the publication of government guidance.	
Linen Street Car Park (Ref 861)	To consider recommendations for redevelopment for the Linen Street Car Park facility	Executive 28/06/2017 Reason 3	Paul Garrison Cllr Grainger		Ward Councillors
Leamington Cemetery North Lodge (Ref 828)	To review the future use of Leamington Cemetery North Lodge.	Executive 4/4/2017 28/06/2017 31/08/2017 Reason 3	Rob Hoof Cllr Grainger		
Corporate Asset Management Strategy (Ref 641)	To propose an Asset Management Strategy for all the Council's buildings and land holdings.	Executive  29/6/2016  Reason 5 1/9/16  Reasons 3 & 5 5/1/2017  Reasons 3 & 5 8/2/2017  Reasons 3 & 5 26/07/2017  Reasons 3 & 5 31/8/2017  Reason 3	Bill Hunt Cllrs Mobbs, Butler, Grainger, Coker & Whiting		
Leamington Spa Car Parking Displacement Plan (Ref 844)	To set out the options available should vehicles be displaced from Covent Garden car park and to consider alternative parking options within Leamington Town Centre.	Executive 4/4/2017 Reason 2 31/08/2017 Reason 3 27/9/2017 Reason 5	Gary Charlton Cllr Grainger		

Sect	ion 4 – Items which are antic	ipated to be conside	ered by the Ex	ecutive but are	e NOT key de	cisions
Topic and Reference	Purpose of report	If requested by Executive - date, decision & minute no.	Date of Executive, Committee or Council meeting	Publication Date of Agendas	Contact Officer & Portfolio Holder	External Consultees/ Consultation Method/ Background Papers

29 November 201	17			
Rural Urban Community Initiative Scheme Applications	To consider applications for Rural and Urban Initiative Grants.	Executive 29/11/2017	21/11/2017	Jon Dawson Cllr Whiting
Internal Audit Quarter 2 Progress Report	To review progress in achieving the Audit Plan.	Executive 29/11/2017	21/11/2017	Jon Dawson Cllr Whiting
December 2017 -	- No scheduled Executive meetings at this tir	me.		
4 January 2018				
Rural Urban Community Initiative Scheme Applications	To consider applications for Rural and Urban Initiative Grants.	Executive 4/1/2018	21/12/2017	Jon Dawson Cllr Whiting
Review of Significant Business Risk Register	To inform Members of the Significant Risks to the Council	Executive 4/1/2018	21/12/2017	Richard Barr Cllr Mobbs
7 February 2018				
Rural Urban Community Initiative Scheme Applications	To consider applications for Rural and Urban Initiative Grants.	Executive 7/2/2018	30/1/2018	Jon Dawson Cllr Whiting

Delayed reports:

If a report is late, officers will establish the reason(s) for the delay from the list below and these will be included within the plan above:

- 1. Portfolio Holder has deferred the consideration of the report
- 2. Waiting for further information from a Government Agency
- 3. Waiting for further information from another body
- 4. New information received requires revision to report
- 5. Seeking further clarification on implications of report

Details of all the Council's committees, Councillors and agenda papers are available via our website <a href="www.warwickdc.gov.uk/committees">www.warwickdc.gov.uk/committees</a>

The forward plan is also available, on request, in large print on request, by telephoning (01926) 456114