The background of the slide features a large, light blue watermark of the University of Alberta crest. The crest is a shield divided into four quadrants. The top-left quadrant shows a cross with a smaller cross in the center. The top-right quadrant shows a stag's head with large antlers. The bottom-left quadrant shows a three-masted sailing ship on the water. The bottom-right quadrant shows an eagle with its wings spread. Above the shield is a crown with four points, each containing a stylized flower. Below the shield is a banner with the motto 'ANNE FOR A'.

Agenda Item

6

Corporate Risk Management Update

Falkirk Council

Title: Corporate Risk Management Update
Meeting: Audit Committee
Date: 9 April 2018
Submitted By: Director of Corporate and Housing Services

1. Purpose of Report

- 1.1 This report provides an updated Corporate Risk Management (CRM) Policy and Framework ('CRM Policy').
- 1.2 It also reports on progress with embedding risk management across, and within, Services, and presents a revised Corporate Risk Register (CRR).

2. Recommendations

2.1 It is recommended that the Committee:

- (1) considers the updated Corporate Risk Management Policy and Framework, and refers it to the Executive for approval;**
- (2) notes progress with embedding Corporate Risk Management arrangements; and**
- (3) notes the revised Corporate Risk Register.**

3. Background

- 3.1 In September 2017, the Audit Committee considered progress on embedding risk management across, and within, Services. The Committee noted that risks continue to be reviewed on a cyclical basis, Corporate Working Groups were reviewing their responsibilities for risk, and a Members' workshop is to be arranged. In addition, Services were taking actions on embedding risk management arrangements.

4. Considerations

- 4.1 The current CRM Policy was agreed by the Executive in May 2016.
- 4.2 An updated CRM Policy is attached at Appendix 1. While the current CRM Policy is broadly fit for purpose, updates have been made as follows:
- clearer definition of roles and responsibilities; and

- updated Appendices to reflect this.
- 4.3 Since September, Services have been undertaking a range of actions to embed risk management arrangements. A summary of progress is at Appendix 2, with Services working through the various requirements.
- 4.4 Other progress includes:
- development of each corporate risk to ensure meaningful consequences, controls, and lessons learnt are listed. The Corporate Risk Register, comprising a summary of High and Medium Risks, and details relating to each High risk, is set out at Appendix 3;
 - the review of Corporate Working Groups is progressing. A summary of progress to date is at Appendix 4;
 - a Members' risk workshop is being arranged; and
 - risk management has been embedded within the Council of the Future Programme, via a Risk Strategy and Programme Risk Register (as referred to in a separate report).
- 4.5 CRMG will continue to work to improve and embed CRM arrangements across, and within, Services.

5. Consultation

- 5.1 Members of CRMG have been consulted.

6. Implications

Financial

- 6.1 There are no direct financial implications arising from this report.

Resources

- 6.2 There are no direct resource implications arising from this report.

Legal

- 6.3 There are no direct legal implications arising from this report.

Risk

- 6.4 The key risk is failure to effectively identify, assess, mitigate, and report on the risks to delivering outcomes.

Equalities

- 6.5 An Equality and Poverty Impact Assessment (EPIA) was not required for this report.

Sustainability / Environmental Impact

- 6.6 An Environmental Impact Assessment (EIA) was not required for this report.

7. Conclusions

- 7.1 The CRM Policy and Framework has been updated to more clearly define roles and responsibilities. Work continues to be undertaken to embed risk management across the Council, and the Corporate Risk Management Group will continue to monitor and progress the actions outlined in this report.

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Director of Corporate & Housing Services

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Date: 26 March 2018

Appendices

- Appendix 1: Corporate Risk Management Policy and Framework
- Appendix 2: Progress with Embedding Corporate Risk Management Arrangements;
- Appendix 3: Corporate Risk Register; and
- Appendix 4: Corporate Working Group Summary.

List of Background Papers

- None



FALKIRK COUNCIL

**CORPORATE RISK
MANAGEMENT**

POLICY AND FRAMEWORK

CONTENTS

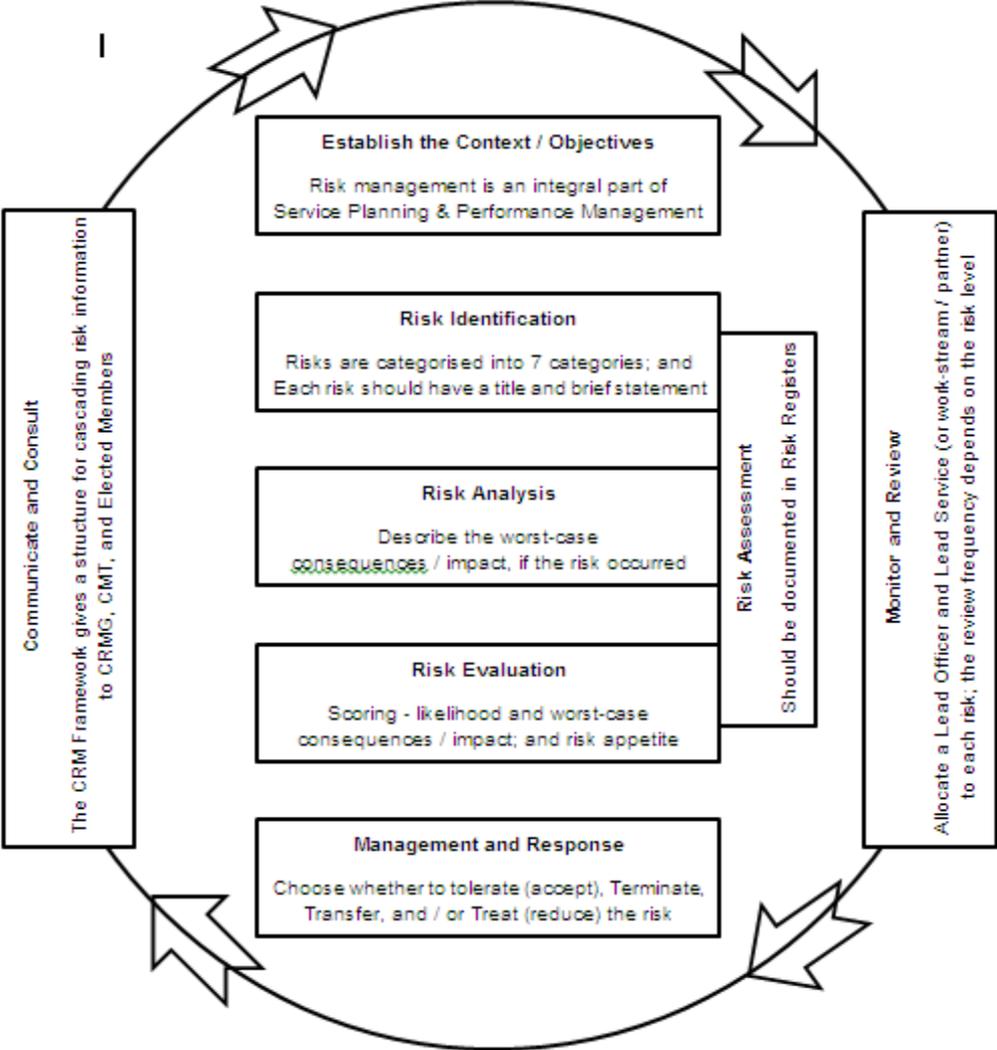
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DOCUMENT HISTORY

Document Title:	CRM Policy and Framework	Lead Reviewer:	Corporate Risk Management Group
Owner:	Director of Corporate and Housing Services	Superseded Version:	May 2016
Version No:	V3.1, 09 March 2018	Next Review Date:	March 2021

1. POLICY STATEMENT – THE COUNCIL’S APPROACH TO RISK

- 1.1 The purpose of this Corporate Risk Management (CRM) Policy and Framework is to set out the approach to embedding CRM arrangements across the Council.
- 1.2 Risk means an **uncertainty**, which has a **possibility** of resulting in positive or negative consequences for the Council.
- 1.3 The Council encourages decision makers to be ‘risk aware’ rather than ‘risk averse’. We will support Services and employees who take opportunity risks - where those risks are understood; reasonable controls are in place; anticipated benefits out-weight negative impacts / consequences; and decisions are proportionately documented, monitored, and reviewed.
- 1.4 The diagram below outlines the risk management process:



- 1.5 The Council’s CRM Reporting Framework is summarised at **Appendix 1. Appendix 2** goes on to provide guidance on assessing, reporting, and recording individual risks.
- 1.6 Risks may have a variety of consequences / impacts. These include financial, reputational, harm (eg injury or death to employees or service users), service interruption or delay, and audit / legal issues.

1.7 Risk affects every activity to a greater or lesser degree. Failure to manage risk can have serious consequences. The Council categorises risk as:

- failures in proper **financial** management;
- failures in proper **information** management (availability, integrity, and security);
- failures in **human resources** management (eg recruitment, retention, safety);
- failure to properly manage **assets**;
- failure to properly recognise, plan for, and manage significant **change**, both internal and external;
- failures in **governance**, leadership, accountability or decision making; and
- failures in **partnerships**, or contracts with external bodies.

1.8 The key benefits of risk management are:

- improved communication and understanding of risk, resulting in fewer surprises;
- more resilient Services and communities;
- fewer incidents, and better response;
- better evidence to support risk based decisions;
- improved audit and inspection results;
- improved performance and outcomes;
- measureable Council, Project, and Partnership Plans; and
- improved assurance.

1.9 The CRM Policy provides a broad, flexible, approach to managing risk that should be adopted by all Services. It should be tailored to Service, Corporate Working Group / board, partnership, and project situations.

1.10 Separate and specific risk management Policies are in place for significant projects or partnerships. For example, the Falkirk Integration Joint Board and Council of the Future Programme both have their own Risk Management Strategies.

2. RESPONSIBILITIES

Elected Members

- 2.1 CIPFA / SOLACE Guidance¹ states that risk management is an integral part of all activities and must be considered in all aspects of decision making. Risks should be included in all committee papers, where appropriate.
- 2.2 Members should, therefore:
- gain a broad understanding of risk management and its benefits;
 - require Officers to develop and implement an effective framework for risk management, and report significant risks on a regular basis;
 - challenge Officers to ensure risks are considered and recorded in reports; and
 - formally consider risks at the start, and throughout the life, of projects.

Executive

- 2.3 The Executive² is responsible for:
- periodically reviewing and approving the CRM Policy and Framework;
 - considering risk management referrals from the Audit Committee;
 - reviewing and approving the Corporate Risk Register as appropriate;
 - challenging Chief Officers on risk, such as the effectiveness of controls, governance arrangements, and progress with actions; and
 - horizon scanning for new and emerging risks.

Scrutiny and External Scrutiny Committees

- 2.4 These Committees allow for in depth consideration of areas of the Council's operations and relations with external bodies.

Portfolio Holders

- 2.5 The roles of Portfolio Holders in relation to corporate risk are outlined at **Appendix 3**.

¹ Delivering Good Governance in Local Government, CIPFA / SOLACE, 2016: Principle F: Managing risk through robust internal control and strong public financial management.

² And, where relevant, the Education Executive.

Audit Committee

2.6 The Audit Committee's Terms of Reference require it to:

- review and seek assurance on the framework of risk management, governance and control;
- review, and seek assurance on, the system of internal financial control;
- review Assurance Statements to ensure they properly reflect the risk environment;
- produce an annual report to Council on the above to support these statements;
- take account of the implications of publications detailing best practice for audit, risk management, governance, and control;
- take account of recommendations within the relevant reports / minutes of:
 - the External Auditor;
 - the Scottish Parliament; and
 - other external scrutiny agencies.

Chief Executive

2.7 The Chief Executive has overall accountability for the Council's CRM Policy and Framework, and for ensuring that effective arrangements are in place to manage risk.

Director of Corporate and Housing Services

2.8 The Director of Corporate and Housing Services is responsible for overseeing CRM arrangements; the effectiveness of CRMG; and for raising risk related matters with CMT, Audit Committee, and Executive. This includes reports to:

- CMT: on high and emerging risks;
- Executive: which has responsibility for approving the Policy and Framework, and for scrutinising and agreeing the Corporate Risk Register; and
- Audit Committee: which is responsible for reviewing and seeking assurance on the effectiveness of the Council's arrangements for risk management, governance, and control.

Head of Human Resources and Business Transformation

2.9 The Director has delegated the responsibilities above to the Head of HR and Business Transformation.

Internal Audit

- 2.10 The Internal Audit, Risk, and Corporate Fraud Manager is responsible for developing and completing an Annual Risk Based Internal Audit Plan. The aim is to provide assurance on the Council's arrangements for risk management, governance, and control.

Assurance Team

- 2.11 The Assurance team will support Services in their management of risk, and in the development of a flexible, yet proportionate and robust, service risk management framework.
- 2.12 Further, the Assurance team, with independent assurance from external assurance advisors, will monitor the extent to which these arrangements are embedded at a corporate and Service level.

Corporate Risk Management Group (CRMG)

- 2.13 CRMG is chaired by the Head of HR and Business Transformation, with membership from across all Services. It meets on a quarterly basis. Its role is to ensure:
- Corporate risk reports focus on high risks – those risks with the most significant and material consequences – and changes to Services' risk profile;
 - there is a clear process for capturing existing, rising, and emerging risks from Services, and reporting these to CRMG, CMT, and Members;
 - Service Risk Management arrangements are 'owned' by Services;
 - risk management is integrated with performance reviews (on Pentana) and becomes part of managers' 'way of thinking';
 - risk reporting and scrutiny arrangements are proportionate and effective;
 - consideration of risk forms an integral part of the decision making process, including performance management, (Service) self-assessments, budget / savings, and transformational change reviews;
 - review of the following assurance reports on a cyclical basis:
 - Service reports on high risks (6 monthly);
 - Service reports on medium risks (annually);
 - consideration of the following Standing Agenda Items at meetings (as a minimum):
 - Rolling Actions List;
 - CRM Update (including Progress with embedding the CRM Policy);
 - Corporate Risk Register - Cyclical Reviews; and

- Emerging Risks, including Incidents, Lessons Learnt, Audits, and Inspections.

Service Management Teams

2.14 Services' risk management arrangements should be flexible, and consistent with Service Planning processes. They should involve Service Unit Managers. Service Management Teams should support CRMG, and ensure that:

- lessons are learnt from incidents, inspections, audits, and (Service) self-assessments;
- Corporate Working Groups / Boards operate in line with their agreed Terms of Reference; and
- Service Risk Registers (SRRs) are maintained as appropriate

Corporate Working Groups / Boards

2.15 **Appendix 4** shows the framework of Corporate Working Groups / Boards (CWGs) tasked with progressing various work-streams. Each of these CWGs must also take the lead in assessing, managing, and monitoring work-stream risk. Each Group should:

- have clear terms of reference and defined reporting and accountability lines;
- be clearly identified within the CRR, where relevant;
- review lessons learnt from significant internal and external incidents;
- maintain subject / project specific risk registers and measureable action plans; and
- undertake an annual self-assessment of their remit, risks, and effectiveness.

2.16 **Appendix 4** also includes some Partnership Working Groups, including Community Planning, Public Protection, and Resilience. These Groups have similar roles in relation to corporate risks, but their assurance reporting and governance structures may vary and will be defined by each Partnership.

Statutory Officers

2.17 **Appendix 3** summarises the role of Statutory Officers' in relation to risk. This covers the Chief Finance Officer (CFO), Chief Governance Officer (CGO) / Monitoring Officer, and the Chief Social Work Officer (CSWO).

Service Unit Managers and Project / Partnership / Contract Leads

2.18 Managers should:

- provide suitable risk information and training to employees;
- maintain risk registers, where appropriate, for their areas of responsibility;
- identify, assess, and report risks, including current, emerging, and rising risks;
- implement proportionate controls and review mechanisms; and
- include risk as a standing agenda item at meetings.

All Employees

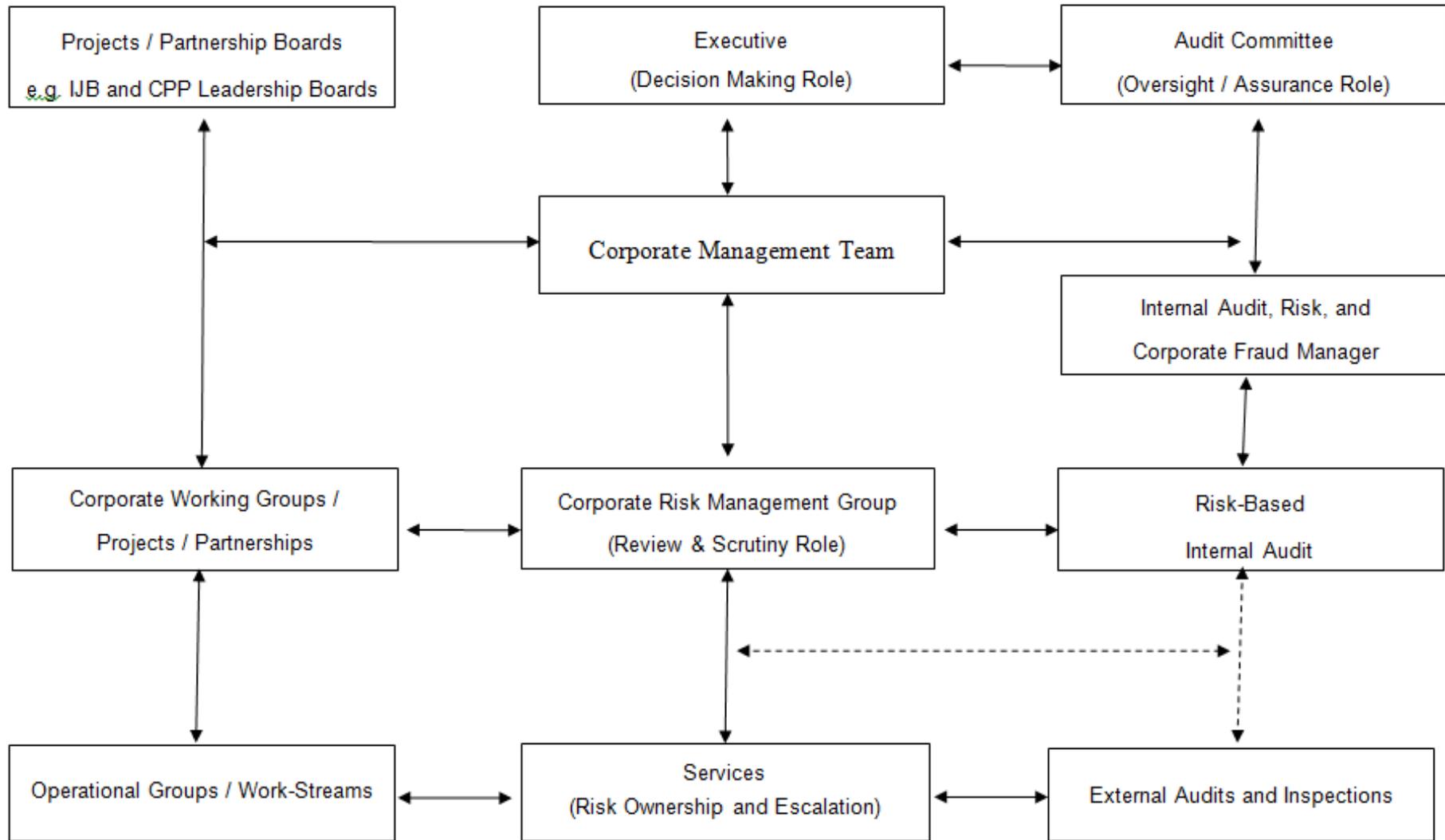
2.19 Risk management should be integrated into daily activities of all staff. Individuals have a responsibility to make every effort to:

- understand the risks that relate to their role, eg be involved in risk assessments in their area(s) of work, including identifying hazards and implementing safe working practices;
- be aware of situations which place them and others at risk of harm (including colleagues and service users);
- take steps to protect themselves and others, eg follow safety guidance and professional standards; and
- report near misses and incidents so that these can be investigated and lessons learnt.

3. MEASURING THE EFFECTIVENESS AND MATURITY OF THE CRM POLICY

3.1 This Policy will be reviewed on a 3 yearly cycle. Periodic Independent Assurance on the effectiveness of the Policy will be sought as part of the annual Internal Audit process.

APPENDIX 1: CRM REPORTING FRAMEWORK



APPENDIX 2: RISK SCORING GUIDANCE

Risk Level	Risk Appetite / Approach	Scoring Matrix
High (Score 10-25)	High risks may be either: <ul style="list-style-type: none"> • within the Council's risk tolerance (meaning that the Lead Officer considers the current controls are proportionate and effective); or • above the Council's risk tolerance (meaning that the Lead Officer considers that additional actions are necessary to reduce the risk). If the risk is above the risk appetite, the Corporate Risk Register should include a Target Risk Level and Actions. 	
Medium (Score 7-9)	Medium risks are within the Council's risk tolerance, meaning controls / mitigation are proportionate and effective (actions are not essential, but may be included in the Corporate Risk Register).	
Low (Score 1-6)	These do not need to be recorded on the Corporate Risk Register. Services should monitor these at an operational level and, if the risk increases, they should be added as High or Medium risks.	

LIKELIHOOD		IMPACT / CONSEQUENCE					
Impact		Score	Financial	Reputational	Harm to People or Assets	Interruption to Services to Projects	Audit/ Legal / Compliance
1 Almost Impossible	Little evidence that the risk is likely to occur	1 Negligible	No, or little, budget impact; spend is within risk owner's authority	No, or minimal, media interest; impact is in public domain, but managed	No, or very minor, injury and / or damage	No, or minimal, disruption to one service, or project delay	No, or little, interest from audit body / regulator
2 Unlikely	Low chance of the risk occurring	2 Minor	Minimal budget impact; spend is within risk owner's authority	Local media interest and / or customer complaints	Minor injury and / or damage	Minor disruption to multiple services, or project delay	Action required; but unlikely to result in criticism or penalty
3 Possible	A reasonable chance of the risk occurring	3 Moderate	Manageable budget impact; spend exceeds risk owner's authority	Regional media interest and / or multiple complaints	Moderate injuries and / or damage	Some disruption to service, or project delay	Action required; may result in criticism, legal action, and / or penalty
4 Likely	A strong chance of the risk occurring	4 Major	Major impact, but within budgets	National media interest and / or serious loss of confidence	Major injury, death, and / or assets destroyed	Major service disruption, loss of multiple services, or project delay	Major legal action, penalty, and / or criticism
5 Almost Certain	Fairly certain that risk will occur or has occurred	5 Severe	Extensive; spend exceeds available budgets	Sustained media interest, complaints, and / or loss of confidence	Multiple deaths and / or assets destroyed	Extended disruption or loss of service, or project delay	Severe penalty, criticism and / or legal action

APPENDIX 3: THE ROLE OF PORTFOLIO HOLDERS AND STATUTORY OFFICERS' IN RELATION TO RISK

Portfolio Holders

1. The remit of each Portfolio Holder is set out within the Council's Standing Orders, which are published on www.falkirk.gov.uk.
2. Portfolio Holders are Councillors who have been allocated specific areas of responsibility known as portfolios.
3. Within the area of their remit, Portfolio Holders will:
 - exercise strategic and political leadership, having regard to the goals, outcomes, and priorities set out in the Council's corporate plans;
 - lead on policy development;
 - lead on service issues at Executive and Council meetings;
 - meet on a regular basis with senior management to discuss service issues including performance, the requirement for continuous improvement, and adherence to the budget set by Council;
 - answer questions at Council;
 - act as spokespersons on behalf of the Council; and
 - promote the Council's equalities duties and exercise oversight of the arrangements in place to secure best value.
4. Portfolio Holders are identified against each corporate risk on the Corporate Risk Register.
5. In relation to corporate risk, Portfolio Holders are expected to exercise the above leadership functions in relation to the monitoring, scrutiny, and assurance on the risks within their remit, in conjunction with the Lead Officer and (if relevant) Corporate Working Group / Board.
6. In any situation of uncertainty, it is for the Leader of the Council to determine which portfolio a delegation by Council lies within.
7. For the avoidance of doubt, Portfolio Holders are not responsible for service management, nor is there any delegation of decision making to any individual Member of the Council.

Statutory Officers

8. Statutory Officers have specific duties as set out in legislation, and discharge this role as part of their wider responsibilities within the Council. They have an important, independent, role in promoting and enforcing good governance and for making sure the Council complies with legislation. Statutory Officers' responsibilities include highlighting where a Council Policy may break the law or breach Financial Regulations. These Officers must have direct and regular access to the Chief Executive, Elected Members, and Senior Officers.

9. The role of each Statutory Officer is summarised below (based on a review of relevant guidance³).

Chief Governance Officer (CGO) / Monitoring Officer

10. The Local Government and Housing Act 1989 (Section 5) established this role. The Monitoring Officer is required to prepare a report for the consideration of the full Council if they believe that any proposal, decision, or omission by the Council, or by any Committee or sub-Committee, contravenes any legislation or code of practice.

Chief Financial Officer

11. The Local Government (Scotland) Act 1973 established this role, and Section 95 states that:

‘Every local authority shall make arrangements for the proper administration of their financial affairs, and shall secure that the proper officer of the authority has responsibility for the administration of those affairs.’

12. In addition, CIPFA sets out the following principles in relation to risk:

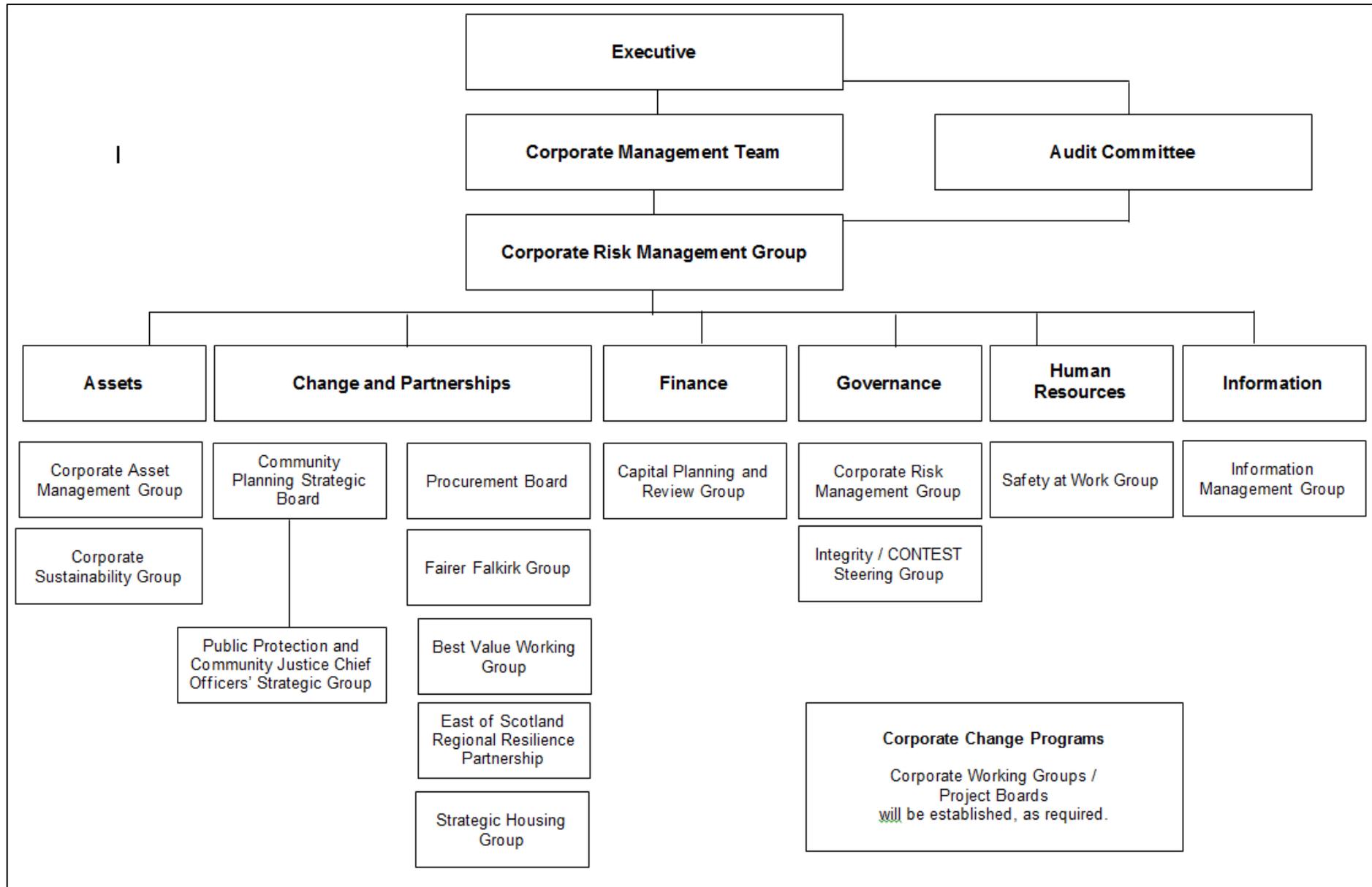
- Principle 1: The CFO should contribute to the effective corporate management of the authority, including strategy implementation, cross-organisational issues, integrated business and resource planning, risk management, and performance management; and
- Principle 2: The CFO must be actively involved in, and able to bring influence to bear on, all material business decisions to ensure immediate and longer term implications, opportunities, and risks are fully considered, and alignment with the authority’s overall financial strategy.

Chief Social Work Officer (CSWO)

13. The Social Work (Scotland) Act 1968 established this role.
14. The overall objective of the CSWO post is to ensure the provision of effective, professional advice to Elected Members and Officers of the Council in relation to Social Work Services. This includes advice in relation to particular issues such as corporate parenting, child protection, adult protection, and the management of high-risk offenders; and the key role Social Work plays in contributing to the achievement of national and local outcomes. The CSWO also has a role to play in overall performance, improvement, and the identification and management of corporate risk in relation to Social Work Services.

³ ‘How Councils Work: An Improvement Series for Councillors and Officers: Roles and Working Relationships: Are You Getting It Right?’ Audit Scotland, 2010.

APPENDIX 4: CORPORATE WORKING GROUPS CHART



Progress with Embedding Corporate Risk Management Arrangements

	Children’s Services	Corporate and Housing Services	Development Services	Social Work Adult Services	
<u>Corporate Risk Register (CRR) Reviews</u> Reviewed by Lead Officers and Senior Management Teams (min) 6 monthly.	SLT review CRR in advance of CRMG meetings.	SMT reviewed CRR 07/16. Further review scheduled March 2018.	CRR updated following Risk Workshop in Aug 2017.	Risk Summary agreed Nov 2017.	
<u>Controls / Review Mechanisms</u> CRR identifies Policies / Strategies / Plans <u>and</u> Review Mechanisms.	Controls and Review Mechanisms (and not only, eg broad policies / strategies) continue to be confirmed for all corporate risks.				
<u>Incidents and Lessons Learnt</u> Identified on CRR and Action Plans are in place.	Some progress with reviewing and monitoring lessons learnt and actions on Pentana.	Some progress with reviewing and monitoring lessons learnt and actions on Pentana.	Some progress with reviewing and monitoring lessons learnt and actions on Pentana.	Some progress with reviewing and monitoring lessons learnt and actions on Pentana.	
<u>Measurable Actions and PIs</u> (including COTF, Service, and Divisional Plans) are linked / mapped to all risks on Pentana.	Measureable actions are to be developed as part of the Service Planning process, and monitored on Pentana. Broader Action Plans to be developed and added to Pentana incrementally, including Divisional, Corporate Working Group, audit, and inspection actions / plans.				
<u>Training</u> Targeted roll out of E Learning. Additional needs identified via APDS.	Roll out E-Learning in schools. Develop HT / Cluster Training. Develop Children and Families Training.	E-Learning rolled out to all staff. Need to further identify target audience / needs.	E-Learning rolled out to all staff. Need to further identify target audience / needs.	Roll out and monitor E-Learning alongside SSSC Resource to all managers and front line staff.	
<u>Service Manager (Operational) Risks</u> Reviews undertaken (minimum) Quarterly, and linked to actions on Pentana.	Service Risk Reviews to be rolled out as part of HT / Manager Meetings.	Service Risk Reviews to be rolled out to Managers.	Service Risk Reviews rolled out as part of Risk Workshop, and actions are being developed.	Service Risk Reviews to be rolled out to Managers.	
Key:	Limited Progress	Some Progress	Good Progress	Improved since last review	Not clear, more information is needed

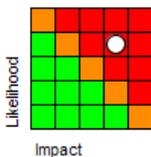
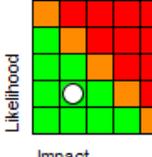
CORPORATE RISK REGISTER**Table 1: Summary of High Risks**

Chief Executive				
Risk Title	Target Risk (if relevant)	Working Group / Board (if relevant)	Portfolio Holder	Last Review by Lead Officer
Uncertainties surrounding Brexit / Independence Referendum	Low	-	LEA	21 Feb 2017
Adult Services				
Risk Title	Target Risk (if relevant)	Working Group / Board (if relevant)	Portfolio Holder	Last Review by Lead Officer
Health and Social Care Integration	Medium	-	HSC	28 Nov 2017
Self-Management / Independent Living (including Self-Directed Support)	-	-	PP	-
Children's Services				
Risk Title	Target Risk (if relevant)	Working Group / Board (if relevant)	Portfolio Holder	Last Review by Lead Officer
Closing the Gap in Attainment	Medium	-	EDU	31 Aug 2017
Criminal Justice Review	Low	ProgB	PP	16 Mar 2017
Getting It Right For Every Child (GIRFEC) Change Program	Medium	-	PP	31 Aug 2017
Public Protection (Adults and Children)	High	PPCJSG	PP	16 Mar 2017
Corporate and Housing Services				
Risk Title	Target Risk (if relevant)	Working Group / Board (if relevant)	Portfolio Holder	Last Review by Lead Officer
Failure to implement lessons learnt from housing fires and associated risks	Medium	SHG	HSG	31 Aug 2017
Failure to recognise, and act upon, the need for transformational change and continuous improvement.	Medium	COTFB	LEA	22 Feb 2018
Failure to monitor, measure, manage, and mitigate the impacts of Welfare Reform and Poverty.	Medium	FFG	LEA	23 Nov 2017
Insufficient funding to deliver services and deliver outcomes.	Medium	-	LEA	28 Aug 2017
Failure to properly discharge equalities duties.	Medium	-	-	23 Nov 2017
Failures in workforce planning, including absence, vacancy management, and succession planning.	Medium	-	RES	22 Feb 2018
Compromised security, or inefficient use, of the Council's data and information asset.	Medium	IMG	RES	23 Nov 2017
Cyber security incident compromises IT infrastructure, corporate application, social media channel, or data / information.	Medium	IMG	LEA	23 Nov 2017
Failure to undertake proper engagement and consultation with service users, stakeholders, and partners on the delivery of services.	Medium	CPSG	LEA	24 Nov 2017
Development Services				
Risk Title	Target Risk (if relevant)	Working Group / Board (if relevant)	Portfolio Holder	Last Review by Lead Officer
Resilience: Business Continuity and Emergency Planning	Medium	EoS RRP	LEA	29 Nov 2017

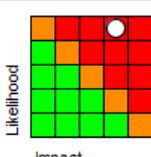
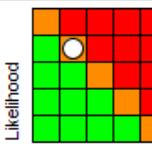
Table 2: Summary of Medium Risks

Chief Executive				
Risk Title	Target Risk (if relevant)	Working Group / Board (if relevant)	Portfolio Holder	Last Review
Failures in Leadership at Council and Partnership Level.	Medium	CRMG	LEA	21 Feb 2017
Children's Services				
Risk Title	Target Risk (if relevant)	Working Group / Board (if relevant)	Portfolio Holder	Last Review
Integration of Education and Social Work Services to create Children's Services	Low	-	EDU	30 Aug 2017
Tackling Bureaucracy and Reducing Workload in Schools	Low	-	EDU	31 Aug 2017
Social Work - Risks Identified in CSWO Annual Report	Low	PPCJSG	PP	-
Failure to Deliver Scottish Government Early Years Expansion (by 2020)	Low	-	EDU	30 Aug 2017
SSSC Code of Conduct - Recent Changes	Low	-	RES	14 Mar 2017
Social Work Information System (SWIS) Replacement	Low	ProgB	RES	13 Oct 2017
Corporate & Housing Services				
Risk Title	Target Risk (if relevant)	Working Group / Board (if relevant)	Portfolio Holder	Last Review
Failure to provide a safe environment for employees and visitors.	Medium	SWG	LEA	22 Feb 2018
Failure to Comply with Scottish Housing Quality Standards (SHQS).	Medium	SHG	HSG	31 Aug 2017
Failure in Financial Management, Control, or Assurance.	Medium	CPRG	LEA	25 Aug 2017
Procurement and Commissioning arrangements fail to secure best value and demonstrate compliance with Council standards or legal requirements.	Medium	PB	LEA	21 Feb 2017
Development Services				
Risk Title	Target Risk (if relevant)	Working Group / Board (if relevant)	Portfolio Holder	Last Review
Environmental Risks: Energy, Waste, and Sustainability	Medium	CSG	LEA	29 Nov 2017
Assets Management (Maintenance, Availability, and Reliability)	Medium	CAMG	LEA	15 Dec 2017
Regulatory Enforcement	Medium		ENV	29 Nov 2017

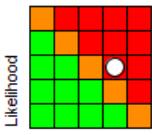
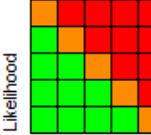
Table 3: Details of High Risks

<u>Chief Executive</u>				
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CE_G_02	Uncertainties surrounding Brexit / Independence Referendum			
Working Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood	Likelihood
-	Leader of the Council	Chief Executive	Impact	Impact
Risk Statement	There are significant uncertainties surrounding a potential Brexit / Independence Referendum. This could impact on the economy and employment; and may add to the Council's budget and staff resource pressures.			
Worst Case Consequences	<ul style="list-style-type: none"> Resources are further stretched / detracted from Corporate priorities; Failure to manage elections and change, eg legislation; and Failure to deliver Best Value services and make well-informed decisions. 			
Controls / Mitigation	Monitoring developments and engaging with Government and other stakeholders.			
How do we monitor that controls are working effectively?	-			
What more can we do to reduce the risk?	Implement action plans to mitigate the risk as further information becomes available.			
Lessons Learnt	Previous elections and referendums.			
LATEST NOTES				
Latest Note			Date Reviewed	
Ongoing review and horizon scanning.			21 Feb 2017	

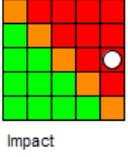
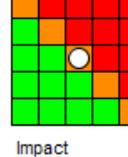
Adult Services

Risk Ref.	Risk Title	Current Risk	Target Risk (if relevant)
IJB.00 / CRR.AS1	Health and Social Care Integration		
Working Group (if Relevant)	Portfolio Holder	Lead Officer	
-	Health and Social Care	Head of Social Work Adult Services	
Risk Statement	<p>The risk is that Social Work Adult Services fail to meet the commitments agreed by the IJB, as set out within the Falkirk Health and Social Care Partnership (HSCP) Strategic Plan.</p> <p>The Falkirk Integration Joint Board (IJB) receives regular updates on their Strategic Risk Register. This was presented to the Board on 06 October 2017. Governance arrangements are developed following consultation with relevant Officers / Groups. A summary of risks at October 2017 are:</p> <ul style="list-style-type: none"> • Financial Stability and Commissioning; • Leadership, Decision Making, and Scrutiny; • Performance of the IJB; • Culture / HR Management / Workforce Planning; • Experience of a) Service User and b) Unpaid Carers; • (a) Information Management b) Information Governance; • Effective links with Partnerships; • Harm to Vulnerable People, Public Protection, Clinical and Care Governance; • Self-Management / Independent Living and • Service Demand. 		
Worst Case Consequences	<p>Financial and Project: Severe budget gaps and project delay / failures.</p> <p>Harm: serious harm (death / injury) and disadvantage / inequalities.</p> <p>HR: significant issues, including stress absence / claims.</p> <p>Reputation: national media interest and / or loss of confidence.</p> <p>Service: opportunities to improve services, efficiencies, outcomes.</p>		
Controls / Mitigation	Refer to IJB Risk Management Strategy and Risk Register.		
How do we monitor that controls are working effectively?	Project and Strategic Risk, Service Planning, and Performance review processes will be agreed and monitored by the Joint Management Team and Integration Joint Board.		
What more can we do to reduce the risk?	Refer to IJB Risk Management Strategy and Risk Register and Financial Recovery Plan.		
Lessons Learnt	Lessons Learnt will be considered as part of future HSCP Leadership Team risk reviews.		
LATEST NOTES			
Latest Note	Date Reviewed		
<p>The IJB Risk Management Strategy and Register were updated in March and October 2017 to reflect the actions identified during a Risk Specialist workshop held in November 2016 and ongoing work. The IJB agreed to keep risk management arrangements under regular review, particularly as a number of IJB risks are identified as high. This includes quarterly reports on the Strategic Risk Register to the:</p> <ul style="list-style-type: none"> • Leadership Team for monitoring of the risks and controls / mitigation; • IJB Audit Committee for scrutiny and assurance on the risk framework; and • IJB Board for approval of the Strategic Risk Register <p>The ongoing work is noted below:</p> <ul style="list-style-type: none"> • Identified lead for risk and supporting / contributors' to managing risks; • Maintain links to IJB Risk Strategy and Risk Register with Falkirk Council and NHS FV to ensure as IJB matures these arrangements remain fit for purpose; • Clinical and Care Governance Group established and currently being reviewed. Update presented to IJB on 2 February 2018 (included in the Chief Officer Report). A full report will be presented to the Board in April 2018; • IJB Audit Committee – role and remit agreed and meetings established; • Review SW Adult Services risk management arrangements; • Ensure capacity of all partners to progress actions / controls where there is an inter-dependency, and test arrangements pick up this; • There are regular performance reports presented to the IJB to provide reassurance. 	28 Nov 2017		

APPENDIX 3 (Continued)

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
IJB.09 / CRR.AS2	Self-Management / Independent Living (including Self-Directed Support)			
Working Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood	Likelihood
-	Public Protection	Head of Adult's Services	Impact	Impact
Risk Statement	<p>There is uncertainty around the Council's capacity to deliver change due to resources, processes, skills and budgets; financial constraints, information and governance risks - including IT changes, loss of charging incomes, and potential increased fraud.</p> <p>If managed well, the reforms will create opportunities for improved enablement / choice and flexibility of support.</p> <p>The risks and actions associated with this project are detailed within the SDS Project Risk Register.</p> <p>Context: Implementation of SDS will substantially impact on the Council, our partners and vulnerable people - in particular, older people, children and young people and those with physical, mental and learning disabilities.</p>			
Worst Case Consequences	<ol style="list-style-type: none"> 1. Harm: death / injury and disadvantage / inequalities; 2. Financial: significant cost of service changes / SDS options and fraud potential; 3. Governance: increased Human Rights claims and (individual's) liabilities; 4. Reputational Damage: to Council and Partners; 5. Stakeholder relationships breakdown. 			
Controls / Mitigation	<ol style="list-style-type: none"> 1. SDS Steering Groups monitor Programme Risk Register and plans. 2. Financial controls, linked to capacity / budget planning decisions. 3. Improved workforce skills and procurement capacity. 4. The risk is monitored by Public Protection Chief Officers' Strategy Group, and under-pinned by policies, guidance, and inspections. 			
How do we monitor that controls are working effectively?	<ol style="list-style-type: none"> 1. Monitoring of Risks, Issues, Actions and Performance is undertaken by the SDS Project Board. 2. Self-Directed Support Change Program. 3. Health and Social Care Change Program. 4. Highlights Reports are provided to Head of Service - noting areas of risk and proposed actions. 			
What more can we do to reduce the risk?	<ol style="list-style-type: none"> 1. Review Adult Services and partners' risk frameworks and eligibility criteria. 2. Develop risk resources (including guidance) for practitioners. 3. Implement Audit actions (Council and National). 4. Continued participation in national risk (enablement) review. 5. Continued engagement with partners, including providers, third sector, people with support needs and carers. 6. Work is currently taking place on Policy - Eligibility / Assessment (with Members' involvement), Procurement, and Forward-Project Planning. 			
Lessons Learnt				
LATEST NOTES				
Latest Note				Date Reviewed
-				-

Children's Services

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CS_01	Closing the Gap in Attainment			
Working Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood	Likelihood
-	Education / Children's Services	Head of Education	Impact	Impact
Risk Statement	The risks specific to Children's Services include: a) Increasing positive destinations / outcomes; b) Meeting attainment targets / closing the attainment gap; c) Improving pupil attendance; and d) Delivering zero tolerance strategy on illiteracy and innumeracy.			
Worst Case Consequences	Prosecution or other legal remedy; Civil claims; Criticism & external intervention (eg Care Commission and Criminal Justice Authority); Damage to reputation; Breakdown in communications with partners leads to poor sharing of info and decisions;			
Controls / Mitigation	Monitored, scrutinised and reviewed by: a) Children's Services Senior Leadership Team; b) performance panel; and c) Scottish Government.			
How do we monitor that controls are working effectively?	To be populated when Children's Services DMT next review their risk register.			
What more can we do to reduce the risk?	Progress the Curriculum for Excellence tasks within the Children's Services Service Performance Plan (SPP), including: <ul style="list-style-type: none"> • National Improvement Framework; • Address the CFE priorities set out in the Authority Expectations 2013-16; • Support the practical application in learning and teaching of mobile devices; • Ensure Workforce Planning and Recruitment meets Current and Future Needs; • Implement the Literacy Strategy; • Implement the Numeracy Strategy; • Improve Business Process and System to support more efficient work-streams; and • Allocate attainment challenge funding to support identified schools. 			
Lessons Learnt	-			
LATEST NOTES				
Latest Note				Date Reviewed
Support Quality Improvement team now have taken up their posts and are proactively engaging with schools. Revised guidance has been developed and will be shared with schools. Schools continue to access centrally provided support around HR, Finance, Procurement, ICT advice / guidance. Two weekly drop in surgeries are being run by officers to support Head Teachers. PEF Co-ordinator, Service Managers, Team Managers and Jim Fanning from Education Scotland are working with schools to develop their data gathering and tracking tools.				31 Aug 2017

APPENDIX 3 (Continued)

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CS_02	Criminal Justice Review		 Likelihood Impact	 Likelihood Impact
Working Group (if Relevant)	Portfolio Holder	Lead Officer		
Program Board(s)	Public Protection	Chief Social Work Officer		
Risk Statement	Offending happens on a daily basis. On occasion very serious crimes will take place and sometimes by people on criminal justice supervision.			
Worst Case Consequences	Death or significant injury to others or significant damage to property, poor communication and decision making, particularly if not based on defensible assessments may cause external criticism and potential intervention. High Court trials, Fatal Accident Enquiries and significant Case Reviews. Reputational risk to Council.			
Controls / Mitigation	Following national and local guidance, acting carefully, ensuring Criminal Justice staff and managers have excellent training and support. Working in partnership within and out with the Council.			
How do we monitor that controls are working effectively?	MAPPA Working Group; Self Evaluations (eg Women and Young Offender Services); FV Criminal Justice Board; Evaluations By Care Inspectorate.			
What more can we do to reduce the risk?	Managing offenders is a multi-agency task, all areas of the Council and our partners should consider how they incorporate communication and capacity building in this regard.			
Lessons Learnt	-			
LATEST NOTES				
Latest Note				Date Reviewed
The Community Justice Strategic Group continues to meet quarterly. It includes all designated partners and has a role to review risks.				16 Mar 2017

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CS_04	Getting It Right For Every Child (GIRFEC) Change Program		 Likelihood Impact	 Likelihood Impact
Working Group (if Relevant)	Portfolio Holder	Lead Officer		
-	Public Protection	Head of Education		
Risk Statement	<p>The risks / challenges include:</p> <ul style="list-style-type: none"> a) Implementing "named person" responsibilities (GIRFEC); b) Regulatory compliance in regard to ASN (Additional Support Needs); c) Completing the inclusion review; d) Action plans from the joint Children's Services inspection; e) the information exchange and interface between named person and lead professional; and f) Vacancy management - loss of senior management and associated knowledge through significant downsizing. 			
Worst Case Consequences	Prosecution or other legal remedy; Civil claims; Criticism and external intervention (eg Care Inspectorate and Criminal Justice Authority); Damage to reputation; Breakdown in communications with partners leads to poor sharing of info and decisions;			
Controls / Mitigation	Implementation Plan for Named Person - August 2016. JCC RAG Resource Allocation Group - subject to review.			
How do we monitor that controls are working effectively?	To be populated when Children's Services DMT next review their risk register.			

(Risk Details continued overleaf)

APPENDIX 3 (Continued)

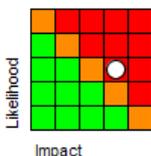
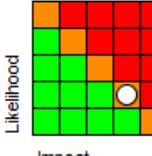
What more can we do to reduce the risk?	<p>Progress the Curriculum for Excellence tasks within the Children's Service Performance Plan (SPP), including:</p> <ul style="list-style-type: none"> • Address the CFE Priorities set out in the Service Plan; • Develop and Implement the Nurturing Programme and Nurturing Schools – Completed; • Deliver the expansion in Early Years Provision in line with the Children and Young People's Bill; • Develop and Implement the Procedures for the Named Person, Team Around the Child and Child's Plan; • Implement Improvements Identified by the Early Years Collaborative; • Track, Monitor and Intervene to support Vulnerable Groups, especially Looked After Children; • Plan for, and build, Community Capacity in collaboration with relevant Stakeholders and Partners; • Develop information protocol between Named Person Service and Lead Professionals.
Lessons Learnt	-

LATEST NOTES

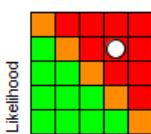
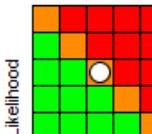
Latest Note	Date Reviewed
<p>"Named Person" awaiting updated legislation - anticipated mid 2018. A series of papers are being tabled at the Education Executive across 2017-2018 to agree our strategic approach to meeting ASN in Falkirk. Children's Services group has now been established to track, monitor and review, progress of vulnerable children and young people.</p>	31 Aug 2017

Risk Ref.	Risk Title	Current Risk	Target Risk (if relevant)
CRR_CS_08	Public Protection (Adults and Children)		
Working Group (if Relevant)	Portfolio Holder		
	Lead Officer		
Public Protection and Community Justice Chief Officers' Strategy Group	Public Protection	Chief Social Work Officer	
Risk Statement	<p>There is a risk of harm to vulnerable children and young people and adults if the Council fails to meet its statutory public protection duties. This includes Adult Support and Protection; Child Protection and both sex offenders and violent offenders (Criminal Justice Service users). In relation to Criminal Justice the risk is twofold (the protection of the community from the service user and the protection of the service user from the community). The delivery of Adult Support and Protection (ASP) service is also overseen by, and accountable to, the IJB (integration Joint Board). The risk in terms of children is twofold:-</p> <ul style="list-style-type: none"> • The need to keep children safe and avoid child deaths; and • The reputational risk to the Council in this situation. 		
Worst Case Consequences	<p>Death or serious harm to a child / young person or vulnerable adults. Significant Case Reviews / Fatal Accident Enquiries / Court / Prosecution or other external legal interventions. Potential compensation claims. External criticism / intervention (eg Care Inspectorate or Criminal Justice Authority). Reputational damage to the Council.</p>		
Controls / Mitigation	<p>Current robust processes with partners regarding sharing of information (including protocols). The following processes MAPPA / IRD's / CP and ASP Case Conferences / CP / ASP register integrated / Single shared assessment. Governance Structure - including risk audit and performance monitoring are in place (eg Child Protection Committee). Robust training programme for all Council and partner agency staff regarding CP / ASP / MAPPA. Awareness raising with the public. Police run scheme for identification of sex offenders in local communities.</p>		
How do we monitor that controls are working effectively?	-		
What more can we do to reduce the risk?	<p>Council strategies (GIRFEC / Corporate Parenting). SOLD / Service Plans. Working Groups established to progress issues relating to information sharing from Social Work, Police, and Health. Review progress in 3 months.</p>		
Lessons Learnt	-		
LATEST NOTES			
Latest Note			Date Reviewed
CPC / ASPC / MAPPA processes are routinely evaluated to ensure they continue to mitigate against risks.			16 Mar 2017

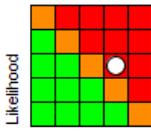
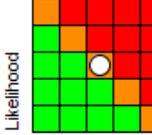
Corporate & Housing Services

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CHS_A_07	Failure to implement lessons learnt from housing fires and associated risks			
Working Group (if Relevant)	Portfolio Holder	Lead Officer		
Strategic Housing Group	Housing	Heads of Procurement & Housing Property and Housing Services		
Risk Statement	There is a risk that the Council fails to implement lessons learnt from housing fires and associated risks.			
Worst Case Consequences	Fatalities, injury, loss of homes, significant financial cost and reputational harm.			
Controls / Mitigation	Installation of fire safety measures in accordance with legislation, eg smoke / CO2 detectors, fire doors etc; programme of property checks by Scottish Fire and Rescue Service and housing staff; fire risk assessments; programme of gas safety checks; fire safety guidance issued; cladding and structure checks in high rise flats.			
How do we monitor that controls are working effectively?	-			
What more can we do to reduce the risk?	Consider and implement outcomes of Grenfell Tower inquiry and emerging guidance in relation to appropriateness of installation of additional safety measures eg water suppression systems; revised fire safety guidance; revised building standards etc.			
Lessons Learnt	Need to maintain on-going programme of property checks, eg to ensure fire doors properly sealed and closed; no fire hazards are in communal areas etc. Need to maintain on-going public awareness of fire safety measures. Joint working with Scottish Fire and Rescue Service.			
LATEST NOTES				
Latest Note				Date Reviewed
Head of Procurement and Housing Property asked that this additional risk is added to the Corporate Risk Register.				31 Aug 2017

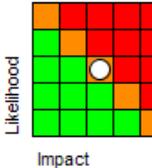
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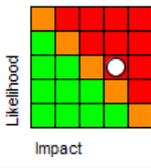
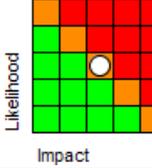
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CHS_C_01	Failure to recognise, and act upon, the need for transformational change and continuous improvement.			
Working Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood	Likelihood
Council of the Future Board	Leader of the Council	Head of HR & Business Transformation	Impact	Impact
Risk Statement	The Council fails to plan for, and implement, appropriate transformational change, leading to missed opportunity and failure to deliver the right services, to the right people, in the right way, and within budget.			
Worst Case Consequences	The Council is unable to achieve the required savings in the required timescales, leading to service failure (including delivery of statutory services); external intervention in the running of the Council; and the Council does not have the required skills or expertise to deliver services.			
Controls / Mitigation	COTF Board in place (comprising elected Members and Chief Officers); programme of COTF work being progressed; Change Manager and Programme Management Office team appointed, in conjunction with the Improvement Service, to ensure good practice and pace of change; and framework for future COTF reporting, timelines, outcomes, and benefits being developed.			
How do we monitor that controls are working effectively?	Reports on projects and reviews submitted to, and scrutinised by, COTF Board, CMT, and Executive; and change implemented, savings achieved, and performance improved, in line with agreed outcomes.			
What more can we do to reduce the risk?	Continued oversight and scrutiny by CMT, Audit Committee, Executive, and Council; external audit of the Council's Financial Statements, and internal audit of processes and controls; and reviewing the change programme through COTF proposals.			
Lessons Learnt	Review of change programme through work on COTF. Consideration has been given to best practice, lessons learned by other Councils, feedback from Audit Scotland and programmes in place elsewhere.			
LATEST NOTES				
Latest Note				Date Reviewed
Council change programme now agreed and being monitored through the COTF Board, who receive update reports outlining the status of all projects. Risk register for the full programme now agreed by the Board, along with a Risk Strategy. The Risk Register will continue to be monitored by the Board.				22 Feb 2018

APPENDIX 3 (Continued)

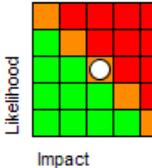
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CHS_C_02	Failure to monitor, measure, manage, and mitigate the impacts of Welfare Reform and Poverty.			
Working Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood Impact	Likelihood Impact
Fairer Falkirk Group	Leader of the Council	Heads of Policy, Technology & Improvement and Head of Housing Services		
Risk Statement	The Council fails to recognise the impacts of the Welfare Reform programme, and the outcomes for stakeholders, leading to increased poverty within communities, higher arrears, and unplanned and unbudgeted impacts / demands on Council services (including housing).			
Worst Case Consequences	Impact on citizens' ability to pay bills, leading to health and mental health issues for our communities, and unsustainable pressure on Council services; significant negative impact on to the economy in Falkirk; and fall in rents and Council Tax collection rates and impact on Council finances.			
Controls / Mitigation	Provision of advice services; refocussing of Fairer Falkirk Fund; and refocussing of Poverty Strategy.			
How do we monitor that controls are working effectively?	<ul style="list-style-type: none"> Review of arrangements and approach at Welfare Governance Board; Community Planning Partnership priority on poverty; and Reports to CMT and Executive. 			
What more can we do to reduce the risk?	Three significant workstreams in place – Advice and Support Hubs; Services to Tenants; and Rent Improvement. The objective of these reviews is to provide more accessible support services to help mitigate financial difficulties for our residents.			
Lessons Learnt	The workstreams have identified that more direct face to face contact, coupled with single designated points of contact and case ownership are considered by our residents to provide improved means of support and assistance.			
LATEST NOTES				
Latest Note				Date Reviewed
Advice hubs and spoke being rolled out across the Council with clear referral paths for claimants and tenants being agreed. Officers are working on assessing the potential impact and mitigations for Universal Credit being introduced in March 2018. A report to Members on this will be presented in the new year.				23 Nov 2017

APPENDIX 3 (Continued)

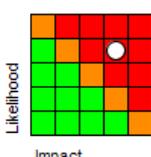
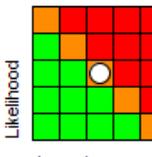
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CHS_F_01	Insufficient funding to deliver services and deliver outcomes.			
Working Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood Impact	Likelihood Impact
-	Leader of the Council	Chief Finance Officer		
Risk Statement	Budgetary, economic, or demographic pressures, and failure to properly manage and allocate resources to deal with these, mean that the Council is unable to deliver services and meet its statutory and other obligations.			
Worst Case Consequences	The Council is unable (or unwilling) to take the actions and difficult decisions needed to live within its revenue budget; service failure, resulting in inability to deliver statutory services; threat to lives and significant negative impact on the wellbeing of the citizens of Falkirk if services not delivered; and external intervention in the running of the Council.			
Controls / Mitigation	Medium term financial planning, scenario modelling, and horizon scanning; robust and inclusive budget preparation process; ongoing budget monitoring by managers, and expert advice from Service Accountants; gathering and considering network intelligence via, eg COSLA, CIPFA Directors of Finance Group; and implementing and enforcing Financial Regulations and other good practice guidance and processes.			
How do we monitor that controls are working effectively?	<ul style="list-style-type: none"> Statutory Section 95 Officer review role; Oversight and scrutiny by CMT, Audit Committee, Executive, and Council; and External Audit of the Council's Financial Statements, and Internal Audit of processes and controls. 			
What more can we do to reduce the risk?	-			
Lessons Learnt	-			
LATEST NOTES				
Latest Note				Date Reviewed
Budget report submitted to Council 28/02/18.				28 Aug 2017

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CHS_G_01	Failure to properly discharge equalities duties.			
Working Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood Impact	Likelihood Impact
-	-	Head of Policy, Technology & Improvement		
Risk Statement	Failure to comply with equalities duties may lead to disadvantage, poverty, inequality, or harm, and associated reputational, safety, legal, and financial implications.			
Worst Case Consequences	Challenge under Equalities Act and consequences of this.			
Controls / Mitigation	Duty to publish equalities information; Assessing and reviewing Policy; Considering award criteria and conditions in relation to public procurement; and materials published in an accessible manner.			
How do we monitor that controls are working effectively?	-			
What more can we do to reduce the risk?	Community Planning Partnership focus on equalities and fairness; and reports to CMT and Executive.			
Lessons Learnt	A report is prepared for CMT to review the achievement of our equality outcomes and the equality impact assessment process annually.			
LATEST NOTES				
Latest Note				Date Reviewed
Equality and poverty impact assessments are being rolled out across the Council underpinned by training for members and officers.				23 Nov 2017

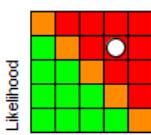
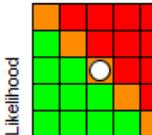
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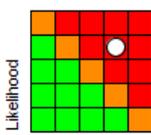
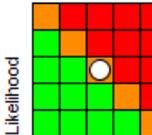
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CHS_H_01	Failures in workforce planning, including absence, vacancy management, and succession planning.			
Working Group (if Relevant)	Portfolio Holder	Lead Officer		
-	Resources	Head of HR & Business Transformation	Impact	Impact
Risk Statement	Failures in workforce planning adversely and significantly impact on the quality and consistency of service delivery, and compromise on-going availability of services.			
Worst Case Consequences	Failure to deliver services, including statutory services; more staff employed than required and / or staff with the wrong skill set; no clear plan to achieve savings that impact on staff; and industrial relations issues.			
Controls / Mitigation	Workforce Strategy agreed by Members, and monitoring of implementation by Human Resources; Workforce Planning Framework in place and being implemented by Services; Workforce Plans being developed across all Services and Council wide plan drafted.			
How do we monitor that controls are working effectively?	<ul style="list-style-type: none"> Update reports on workforce changes presented to, and considered by, CMT; Absence and turnover reports submitted to Joint Consultative Committee; and Consistency of approach to workforce planning across all Services. 			
What more can we do to reduce the risk?	Ensuring workforce plans form part of day to day workforce considerations, budget strategy and change programme.			
Lessons Learnt	Research of best practice undertaken to develop the workforce strategy and the workforce planning framework.			
LATEST NOTES				
Latest Note				Date Reviewed
Workforce plans in place and are now in the process of being reviewed, to ensure all Services have an up to date plan for the start of the new financial year. Absence continues to be monitored via the JCC. Succession planning and vacancy management are covered by workforce plans. No requirement for risk level to change at this stage.				22 Feb 2018

APPENDIX 3 (Continued)

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CHS_I_01	Compromised security, or inefficient use, of the Council's data and information asset.			
Working Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood Impact	Likelihood Impact
Information Governance Group	Resources	Chief Governance Officer and Head of Policy, Technology & Improvement		
Risk Statement	Failure to properly secure data and information may lead to data breach, legal recourse, and reputational damage. Equally, failure to maximise the value of the data and information asset may lead to disjointed and inefficient service delivery, and adverse impact on clients' experience of interacting with the Council.			
Worst Case Consequences	Significant data breach leading to personal harm and / or ICO investigation, fine, and reputational damage; Loss of data that compromises people's safety; Loss of personal information that compromises individuals' privacy; Loss of confidence in Council; and Ineffective / inefficient service delivery through failure to join up relevant information.			
Controls / Mitigation	Information Governance Manager appointed, with recognition of risk at corporate level; Information Governance and Security Policies in place; data protection training regime in place and monitored; framework of policies including Acceptable Use Policy and Record Retention Policy; Public Services Network compliance; and working to further develop strategy and practice for appropriate sharing of information across Services.			
How do we monitor that controls are working effectively?	<ul style="list-style-type: none"> • No breaches reported; • Audits of compliance with Policies; • Officer knowledge of subject area is tested and is high; and • Customer confidence is high. 			
What more can we do to reduce the risk?	-			
Lessons Learnt	-			
LATEST NOTES				
Latest Note				Date Reviewed
Officers are reviewing our approach to data and information as an asset. A working group has been established as a Council of the Future Project. This is reviewing how we hold information and what information we have. This work is taking place in preparation for General Data Protection Regulation.				23 Nov 2017

APPENDIX 3 (Continued)

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CHS_I_03	Cyber security incident compromises IT infrastructure, corporate application, social media channel, data / information.			
Working Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood	Likelihood
Information Governance Group	Leader of the Council	Head of Policy, Technology & Improvement	Impact	Impact
Risk Statement	A targeted cyber attack may impact on the availability, integrity and confidentiality of Council systems and data / information, with associated impact on service delivery and financial loss.			
Worst Case Consequences	Significant data breach, leading to personal harm and / or ICO investigation, fine, and reputational damage; loss of data that compromises people's safety; loss of personal information that compromises individuals; and significant impact on stakeholders' ability to interact electronically with the Council and loss of confidence in Council.			
Controls / Mitigation	Annual Public Services Network accreditation; network security, including firewalls, network segregation, penetration testing; and Information Security and Acceptable Use Policies, and supporting processes and procedures.			
How do we monitor that controls are working effectively?	<ul style="list-style-type: none"> Granting of annual Public Services Network certification; and Lack of data / information breach. 			
What more can we do to reduce the risk?	-			
Lessons Learnt	-			
LATEST NOTES				
Latest Note				Date Reviewed
An improvement plan for cyber security was approved by CMT in September 2017. Guidance was issued by the Scottish Government in November 2017 and the plan will be refreshed to take on board the requirements of that.				23 Nov 2017

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_CHS_P_01	Failure to undertake proper engagement and consultation with service users, stakeholders, and partners on the delivery of services.			
Working Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood	Likelihood
Community Planning Strategic Board	Leader of the Council	Head of Policy, Technology & Improvement	Impact	Impact
Risk Statement	Failure to appropriately engage and consult with service users, stakeholders, and partners on the design and delivery of Council services could lead to flawed decision making, services that do not meet people's needs, poorly targeted expenditure, and adverse impact on communities or individuals.			
Worst Case Consequences	Uninformed (or un-evidenced) decision making; resources not allocated to meet need; and failure to deliver statutory obligations.			
Controls / Mitigation	Participation Strategy was subject to a review by Scrutiny Panel in 2015; Actively responding to the requirements of the Community Empowerment Act 2015; active and responsive Citizen's Panel; Participation Strategy and supporting guidance and processes; and development of a locality planning model and priorities.			
How do we monitor that controls are working effectively?	-			
What more can we do to reduce the risk?	Procurement of Citizen Space, a bespoke online consultation and engagement platform.			
Lessons Learnt	Community Planning Audits – outcomes from audits of Falkirk and other Councils.			
LATEST NOTES				
Latest Note				Date Reviewed
New focus on participation and engagement being progressed through locality planning. Further development of citizens space being undertaken to manage consultation.				24 Nov 2017

Development Services

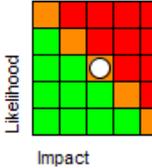
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
CRR_DS_C_01	Resilience: Business Continuity and Emergency Planning			
Working Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood Impact	Likelihood Impact
East of Scotland Regional Resilience Partnership	Leader of the Council	Director of Development Services		
Risk Statement	Effective Business Continuity Management (BCM) protects services, reputation, finances, and people. The threats to continuity include loss of; people (due to eg pandemic flu); Council assets (due to eg severe weather or fire); and key suppliers or data (due to eg supplier closure and barriers to sharing information).			
Worst Case Consequences	Risk of harm to people; failure to deliver service plan; increased costs of operating (eg overtime, contractors and temporary premises); using inexperienced staff to maintain delivery of core services, less efficient, reduced quality of service and increased complaints and non-compliance with Civil Contingency Act (CCA) legislation.			
Controls / Mitigation	Business continuity plans are developed at a corporate, service and supplier level. This follows a review of critical services and a BIA (Business Impact Analysis). Specific controls to reduce the likelihood of interruptions include:- premises and asset maintenance and inspections; flu vaccinations for critical staff; complaints monitoring; procedures and rotas in place to ensure 24 emergency control service including MECS service. backup locations for ICT; and generators at Municipal Buildings to deal with power failure.			
How do we monitor that controls are working effectively?	Business continuity plans are reviewed by services, tests co-ordinated by Emergency Planning Unit, and the outcomes / actions for these reviews are reported to CRMG.			
What more can we do to reduce the risk?	a) Corporate BCM policy agreed by CMT and awaits Executive approval; b) Emergency Planning unit are currently progressing Corporate BCP test program (agreed by CRMG – inc. Waste & Fleet plans).			
Lessons Learnt	-			
LATEST NOTES				
Latest Note				Date Reviewed
Updated 29 November 2017.				29 Nov 2017

Table 4: Corporate Risk Register Key**Abbreviations**

Risk Categories		Corporate Working Groups	
A	Assets	BVWG	Best Value Working Group
C	Change	CPRG	Capital Planning and Review
F	Financial	COPPSG	Public Protection and Community Justice Chief Officers' Strategy Group
G	Governance	CPP LB	Community Planning Strategic Board
H	Human Resources	CAMG	Corporate Asset Management Group
I	Information	CSG	Corporate Sustainability Group
P	Partnerships	CRMG	Corporate Risk Management Group
Portfolio Holders		EoS RRP	East of Scotland Regional Resilience Partnership
CLT	Culture, Leisure, and Tourism	FFG	Fairer Falkirk Group
ED	Economic Development	IMG	Information Management Group
EDU	Education	ICSG	Integrity / CONTEST Steering Group
ENV	Environment	PB	Procurement Board
HSC	Health and Social Care	SWG	Safety at Work Group
HOU	Housing	SHG	Strategic Housing Group
LEA	Leader of the Council	WRGG	Welfare Reform Governance Group
PP	Public Protection		
RES	Resources		

Corporate Working Group Summary

Corporate Working Group / Board Name		Lead	ToR	RR	SA	S/P	MAP	Comments and Key Findings / Actions
1	Public Protection and Community Justice Chief Officers' Strategy Group	CHS	✔	?	✘	?	?	Awaiting further information from Lead Officer.
2	Best Value Working Group	CHS	✔	?	✘	?	?	Awaiting further information from Lead Officer. Service Plans and Performance Updates are provided to Members.
3	Capital Planning and Review Group	CHS	✔	✔	✔	✔	✔	Risk is embedded within the Capital Bid, Plan, and Budget monitoring processes. Regular updates are provided to CMT and Members.
4	Community Planning Strategic Board	CHS	✔	⚠	✘	?	?	Awaiting further information from Lead Officer. A Strategic Risk Register is in place, but thematic risks assessments are outstanding.
5	Corporate Risk Management Group	CHS	✔	✔	✔	✔	✔	CRM arrangements are subject to regular audit and reporting to Members. CRMG self-assessment results were also positive. Risk continues to be embedded within eg Service Planning, COTF, and Budget arrangements.
7	Procurement Board	CHS	✔	✔	✔	✔	✔	An annual benchmarking and peer review process is undertaken. This informs the Board's plans, risk register, and reports to CMT and Members. Actions will be monitored on Pentana.
8	Safety @ Work Group	CHS	✔	?	✔	✔	✘	A self-assessment was undertaken and identified a number of areas for improvement. A paper will be provided to CRMG - including proposals for a revised Strategy, Plan, and Membership / Support for the Group.
9	Strategic Housing Group	CHS	✔	?	✘	✔	?	Awaiting further information from Lead Officer. There has been positive external feedback on the Housing Strategy.
10	Fairer Falkirk Group	CHS	✔	?	✘	✔	?	A Poverty Strategy (Towards a Fairer Falkirk) and action plan(s) are in place. The Group was revised in 2017, and so a self-assessment is postponed until 2018.
11	Corporate Asset Management (CAM) Group	DS	✔	✘	✔	✔	?	Cyclical reviews of all asset classes to be developed (in addition to property) including roads, fleet, ICT, and Housing. No regular updates to Members on the (broad) CAM Strategy or Plan.
12	Corporate Sustainability	DS	✔	✔	✔	✔	✔	An annual Climate Change Declaration is undertaken. This informs the Group's plan, risk register, and reports to CMT and Members.
13	East of Scotland Regional Resilience Partnership	DS	✔	✔	⚠	✔	✔	Self-assessment not yet undertaken, but an Improvement Plan is in place. A Community Risk Register and Emergency Preparedness Assessment summary will be included in the CRR. The Plan and Risk Register will be monitored on Pentana.
14	Information Management Group	CHS	⚠	⚠	-	-	-	A new Group formed during 2017/18. Updates will be provided in future.
15	CONTEST and Integrity Group	CHS	⚠	⚠	-	-	-	A new Group formed during 2017/18. Updates will be provided in future.
Key	ToR - Terms of Reference. RR – Risk Register.		SA - Self-Assessment. S/P - Strategy / Policy.		MAP – Measureable Action Plan(s)		Good Progress Some Progress	Limited Progress Not clear – more information needed