Agenda Item 8

Corporate Risk Management Update

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Falkirk Council

Title:	Corporate Risk Management Update
Meeting:	Audit Committee
Date:	16 September 2019
Submitted By:	Director of Corporate and Housing Services

1. Purpose of Report

1.1 This report provides an update on the Corporate Risk Register (CRR) and progress with embedding Corporate Risk Management (CRM) arrangements.

2. Recommendations

- 2.1 It is recommended that the Committee considers the CRM Update and:
 - (1) notes the Risk and Assurance Dashboard (at Appendix 1);
 - (2) notes the Corporate Risk Register (at Appendix 2);
 - (3) seeks additional assurance, where necessary, on the Council's framework of risk management, governance, and control; and
 - (4) refers this report to the Executive, for consideration and approval of the Corporate Risk Register.

3. Background

- 3.1 In April 2019, in line with the CRM Policy and Framework, the Audit Committee received an update on CRM arrangements and noted:
 - progress with embedding CRM arrangements;
 - the Corporate Risk Register (CRR); and
 - that a Members' Risk Workshop / Training will be arranged.
- 3.2 The Audit Committee is responsible for reviewing and seeking assurance on the Council's framework of risk management, governance, and control.
- 3.3 The role of the Executive is to review and agree the Corporate Risk Register (at Appendix 2), and to horizon scan for new and emerging risks.

4. Considerations

- 4.1 Since April 2019, Services have been undertaking a range of actions to embed risk management. A summary of progress is at Appendix 1. This confirms that good progress has been made in most areas.
- 4.2 In addition:
 - a revised Annual Assurance Statement process was introduced in early 2019. This needs to be monitored more effectively in some Services.
 - all Governance Groups have completed a self-assessment of their effectiveness, other than the Integrity / CONTEST Steering Group, which will assess its effectiveness after it reviews its remit in September 2019;
 - Services have included meaningful consequences, controls, and lessons learnt in the CRR (at Appendix 2); and
 - risk management has been embedded within the Council of the Future Programme, via a Risk Strategy and Programme Risk Register. The risk register is being reviewed to reflect wave 2 of the change programme.
- 4.3 The CRM Team and CRM Group will continue to work with Services to improve and embed CRM arrangements.
- 4.4 A Members' Risk Management Workshop was held in August 2019. Further training and development to support Members will be provided as and when required.

5. Consultation

5.1 Members of Corporate Management Team (CMT) 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 Work continues to be undertaken to embed risk management arrangements across the Council, and the CRM Team and CRM Group will continue to work with Services to improve and embed CRM arrangements.

Director of Corporate & Housing Services

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List of Background Papers: None

Risk Management and Assurance Dashboard

Table 1: Risk Management Assurance

	Children's Services	Corporate and Housing Services	Development Services	Social Work Adult Services	
Service Assurance Statements (SAS)	口	~	\checkmark	① ①	
SMTs review SAS quarterly – including new and emerging risks.	More robust Service Assurance Statements were introduced in early 2019, but Service Assurance better ongoing monitoring of these.				
Risk Register details	✓℃	\checkmark	\checkmark		
The description of risks, controls, and review mechanisms are clear and reflect other Committee papers and plans.	Most risks now have clearer risk descriptions. Services need to ensure that risks are consistent with Committee reports.				
Risk Mitigation Actions / Plans	① 📃	✔ 1	✓ ①	1	
Measureable Risk Actions (or PIs) are in place and mapped to risks on Pentana.	Significant progress made. Measureable actions or plans identified for most risks. This will help to provide better assurance and integrate risk and performance reviews More work is needed to roll out Pentana within Children's and Social Work Adult Servic				
Risk Management Training	>	>	>		
E-learning has been completed by target groups, and training identified.	CHS & DS & Schools: CRM e-learning has been rolled out at Team Leader and above. SWAS: e-learning and SSSC Risk Resource to be rolled out to Team Managers in 2019.				

Table 2: Governance Group Assurance

No.	Code	Name	Status	Last Review
1	CPF	Corporate Partnership Forum	\checkmark	Q2 2019
2	CPRWG	Capital Planning and Review Working Group	~	Q2 2019
3	CPSB	Community Planning Strategic Board (roles being reviewed in light of the self-assessment in early 2019– proposals are being drafted in Q3 2019)		Q3 2019
4	CAMG	Corporate Asset Management Group (Cyclical reviews of all asset classes are now implemented)	✔ �	Q2 2019
5	CRMG	Corporate Risk Management Group	~	Q2 2019
6	CSG	Corporate Sustainability Group	<	Q2 2019
7	COTFB	Council of the Future Board	~	Q2 2019
8	EoS RRP	East of Scotland Regional Resilience Partnership	K	Q2 2018
9	FFP	Fairer Falkirk Partnership	~	Q2 2019
10	IMWG	Information Management Working Group		Q2 2019
11	ICSG	Integrity / CONTEST Steering Group (The Group will review its remit during Q3 2019)	*	Q3 2018
12	PB	Procurement Board	K	Q2 2019
13	PPCJ COSG	Public Protection and Community Justice Chief Officers' Strategy Group	~	Q1 2019
14	SMG	Safety Management Group (The Group will meet in Q3 2019 and will agree plans and Pls)		New
15	SHG	Strategic Housing Group	>	Q2 2018
16	SWIS PB	Social Work Information System Program Board	>	Q3 2018

Table 3: Operational Risk Management Assurance

Corpor	ate Risk	Service Risk Rating					
Risk Category	Current Risk Rating	Children	s Services	Corporate and Housing Services	Development Services	Social Work Adult Services	
			High Co	porate Risks			
	High	L	ow	High	Medium	Medium	
Equalities	Key Issues / Actions	Worl	k is required		o which this is embedded is planned for 2019/20.	d across Services.	
	High	H	ligh	High	High	Medium	
HR Management and Workforce Planning	Key Issues / Actions			is a challenge in CS a	nt Plans need to be revie and SWAS. Absence is a staff.		
la forma ation	High	Me	<mark>dium</mark>	High	Medium	Medium	
Information Assets (ICT/Governance)	Key Issues / Actions				N/A		
Resilience:	High	Me	<mark>dium</mark>	High	Medium	Medium	
Emergency. Planning and Business Continuity	Key Issues / Actions	Increase	ed to High in		ews are still to be comple is planned for 2019/20.	eted in most Services.	
			Medium C	orporate Risks			
A = = = 4	Medium	<mark>Me</mark>	<mark>dium</mark>	Medium	Medium	Medium	
Asset Management	Key Issues / Actions				N/A		
	<mark>Medium</mark>	Me	<mark>dium</mark>	Medium	Medium	Medium	
Financial Controls	Key Issues / Actions			complied with in Servi	annual declaration to co ces. The rating is also c udits.		
Fraud, CONTEST,	Medium	<mark>Me</mark>	<mark>dium</mark>	High	Medium	Medium	
and Serious Organised Crime	Key Issues / Actions	Wo	rk is ongoing	g to assess the role of	the Integrity / CONTEST	Steering Group.	
	Medium	H	ligh	Medium	Medium	Medium	
Health and Safety	Key Issues / Actions	Service	H&S Audits		oduced in 2019/20 which isk.	will help monitor this	
	Medium	Me	<mark>dium</mark>	Medium	Medium	Medium	
Procurement	Key Issues / Actions				N/A		
	Medium	L	ow	Medium	Medium	Medium	
Sustainability / Climate Change	Key Issues / Actions				ed as part of 2019 Climat d likelihood of meeting ta		
				Кеу			
Table 1 and 2:	Assurance Level			Table 3: Risk Ratin	-	Change	
*	No Assurance	High	C	There are significant ontrols need develope		More Info Needed	
Lin	nited Assurance	Medium		There are risks,	though	Increased	
				trols are broadly effec limited risks in a parti		71000101100	
\checkmark	Substantial	Low		controls are wo		Decreased Assurance	

Corporate Risk Register

Table 1 – Summary of Risks

High C	orporate Risks					
Lead Service	Risk Title	Target Risk (if relevant)	Governance Group (GG, if relevant)	GG Assurance Level	Last Reviewed	Status
AS	Health and Social Care Integration.	Medium			01 Aug 2019	\bigcirc
CS	Public Protection (Adults and Children).	High	PPCJCOSG	\checkmark	02 Aug 2019	\bigcirc
CHS	Compromised security, or inefficient use, of the Council's data and information asset.	Medium	IMWG		01 Aug 2019	Ø
CHS	Cyber security incident compromises IT infrastructure, corporate application, social media channel, or data / information.	Medium	ITSG	•	01 Aug 2019	\bigcirc
CHS	Failure to properly discharge equalities duties.	Medium			01 Aug 2019	\bigcirc
CHS	Failure to recognise, and act upon, the need for transformational change and continuous improvement.	Medium	COTFB	\checkmark	18 Jul 2019	Ø
CHS	Failure to undertake proper engagement and consultation with service users, stakeholders, and partners on the delivery of services.	Medium	CPSB		01 Aug 2019	
CHS	Failures in workforce planning, including absence, vacancy management, and succession planning.	Medium	CPF	\checkmark	23 Jul 2019	\bigcirc
CHS	Insufficient funding to deliver services and deliver outcomes.	Medium			05 Aug 2019	\bigcirc
DS	Resilience: Business Continuity.	Medium			05 Jun 2019	
DS	Uncertainties surrounding Brexit.	Low			29 Jul 2019	\bigcirc
DS	Sustainability.	Medium	CSG	\checkmark	28 Mar 2019	\bigcirc

Medium Corporate Risks						
Lead Service	Rick Titlo		Governance Group (GG, if relevant)	GG Assurance Level	Last Reviewed	Status
CE	Failures in Leadership, Governance, and Decision Making.	Medium			18 Mar 2019	\bigcirc
CS	CONTEST, Integrity, and Serious Organised Crime.	Medium	ICSG	₩	30 Jul 2019	\bigcirc
CHS	Failure in Financial Management Control, or Assurance.	Medium	CPRWG	\checkmark	05 Aug 2019	\bigcirc
CHS	Failure to monitor, measure, manage, and mitigate the impacts of Welfare Reform and Poverty.	Medium	FFP	\checkmark	05 Aug 2019	\bigotimes
CHS	Failure to provide a safe environment for employees and visitors.	Medium	SMG		17 Jul 2019	
СНЅ	Procurement and Commissioning arrangements fail to secure best value, and demonstrate compliance with Council standards or legal requirements.	Medium	РВ	\checkmark	05 Aug 2019	
DS	Asset Management [Use, Condition, Suitability, Availability, and Reliability].	Medium	CAMG	\checkmark	29 Jul 2019	\bigotimes
DS	Resilience: Emergency Planning.	Medium	EoS RRP	\checkmark	07 May 2019	0

High Service Risks						
Lead Service	e Risk Title		Governance Group (GG, if relevant)	GG Assurance Level	Last Reviewed	Status
CS	Closing the Gap in Attainment : risk of failure to deliver on the Education Plan - includes managing Pupil Equity Fund and Reforms.	Medium			05 Aug 2019	
CS	Criminal Justice Services.	Low			02 Aug 2019	
CS	Getting It Right For Every Child (GIRFEC).	Medium			05 Aug 2019	\bigcirc
CS	Seatbelts on School Transport (Scotland) Act 2017 - Implications for Falkirk Council.	Medium			30 Jul 2019	\bigcirc
CHS	Failure to adhere to current and emerging building regulations and standards relating to fire safety within housing.	Medium	SHG	\checkmark	05 Aug 2019	

Mediun	n Service Risks					
Lead Service	- Risk Titla		Governance Group (GG, if relevant)	GG Assurance Level	Last Reviewed	Status
AS	Carers Act implementation.				01 Aug 2019	\bigcirc
AS	Self-Management / Independent Living (including Self-Directed Support).				01 Aug 2019	Ø
CS	Failure to Deliver Scottish Government Early Years Expansion (by 2020).	Low			02 Aug 2019	Ø
CS	Scottish Social Services Council (SSSC) Code of Conduct - Recent Changes.	Low			02 Aug 2019	Ø
CS	Social Work Information System (SWIS) Replacement.	Low	SWIS PB	\checkmark	02 Aug 2019	0
CS	Social Work Resource challenges - Failure to meet the challenges set out in the Chief Social Work Officers' Annual Report.	Low	PPCJCOSG	\checkmark	02 Aug 2019	Ø
CS	Tackling Bureaucracy and Reducing Workload in Schools.	Low			05 Aug 2019	Ø
CHS	Failure to meet the priorities set out within the Local Housing Strategy.	Medium	SHG		19 Jun 2019	
DS	Cemeteries / Head Stones Safety – failure to implement improvement plan.	Low			14 Mar 2019	\bigcirc
DS	Investments - Failure to deliver projects / capital programs.				18 Jun 2019	
DS	Prohibitions and Loss of Licences - failure to fulfil duties as a Licence Holder.	Medium			18 Jun 2019	\bigcirc
DS	Regulatory Enforcement - failure to fulfil duties as a Regulatory Body.	Medium			18 Jun 2019	

Table 2: Details of High Corporate Risks

Adult Services

					Toward Diels /		
Risk Ref.	Risk Title			Current Risk	Target Risk / Date		
COR_SWAS.03	Неа	Ith and Social Care Integ	ration				
Ownership / Monitoring	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	High	Medium		
ownership / Monitoring	Head of Social Work Adult Services		Health and Social Care				
	The IJB maintains a Strategic R Delivery of Strategic Plan 1 Funding and /or demographic 2 Governance arrangements;	isk Register which assess	is agreed by the IJB, as set out wi		_		
Risk Statement	 3 Partnerships; 4 Capacity and infrastructure; 5 Directions. Performance, Oversight & Qu 6 Assurance; 7 Commissioning. 	ality Control					
	Specific High Level Risks 8 Unscheduled Care; 9 Transition of Operational Management of NHS Services to Partnerships; 10 Brexit. A number of these risks are rated high, which reflects the level of change and uncertainty.						
Worst Case Consequences	 Financial and Project: Budget overspends due to inability to effectively manage pressures. Service failures. Harm: serious harm (death / injury) and disadvantage / inequalities. HR: significant issues, including stress absence / claims. Reputation: national media interest and / or loss of confidence. Service: opportunities to improve services, efficiencies, outcomes. 						
Controls / Mitigation	 The IJB's Strategic Risk Reg IJB Risk Strategy and governing 		ach of the strategic risks above.				
How do we monitor that controls are working effectively?	 JB Strategic Risk Register is reviewed by Leadership Team and IJB Audit Committee quarterly. HSCP Leadership Team and Integration Joint Board receive regular risk and performance updates. Ongoing program of inspections, self-assessments, and audits. 						
What more can we do to reduce the risk?	 The IJB's Strategic Risk Register outlines actions for each of the strategic risks above. IJB risk and governance arrangements are being improved. HSCP management and locality structures are being improved. Delivery Plans (including transformation projects) are being developed. 						
Lessons Learnt	Lessons Learnt will be consider	ed as part of future HSCP	Leadership Team risk reviews.				
Latest Note / Review Date	updates are provided to the Lea	dership Team and IJB Aud nagement arrangements (gister was reviewed in early 2019 dit Committee. These updates als e.g. review of operational risks of ead.	o confirm that	01 Aug 2019		

Chi	Idre	n's	Ser	vices
	IUI	511 5	JEI	vices

Risk Ref.		Risk Title		Current Risk	Target Risk / Date		
COR_CS_08	Public	Protection (Adults and C	hildren)				
	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	High	High		
Ownership / Monitoring	Chief Social Work Officer	Public Protection & Community Justice Chief Officers' Strategy Group	Public Protection	g.r	- ingri		
Risk Statement	Risk Statement 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: • The need to keep children safe and avoid child deaths. • The reputational risk to the Council in this situation. • The reputational risk to the Council in this situation.						
Worst Case Consequences	 Potential compensation clair 	Fatal Accident Enquiries / C ns. on (e.g. Care Inspectorate	rable adults. ourt / Prosecution or other externation or Criminal Justice Authority).	al legal interven	tions.		
Controls / Mitigation	 The following processes MA shared assessment. Governance Structure - inclu 	PPA / IRD's / CP and ASP uding risk audit and perform for all Council and partner a public.	ng of information (including protoc Case Conferences / CP / ASP reg ance monitoring are in plce (e.g. agency staff regarding CP / ASP / ocal communities.	gister integrated Child Protection	-		
How do we monitor that controls are working effectively?	 Public Protection Group and Sub-Groups. Care Inspectorate. Children's Commission. Criminal Justice Authority. 						
What more can we do to reduce the risk?							
Lessons Learnt							
Latest Note / Review Date	No change to assessment.				02 Aug 2019		

	Governance Groups (where relevant) - Self-Assessment	
Objectives	 Child and Adult protection issues lead; Develop strategies and action plans for Child and Adult protection, including Corporate Parenting, Adu Protection, and MAPPA related strategies and plans; Monitor and report on strategy and plans progress; Ensure governance arrangements are fit for purpose; and Align activities with key projects and multi-agency groups, including Self-directed support, integration Community Care, and other services, and GIRFEC duties. Associated Groups: Alcohol & Drugs Partnership, MAPPA, Community Justice Partnership, Communit Partnership, Child Protection Committee, Adult Protection Committee, and Gender Based Violence. External Members: Chief Executive, NHS Forth Valley; and Chief Superintendent, Police Scotland. 	of NHS,
Self-Assessment / Actions	 a) How well does the Group monitor all aspects of the strategy / policy(s) The Public Protection Group Chief Officers Group (PPCOG) does not monitor a policy per se, but overss partnership's response to a number of priorities and activities within the public protection remit. The worl underpinned by a delivery plan that connects to SOLD and this is reviewed and reported to the CP Exec annual basis. Actions: The annual delivery plan is to be reviewed, updated and refreshed to ensure it continues to be relevant. b) How well the strategy / policy(s) is embedded at a corporate level? The work of the PPCOG is well embedded in the partnership and its sub groups. Actions: The group is currently considering how it can use data to better effect to seek assurance from the variou in and to, in turn, provide assurance to the CPP Board and Executive. c) How well the strategy / policy(s) is embedded at a Service level? . Each element of the remit is taken forward appropriately by services. There are a number of areas whe working could be more effective and work over the next months will seek to address this. Actions: Some partnership groups are currently being reviewed, including MARAC, and PPCOG oversees this pr between PPCOG and service groups can be improved. d) How well the strategy / policy(s) is embedded at a Project / Partnership / Supplier level? The PPCOG is a clear part of the CP Partnership. Discussions are on going at the moment around publi arrangements locality and at a Forth Valley level. Work is starting to understand the costs and benefits of arrangements for public protection. e) How well does the Corporate support function(s) help to embed and monitor the strategy / policy(s). T supported by a policy officer in PTI. April 2019 The Assurance Level and Self-Assessment has been validated on the basis that Internal Audit carried or Public Protection arrangemen	s groups reporting ere cross service ocess. The links c protection i future ne future The PPCOG is ut an audit of cial Work Officer
Assurance Level / Date	Substantial Assurance	04-Mar-2019

Corporate & Housing Services

Risk Ref.		Risk Title		Current Risk	Target Risk / Date	
COR_CHS_07	Compromised security, or inef	ficient use, of the Council's data a asset.	nd information			
	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	Llink		
Ownership / Monitoring	Chief Governance Officer and Head of Policy, Technology & Improvement	Information Management Working Group	Resources	High	Medium	
Risk Statement	Failure to properly secure data and information may lead to failure in business continuity, 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, storage of needless information and adverse impact on clients' experience of interacting with the Council. This risk includes the potential failure to comply with data protection legislation and deliver on the information objectives with the COTF Program and Corporate Plan. There are a number of closely related corporate risks, e.g. Cyber Security and SWIS Replacement.					
Worst Case Consequences	 Loss/misuse of data that compro- Loss/misuse of personal information 	nformation Commissioner's Office (IC mises people's safety; tion that compromises individuals' pri nd ineffective / inefficient service deliv	vacy;		_	
Controls / Mitigation	 Risk Officer, Data Protection Offic Register (and concept of Informa Information Management Workin Information Governance and Sec Data protection training regime ir Framework of policies including A Planned future workstream as pa sharing of information across Ser Public Services Network (PSN) c 	 Data protection training regime in place and monitored. Framework of policies including Acceptable Use Policy and Record Management Plan. Planned future workstream as part of COTF Information project to further develop strategy and practice for appropriate sharing of information across Services and Partners. 				
How do we monitor that controls are working effectively?	 Council of the Future Progress R Review and Lessons Learnt follo Data breaches/complaints report Self assessment by Services of c Officer knowledge of subject area Lessons learnt from internal and extra 	of Information & Data Protection Revie eports ('Information Working For You wing all data breaches and FOI comp ed to ICO. compliance with Data Protection Polic a is tested via annual data protection ernal data breaches are reviewed qua n Governance Manager in (a) annual	l' Project.). blaints. ty. training. arterly by the Inform			
What more can we do to reduce the risk?	Information Governance: GDPR Follow-up Plan. COTF Information Project Plan. Information security policies to be updated. 					
Lessons Learnt	volume and sensitivity of data disclo administrative errors. One of the biggest challenges post-0 processes. Changes have been mad thinking about data protection at an	'near-misses" were reported, one of v sed. Almost all of the breaches result GDPR is to embed <u>"data protection</u> de to the Council's project manageme early stage. However, it remains a ch or higher-risk projects and procureme	ted from personal d by privacy and de ent and procuremer allenge to ensure o	ata being disclo e <u>sign"</u> into the (It documentatio	osed due to Council's n to get officers	

	<u>Complaints</u> about data protection matters (such as lack of transparency, and failure to properly deal with subject access requests) have increased, as have requests to put in place data sharing agreements with other data controllers (such as the Scottish Government) to formalise existing arrangements.
	The limited number of applications/decisions demonstrates that, in the main, the practical arrangements for dealing with FOI within the Council work well, and the legal advice given is reliable.
Latest Note / Review Date	The Council has recently approved a new Information Security and Acceptable Use Policy. This new policy will be overseen by a newly formed cyber security group chaired by the Head of PTI. The first meeting of this group will take place in August and will include reviewing current security arrangements. A national assessment of local cyber security arrangements has also recently been published and will be reviewed by the group at its first meeting. We are in the process of establishing two cyber security posts to ensure our arrangements, processes and routines for ensuring security are appropriate and robust.
	Governance Groups (where relevant) - Self-Assessment
Objectives	 Promote the effective management of all Council information in all formats throughout its lifecycle, to meet operational, legal and evidential requirements. Support the Council in identifying and managing its information needs, risks and responsibilities. Ensure an Information Management strategy is in place and overseen. Ensure necessary plans and policies relevant to information management are in place and regularly reviewed (such as the Records Management Plan, the Information Security Policy (in conjunction with IT Security Group) and the Data Protection Policy). Oversee the effective, secure and appropriate sharing of information by the Council. Ensure an Information Risk Management policy and framework is in place and overseen; and ensure that this is embedded throughout the Council (to cover roles, responsibilities, training, information asset register, data protection impact assessments, data breach notification,). Receive regular reports on information security risks/incidents/breaches from the Information Governance Manager (organisational) and the Technology and Infrastructure Manager (technical) and review these to ensure that action is taken to reduce both the occurrence and impact of such incidents in the future. Work closely with the IT Security Group to promote Information Security throughout the Council. The INWG does not have oversight of Cyber security, PSN compliance, or Office 365 planning and implementation. The Group is chaired by the Chief Governance Officer, and co-ordinated by the Information Governance Manager / Team. Whilst this corporate risk is jointly managed by the Chief Governance Officer and Head of PTI, the latter has no direct input into the agenda or work of the IMWG.
Self-Assessment / Actions	The IMWG was established in October 2017 and provides updates as required to CMT, CRMG and Members (via the Group and Senior Information Risk Officer), and the Group will implement appropriate audit processes. PRIORITIES / ACTIONS: The IMWG considers the following matters regularly: Data breaches/complaints – quarterly Data protection impact assessments – reviewed as required Data protection training – completion rates and issues with OLLE Relevant policies/plans - eg information security, records management, RIPSA Progress on information/document management system (related to O365 - Microsoft Office Review)) The IMWG is currently looking at: Plan for review of Business Classification Scheme Use of CCTV across the Council Use of warning markers across the Council (via sub-group) Open data (via sub-group) The IMWG will need to review: Information Risk Management Strategy (possibly tied into O365) Information Risk Management Strategy (possibly tied into O365) Information Risk Management Strategy (building on information asset register) Digital continuity and preservation SELF-ASSESSMENT: a) how effective is it at monitoring e.g. all aspects of the strategy / policy(s) : Rating = 3: Limited Information security policies (including AUP) Data protection policy Records Management Plan and associated policies The Group has had oversight of GDPR action plan, and now the GDPR follow-up plan, and more recently the plan for

Assurance Level / Date		31-May-2019		
	 c) how well the strategy / policy(s) is embedded at a Service level? Rating = 3: Limited (evidence / actions as above) 			
	 Records management – limited as Business Classification Scheme/retentions not being used/known (evidenced by personal data audit) but currently being reviewed part of Information project, and will then be used as basis of folder structure under O365 Information Governance Manager and Records Manager continue to advocate for O365 project have full records management capabilities 			
	 The Information Governance Manager is developing a means of self-assessment by Services of compliance with the Data Protection Policy/GDPR, which will be subject to review by the IMWG in August 2019. There is no intention for the Group to have oversight of any information governance work plan or ICT work plan. b) how well the strategy / policy(s) is embedded at a Corporate level? Rating = 3: Limited Data protection - limited as evidenced by data breaches, gaps in data protection training and limited number of completed data protection impact assessments Information security – limited as no monitoring of compliance with those policies. 			
	review of the Business Classification Scheme (essential to the Records Management Plan). The Group has updated Information Security Policy and Acceptable Use Policy. There is a need for the group to look at a v Information Management Strategy (probably tied in with O365 project).			

Risk Ref.	Risk Title			Current Risk	Target Risk / Date	
COR_CHS_08		promises IT infrastructure a channel, or data / inforr	e, corporate application, social nation.			
	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	High	Medium	
Ownership / Monitoring	Head of Policy, Technology & Improvement	IT Steering Group	Leader of the Council			
Risk Statement	A targeted cyber attack may imp information, with associated imp		grity and confidentiality of Council I financial loss.	systems and d	ata /	
Worst Case Consequences	 Significant data breach, lead loss of data that compromise loss of personal information 	ling to personal harm and / es peoples safety. that compromises individua	Systems and the Internet without or ICO investigation, fine, and rep als; and ctronically with the Council and Lo	utational dama	-	
Controls / Mitigation	 Annual Cyber Essentials Acc Network Security, including f National Cyber Security Cen 	Annual Cyber Essentials Accreditation.				
How do we monitor that controls are working effectively?	Achieving Cyber Essentials aLack of Data/Information bre	 Lack of Data/Information breach. Immunity to cybersecurity incidents which affects others Monitoring of our protection systems e.g. Symantec Endpoint 				
What more can we do to reduce the risk?	 Continued participation in IT Continued awareness of Nat Informatics Systems Profess Continued testing of our BCF systems and confirm which a 	 PSN Accreditation Improvement Plan (and monitoring by the IMWG). Continued participation in IT Security groups such as the Scottish Local Authority IT Security Group. Continued awareness of National and International Security Incident reports through CHisP (Certified Health Informatics Systems Professional) and CERT (Network Certification Body). Continued testing of our BCPs in conjunction with our colleagues in Emergency Planning Services to review their ICT systems and confirm which are critical ('Hot Systems') i.e. those needing recovered as a priority during any interruption. This will allow the ICT to develop appropriate recovery plans. 				
Lessons Learnt	 Continuous review of internal and external cyber security incidents, and appropriate response (reinforcing staff awareness and technical security). Business continuity risks relating to a loss of power failure at Municipal Buildings have been tested and the emergency generator provided power to the building and IT systems during this time. 					
Latest Note / Review Date	PSN compliance and are seekir passwords and potentially lockin The Council has recently appro- will be overseen by a newly forr this group will take place in Aug assessment of local cyber secu the group at its first meeting.	ng to address any issues id ng accounts where security ved a new information secu- ned cyber security group cl just and will include reviewi rity arrangements has also ishing two cyber security po	bilities of our network etc in advance entified. This includes reviewing we does not conform to agreed standurity and acceptable use policy. the haired by the Head of PTI. The fir ng current security arrangements. recently been published and will be posts to ensure our arrangements, p	reak dards. is new policy st meeting of A national be reviewed by	01 Aug 2019	

Risk Ref.	Risk Title			Current Risk	Target Risk / Date	
COR_CHS_05	Failure to properly discharge equalities duties.					
Ownership / Monitoring	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	High	Medium	
Ownership / Monitoring	Head of Policy, Technology & Improvement					
Risk Statement	Failure to comply with equalities reputational, safety, legal, and f		antage, poverty, inequality, or har	m, and associat	ed	
Worst Case Consequences	Challenge under Equalities Act	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 Note / Review Date	The Council published its latest mainstream report by end of April 2019. We are seeking to undertake a self assessment over the coming months to identify areas for improvement. This will complement training on equalities and human rights work we will be undertaking over the coming months with Members and senior officers.					

Risk Ref.		Risk Title		Current Risk	Target Risk / Date			
COR_CHS_02		Failure to recognise, and act upon, the need for transformational change and continuous improvement.						
	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	High	Medium			
Ownership / Monitoring	Head of HR & Business Transformation	Council of the Future Board	Leader of the Council					
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	 Failure to deliver the planned pr timescales, leading to: absence of required skills or service failure (including deli external intervention in the re 	expertise to deliver service very of statutory services);		required savings	in the required			
Controls / Mitigation	 Programme of COTF work a Change Manager and Project and Framework for COTF reporti 	 Programme of COTF work agreed and being progressed; Change Manager and Project Management Office team appointed to ensure good practice and drive pace of change; 						
How do we monitor that controls are working effectively?	 Reports on projects and reviews submitted to, and scrutinised by, the Council of the Future Board, CMT, and Executive; Audit Committee monitors the effectiveness of COTF Risk Strategy / program governance; Change implemented, savings achieved, and performance improved, in line with agreed outcomes; The Programme Management Office (PMO) have 1:1 reviews with Program Managers and attend Service Change Boards to ensure that robust project assessments / documentation are in place; Monthly project reports form the basis of Performance Panel reports for each Service's COTF service plan updates. 							
What more can we do to reduce the risk?	 The Board will review the Program Risk Register at 6 monthly intervals (or by exception); Project lead officers will monitor project risks, as part of project management arrangements; Oversight and scrutiny by CMT, Audit Committee, Executive, Council, and external audit; Internal audit of processes and controls; and Reviewing the change programme through Council of the Future proposals. 							
Lessons Learnt	Consideration has been given to programmes in place elsewhere		rned by other Councils, feedback	c from Audit Sco	tland, and			
Latest Note / Review Date	No change at present and risk r	egister for COTF is current	ly being updated		18 Jul 2019			
	Governance	Groups (where relevant)	- Self-Assessment					
Objectives	 The COTF Risk Strategy outlines the following responsibilities for oversight of Program / Project risks: COTF Board is responsible for identifying and scrutinising COTF programme risks, providing risk reports to Members, and monitoring the effectiveness of the COTF Risk and Opportunities Management Strategy; and Project Managers / Lead Officers are responsible for assessing project risks and opportunities, and ensuring that the COTF Risk and Opportunities Management Strategy is applied effectively. The COTF Risk Strategy also sets out the following success measures: successful delivery of COTF objectives, outcomes, and savings; a clearer understanding of the risks (uncertainties) and potential consequences; clear, agreed, and measureable actions to mitigate risks / maximise benefits; well informed decisions - fewer unexpected problems and adverse incidents; and successful outcomes from external scrutiny, e.g. audits and best value reviews. 							
Self-Assessment / Actions			ted to the COTF Board on 06 Au t due for completion February 20					

	 Consultation with Trades Unions on employee involvement in the change programme and creation of CC Groups. Creating a new suite of project reporting templates and rolling these out to project managers & sponsors Embedding a refreshed Elected Member arrangement for the COTF Board. Refreshing the Workforce of the Future Board. Setting principles for the prioritisation of projects. August 2018. 	5
Assurance Level / Date	Substantial Assurance	14-Jan-2019

Risk Ref.	Risk Title			Current Risk	Target Risk / Date	
COR_CHS_09	Failure to undertake proper engagement and consultation with service users, stakeholders, and partners on the delivery of services.					
	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	High	Medium	
Ownership / Monitoring	Head of Policy, Technology & Improvement	Community Planning Strategic Board and Participation Group	Leader of the Council			
Risk Statement		awed decision making, ser	sers, stakeholders, and partners ovices that do not meet people's not do and meet people's not duals.			
Worst Case Consequences	Uninformed (or un-evidenced) d obligations.	lecision making; resources	not allocated to meet need; and f	ailure to deliver	statutory	
Controls / Mitigation	Committee monitoring the follow The participation strategy was s Engagement and consultation is Council and other stakeholders There is a corporate participatio consultation tool. These measures may not preve provide a more defensible positi Actively responding to the requi Participation Strategy and suppor priorities.	These measures may not prevent risks but should reduce the likelihood of a breakdown in stakeholder relationships and provide a more defensible position if there is a legal challenge. 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				
How do we monitor that controls are working effectively?	The Participation Strategy was approved by Scrutiny Committee and has subsequently been subject to a Scrutiny Panel. Regular reports are brought to the Committee to enable it to monitor its implementation. It is due to be renewed later this year and internal and external engagement on the new strategy is underway. A risk and governance framework is in place at both Council and Community Planning Partnership (CPP) levels. The Community Planning Partnership Leadership Board are accountable for the effectiveness of the partnership performance, isk and governance arrangements. The SOLD plan summarises the governance arrangements including delivery groups and partners' roles. The Scrutiny Committee receives regular 6-monthly CPP updates and is responsible for scrutinising these risks. This ncludes updates on Locality Planning and Community Empowerment. The Audit Committee receives regular 6-monthly corporate risk updates and is responsible for scrutinising the risks to the Council. As part of this, the lead officer updates the corporate risk and provides CRMG with an annual self-assessment on the effectiveness of the Community Planning Leadership Board. Audit Scotland has also undertaken reviews on Community Planning Partnerships.					
What more can we do to reduce the risk?	Procurement of Citizen Space, a	a bespoke online consultat	ion and engagement platform.			
Lessons Learnt	Community Planning Audits – o	utcomes from audits of Fal	kirk and other Councils.			
Latest Note / Review Date	with our communities. The enable are achieving the Councils prior	led communities' board wi ities and minimising risk in	ished to ensure we are appropriat Il link with our participation group t this area appropriately. rward with the enabled communiti	to ensure we	01 Aug 2019	

	Governance Groups (where relevant) - Self-Assessment
	Community Planning Strategic Board
	Strategic Aims:
	 Sets the strategic direction of the Falkirk Community Planning Partnership (CPP); Ensures that the CPP fulfils relevant statutory requirements; Ensures that the strategic vision for the area, and the partnership's strategic priorities and local outcomes are realised; and
	4. Promotes effective partnership working across the CPP.
Objectives	 Objectives: Approves the Strategic Outcomes & Local Delivery Plan Achievement of strategic priorities and local outcomes Scrutiny and challenge on the progress of attainment of strategic priorities and local outcomes Scrutiny and challenge of locality planning Approves the CPP's strategies & plans Approves the CPP's approach on locality planning Secures continuous improvement in local partnership working Ensures the appropriate alignment of partnership resources with strategic priorities and local outcomes Scrutinises, challenges and supports agencies, delivery groups to achieve agreed outcomes and priorities
	External Members: Falkirk Council (Chair), Police Scotland, the Scottish Fire & Rescue Service, NHS Forth Valley, Forth Valley College, CVS Falkirk and District, the Scottish Government.
	Participation Group The remit of the group is external engagement with communities – specifically the involvement of communities in Council decision making. The Group's key actions are:
	 To implement and monitor progress on the Strategy for Community Engagement 2019-2024; To share what community engagement work we are doing and share the results and learning from that work; To work together on community engagement projects so that we can avoid duplication and "consultation fatigue" within communities; To share best practice; Address training needs; To keep everyone informed of what is happening at a strategic level.
	Participation Group
	The Group was added to the schedule of Governance Groups in 2019 and a self-assessment will be requested in 2019/20.
	Community Planning Strategic Board
Self-Assessment / Actions	 The Strategic Board meets 6 times per year. Core to its business is the scrutiny of Community Planning delivery groups. These groups have responsibility for delivering on strategic priorities and local outcomes. Scrutiny is achieved through the submission of progress and performance reports every 6 months. These reports include an assessment of challenges and risks. The Board also receives regular progress reports on locality planning and any relevant improvements it has requested to improve partnership working; The Board is advised of new legislative or national requirements by relevant senior officers from across the CPP. This includes an assessment of the implications arising from these requirements for the Falkirk CPP; ; The Falkirk CPP is scrutinised in meeting its statutory obligations by Audit Scotland. This and self assessment is used to inform and develop the partnership's improvement programme; and The Board has an agreed development plan to ensure that the knowledge of its members remains relevant and up to date.
	We have just completed an independently facilitated self assessment led by the Improvement Service, the strengths and areas for improvement from which are being collated for a report to go to the Community Planning Executive Group later this month. The assessment involved Strategic Board and Exec Group members. Any additional risks emerging from the self assessment will be entered onto Pentana, as will relevant improvement actions.
	April 2019: Additional information has been requested on each of the actions outlined in the previous self-assessment. This will allow the assurance level and self-assessment to be validated and progress reviewed.
	Additional assurance is required in relation to:
	 Governance and Reporting Structure (in particular, the role of Council's Executive needs reviewed on the Corporate Risk Register); and Delivery Groups' plans, risk registers, and progress & performance reports.
	The assurance rating has been reduced to Limited Assurance until we receive the information above (or other relevant assurance).
Assurance Level / Date	Limited Assurance 01-May-2019

Risk Ref.		Risk Title		Current Risk	Target Risk / Date		
COR_CHS_06	Failures in workforce plan	ning, including absence, succession planning.	vacancy management, and				
Ourseshin (Menitoring	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	High	Medium		
Ownership / Monitoring	Head of HR & Business Transformation	Corporate Partnership Forum	Resources				
Risk Statement	compromise on-going availabilit There is also a risk that the Cou and to undertake effective const This risk is closely linked to the	Failures in workforce planning adversely and significantly impact on the quality and consistency of service delivery, and compromise on-going availability of services. There is also a risk that the Council fails to agree and implement a modern and flexible package of terms and conditions, and to undertake effective consultation with employees and trades' unions. This risk is closely linked to the following additional, but separate, corporate risks: equalities, health and safety, early years expansion, and SSSC Code of Conduct.					
Worst Case Consequences	 Failure to deliver services, in more staff employed than red no clear plan to achieve savi Industrial relations / staff sati 	quired and / or staff with the ngs that impact on staff; ar		ance and emplo	oyee relations.		
Controls / Mitigation	 Workforce Strategy agreed by Members, and monitoring of implementation by Human Resources; Workforce Planning Framework in place and being implemented across Services; Workforce Plans being developed across all Services and Council wide plan drafted. Workforce Plans are an integral part of Strategic Planning, including Service Planning / Budgets; HR support Services in developing and reviewing their workforce plans; Trades' Union are pro-actively involved in change, including consultation on terms and conditions and workforce issues; Managers receive the information and support needed to manage performance, e.g. absence; Employee engagement is undertaken and acted upon, e.g. staff satisfaction survey / Action Plans; HR and Organisation Development Policies are effective and consistently implemented; and A range of training and development opportunities are available to improve skills / performance. 						
How do we monitor that controls are working effectively?	 Absence and turnover report Consistency of approach to v HR Policy and Procedure Au Employee Satisfaction result Workforce Planning reviews, Best practice reviews includi Oversight of HR risks by staf 	 Absence and turnover reports submitted to Joint Consultative Committee; Consistency of approach to workforce planning across all Services. HR Policy and Procedure Audits, and Exit Interviews; Employee Satisfaction results are evaluated, and Action Plans are implemented and monitored; Workforce Planning reviews, including critical friend, audit, and peer review; 					
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. Progress the key COTF projects and Service Plan actions outlined below. Improve areas identified in Policy and Procedures reviews, e.g. exit interviews. Review the current JCC framework and Implement new partnership arrangements/framework to improve employee and industrial relations.						
Lessons Learnt	Research of best practice under	rtaken to develop the work	force strategy and the workforce p	lanning framew	ork.		
Latest Note / Review Date	for relevant areas of the 5 year l managed in line with the Counc and is part of a refreshed OD pl Discussions with Trade Unions the Future change programme. Absence: CMT has considered which are being progressed incl also being prepared to address	business plan. This will ensitis ils Transformation program an. are progressing on a workf a report and agreed a num luding procurement of a nu the results of the wellbeing nce continue to be discuss	with specific workforce project plasure workforce changes are plann ime. Succession planning is inhered and the second se	ed and erent in this ous Council of e management eing strategy is nd wellbeing of	23 Jul 2019		

	Governance Groups (where relevant) - Self-Assessment
Objectives	 The role of the Corporate Partnership Forum is: To provide a method for consultation to take place at a corporate level between the Council and its employees. To provide a mechanism for Council wide staffing issues and concerns to be raised and discussed; difficulties explored and resolved and for shared routes forward to be agreed. To ensure proposals focus on the Council's vision of being an innovative, responsive, trusted and ambitious organisation. Further details are provided within the Partnership Agreement, approved by Council in June 2018.
Self-Assessment / Actions	a) how well the Group monitor all aspects of the strategy / policy(s) Assurance Level: Substantial Status / Progress: Counterly meetings in place. All workforce and health & safety policies which are submitted to the Executive, are considered by this group prior to submission. Group also has the ability to raise issues at the meetings, to ensure any risks are addressed. Minutes of the groups are kept and actions flowing from the meetings are followed up at the following meeting to ensure they are complete. Where it is considered appropriate, Trade Unions can escalate matters to the Triparitie, which meets quarterly. Additional Actions: None at this stage. b) how well the strategy / policy(s) is embedded at a Corporate level? Assurance Level: Substantial Status / Progress: This group is led corporately, and actions which flow from this are submitted to the Executive and/or taken back to Directors/other appropriate officers to ensure issues and risks are addressed. Additional Actions: None at this stage. c) how well the strategy / policy(s) is embedded at a Service level? Assurance Level: Limited Status / Progress: Services do implement corporate policies and agreements. They also respond constructively to issues and risks raised by the CPF. Additional Actions: There is a requirement for Services to further engage with members of the CPF at a service based level, to ensure fisk/issues are identified locally and addressed without the need for them to be raised through the CPF. d) how well the strategy / policy(s) is embedded at a Project / Partnership / Supplier level? Assurance Level: Limited Status / Progress: There is and engagement with members of the CPF through COTF projects. There is also involvement of members of the CPF in COTF engagement activities. In moving to the partnership approach, work is being done to ensure more local engagement and facilitate more informal resolution at an early stage. Additional Actions: Work is being done to ensure members of the CPF are involved in wo
Assurance Level / Date	Substantial Assurance 01-May-2019

Risk Ref.	Risk Title			Current Risk	Target Risk / Date		
COR_CHS_04	Insufficient fundi						
Ownership / Monitoring	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	High	Medium		
	Chief Finance Officer		Leader of the Council				
Risk Statement	 these, mean that the Council is The key funding uncertainties a Funding – including Local Ge Reserves: the ongoing use c Demographics: in particular, Council of the Future Progra The following corporate risks need 	Demographics: in particular, challenges on Pupil Teacher Ratios, Adult Services, and Welfare; and					
Worst Case Consequences	service failure, resulting in inthreat to lives and significant	 service failure, resulting in inability to deliver statutory services; threat to lives and significant negative impact on the wellbeing of citizens if services not delivered; Statutory breaches, leading to Public Enquiry and / or legal action; and external intervention in the running of the 					
Controls / Mitigation	 robust and inclusive budget ongoing budget monitoring b gathering and considering no aligning budgeting to strateg Members have agreed a pro Improved budgeting, e.g. zei 	 robust and inclusive budget preparation process (e.g. Member Budget Working Group and EPIAs); ongoing budget monitoring by managers, and expert advice from Service Accountants; gathering and considering network intelligence via, eg COSLA, CIPFA Directors of Finance Group; aligning budgeting to strategic planning, COTF program, and strategies e.g. workforce and technology; 					
How do we monitor that controls are working effectively?	 Statutory Section 95 Officer review role; Oversight and scrutiny by CMT, Audit Committee, Executive, and Council; External Audit of the Council's Financial Statements, and Best Value reviews; Internal Audit of processes and controls; Member Budget Working Group; and Oversight by partnership Boards, including Falkirk Community Trust and the Integration Joint Board. 						
What more can we do to reduce the risk?							
Lessons Learnt	Best Value reports highlight the need for leadership, medium and long-term financial planning, appropriate use of reserves, strategic planning, and change management. The Council have also learnt from budgeting best practice externally, e.g. zero based budgeting.						
Latest Note / Review Date			7 February 19. Member Budget Wans approved by Members in May		05 Aug 2019		

Development Services

Risk Ref.	Risk Title				Target Risk / Date		
COR_DS_05a	Re						
Ownership / Monitoring	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	High	Medium		
g	Director of Development Services		Public Protection				
Risk Statement	Effective Business Continuity Management (BCM) protects services, reputation, finances and people, and contributes to compliance with the Civil Contingencies Act (CCA), 2004. If business continuity arrangements are not effective, it could result in loss of people (due to e.g. pandemic flu); Council assets (due to e.g. severe weather or fire); and key suppliers or data (due to e.g. supplier closure and barriers to sharing information).						
Worst Case Consequences	 harm (death / injury) to people; damage to the economy (which could e.g. increase poverty / demand for Council Services); failure to deliver service plans; increased costs of operating (e.g. overtime, contractors & temporary premises); and using inexperienced staff to maintain delivery of core services could be less efficient, reduce quality of service, and increase complaints and non-compliance with CCA legislation. 						
Controls / Mitigation	 Business Continuity Management (BCM) Strategy is in place, supported by Business Continuity Plan (BCP) Templates and Guidance. BCPs 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 & asset maintenance & 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. A senior manager on call rota has been established for all Directors and Heads of Service to support Resilience Officers at the time of a major incident. 						
How do we monitor that controls are working effectively?	t BCPs should be reviewed by SMTs, and Emergency Planning Team will co-ordinate exercises (at least annually).						
What more can we do to reduce the risk?	 Service business continuity plans / continuity arrangements to be reviewed and tested, and Services to provide Annual debrief reports to CRMG following each exercise debrief (Original Date: Jan-2019 - extended to September 2019) Children's Services BC Exercise – Complete 2019. Kirsty Wilsdon preparing report for CRMG. Presentations to schools programmed for Resilience Planning. Adult Services BC Exercise planned for 23/10/19. NHS staff will be included in the Exercise. Development Services BC Exercise planned for 11/10/19. Corporate and Housing BC Exercise – Planned for November 2019 - TBC. Falkirk Council continues to plan corporately in preparation for Severe Weather events and attend the multi agency group to discuss and implement a plan for the M80. FC submitted comments to draft plan led by Police Scotland. 						
Lessons Learnt	Each service to identify and share lessons from their annual debrief events. Lessons learnt from local and national events is embedded within the RRP and Service's Business Continuity planning and exercising activities.						
Latest Note / Review Date	This risk was increased to high around May 2019 because most Services are still to complete their BC Reviews and Exercises, and then provide a lessons learnt report to CRMG.						

Risk Ref.		Current Risk	Target Risk / Date				
COR_DS_01	Und						
Ownership /	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	High	Low		
Monitoring	Director of Development Services		Public Protection				
Risk Statement							
 EU citizens employed by the Council (in particular, teaching and care staff, where there are already resource pressures). There is also some risk of changes to legislation, but this is considered low at this stage because most EU regulated within UK / Scottish Law. There are also a range of potential impacts on communities e.g. medical and business supplies. 							
Worst Case Consequences	 There is an interruption to essential supplies – including medical, food, and fuel supplies. This could harm vulnerable people, the community, and the local economy. Resources are further stretched / diverted from Corporate priorities; and Failure to deliver Best Value services and make well-informed decisions. 						
Controls / Mitigation	 Falkirk Council is engaging with COSLA and other agencies re the impact of Brexit nationally. Resilience: risks are being addressed by the Regional Resilience Partnership (RRP) and Scottish Government. Plans are being developed at a national level and customised locally. This includes plans to deal with potential issues with Health / Medical Supplies, Community Order, Food / Fuel Supplies, and Port Customs. 						
How do we monitor that controls are working effectively?	 Resilience: Well developed processes (and experiences) of consultation and resilience plan testing. High level of attention being given to this risk nationally, regionally and locally. Council participating in workstreams at every level. 						
What more can we do to reduce the risk?	 EU Workers: HR: are working with Services to identify and support all affected employees, e.g. with citizenship applications. Services have been asked to help ensure that this work is progressed. Resilience: The Scottish Government has produced a range of national guidance for specific sectors, and relevant sections (e.g. health) will be adapted locally in consultation with resilience partners. Resilience Planning updates will be provided to Members via the Information Bulletin, as necessary. All Services should continuously review the risks, develop mitigation / plans, and provide updates to CMT as necessary. Corporate response and reporting arrangements now in place. 						
Lessons Learnt	Drawn from other events with elements of similar outcomes.						
Latest Note / Review Date	 Brexit risks remain very fluid. SG updated their planning assumptions in Aug 2019, but these show little changes to previous versions. More information is needed from Scottish Government, especially in relation to Health & Social Care risks and recovery aspects of a no-deal (e.g. impact on economy and community). The likelihood of a no deal scenario and a general election at short notice have increased. Resilience plans are in place, but there is an increased risk in winter of a greater shortage of food storage capacity and multiple events e.g. pandemic flu and severe weather. NHS & Council Resilience Officers to follow up on IJB risks. Social Care BCP is a priority, e.g. clinical consumables. Business Continuity reviews are planned with all Services, but progress has been limited / delayed across a number of Services. Positive feedback received from External Audit re our planning v similar reviews of other Councils. The Director Of Development Services will provide updates to the Portfolio Holder (Resilience) and Members, as appropriate. 						

Risk Ref.		Current Risk	Target Risk / Date				
COR_DS_02	Sustainability / Climate Change						
Ownership /	Lead Officer	Governance Group (if Relevant)	Portfolio Holder	High	Medium		
Monitoring	Head of Design, Roads, and Transport	Corporate Sustainability Group	Environment				
Risk Statement	 The Scottish Government have declared a Climate Emergency and committed to "Net Zero" greenhouse gases by 2045. They require the Council to meet ambitious Carbon Reduction Targets in order to meet national targets. There is a risk that the Council fails to set sufficiently ambitious Carbon Reduction Targets, or deliver on those. The risks will be further detailed within a Climate Change and Adaptation Risk Register. CONTEXT: The Council has a statutory duty to reduce emissions from its activities, and to provide leadership in reducing emissions in our area amongst both communities and businesses. The regulatory environment is being strengthened by the Scottish Government, and this will include penalties and enforcement. These are long term targets but the Council need to start early and commit to sustained changes. According to the IPCC, global CO2 emissions will need to start declining well before 2030 to avoid an overshoot of global warming beyond 1.5 °C. In their latest report (Oct 2018), the IPCC warned that there is only 11 years to act for global warming to be kept to a maximum of 1.5 °C. 						
Worst Case Consequences	 Climate Change is happening and consequences are being felt worldwide. In Scotland, more frequent severe weather events, drought, biodiversity loss are being experienced. Absence of rapid emissions reduction increases the risk of global warming and its consequences. The latest UK Climate Projections (2018) predict hotter and drier summers, milder and wetter winters, more likely and more severe coastal flooding & flash flooding, as well as sea level rise (up to 0.9 m in Edinburgh) if no action is being taken to reduce greenhouse gases. The Council area includes vulnerable sites where flooding and severe weather events could harm citizen's welfare and their property. Breach of climate change duties could result in reputational damage, legal action, penalties, and project delays / funding gaps. Failure to adapt our organisation to a changing environment could result in great expense retrofitting building etc to meet climate impacts or achieving targets in quicker timelines. Failure to plan for and embed adaptive measures now could impact the viability of service delivery to residents and failure to meet organisational requirements. 						
Controls / Mitigation	Services have implemented a wide range of strategies and projects to mitigate climate change – these are set out within the Climate Change and Adaptation Risk Register. The Council have implemented a clear governance structure for monitoring and reporting progress, lead by the Corporate Sustainability Working Group (and aligned with the SOLD, Strategic Plan, and COTF Program). Sustainability should be an integral part of the SOLD and Service Business Plans and decision making.						
How do we monitor that controls are working effectively?	The Council conducts an annual Climate Change Self-Assessment and has a statutory duty to produce an Annual Climate Change Declaration (setting out our ambitions and progress). This is reviewed by Internal Audit before being published on the Sustainable Scotland Network (SSN) website. Governance Groups have oversight of sustainability implications in their area – including asset management, Resilience, Community Planning, and the Council of the Future Program Board. Climate Change Adaptation and Sustainability should also be an integral part of Service Business Plan & Performance Reviews.						
What more can we do to reduce the risk?	The Climate Change and Adaptation Risk Register makes a clear link to key projects and plans. In addition to reducing the risks, it is essential that the Council invests in adapting to the consequences of climate change.						
Lessons Learnt	There is recent experience of organisations' Climate Change Declarations being scrutinised more closely by the Scottish Government, and more evidence being sought to support those declarations. A growing number of Local Authorities (to date, one third) are declaring a "Climate Emergency" accompanied by ambitious commitments.						

	Also, some organisations have been denied funding for projects where they cannot demonstrate that the innovative and offer sufficient sustainability benefits (or because the work should be funded through rou capital spend).				
Latest Note / Review Date	Members It is anticipated that a more detailed report will be presented to Members seeking their				
	Governance Groups (where relevant) - Self-Assessment				
Objectives1. Develop and monitor the implementation of corporate sustainability policies and targets related to, for example: waste reduction; energy efficiency; climate change adaptation; recycling; climate change action; 2. Share best practice amongst Services; and 3. Monitor emerging sustainability and climate change issues; and develop strategies and plans to meet duties.					
Self-Assessment / Actions	Group This will inform the Climate Change Declaration. As noted above, further work is being undertaken to assess risks				
Assurance Level / Date	Substantial Assurance	August 2019			

Table 3: Risk Scoring Guidance

Risk Level	Risk Appetite / Approach	Scoring Matrix
High (Score 10-25)	 High Risks may be either: within the Council's risk appetite (meaning that the Lead Officer considers the current controls are proportionate and effective; or above the Council's risk appetite (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) 	ъ
Medium (Score 7-9)	Medium risks are within Council's risk tolerance - meaning, controls / mitigation are proportionate and effective (actions are not essential, but may included in the Corporate Risk Register).	Likelihoo
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.	Impact

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	None or little budget impact; spend is within risk owner's authority	None, or little, media interest; impact is in public domain, but managed	None or very minor injury and / or damage	None or little disruption to one service, or project delay	No or little query from audit body / regulator; but no criticism or action required	
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 and / 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; and may result in criticism 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 / has occur, 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	

Table 4: Risk Register Key

Lead Service		Governance Groups		Review Status	
AS	Adult Services	CPRWG	Capital Planning and Review Working Group	0	Green: The risk has been reviewed within the last 4 months (120 days)
CE	Chief Executive	CJ PB	Criminal Justice Change Programme Board	*	Red: The risk has not been reviewed within the last 4 months (120 days)
CS	Children's Services	CPSB & PG	Community Planning Strategic Board and Participation Group		
CHS	Corporate & Housing Services	CAMG	Corporate Asset Management Group		
DS	Development Services	CSG	Corporate Sustainability Group		
		CRMG	Corporate Risk Management Group		
		COTFB	Council of the Future Board		
	Portfolio Holders	EoS RRP	East of Scotland Regional Resilience Partnership		Action Status
CLT	Culture, Leisure, and Tourism	FFP	Fairer Falkirk Partnership	0	Green: The action is complete
ED	Economic Development	ICSG	Integrity / CONTEST Steering Group		Green: Expected to meet current timescale
EDU	Education	IMWG	Information Management Working Group	\bigtriangleup	Amber: The action is slightly behind target
ENV	Environment	PMG	Performance Management Group		Red: The action is significantly behind target (not expected to meet current timescale)
HSC	Health and Social Care	РВ	Procurement Board		
HOU	Housing	PPCJ COSG	Public Protection and Community Justice Chief Officers' Strategy Group		
LEA	Leader of the Council	SWG	Safety at Work Group		
PP	Public Protection	SHG	Strategic Housing Group		
RES	Resources	SWIS PB	Social Work Information System Programme Board		