Subject: Annual Report on Risk Management Arrangements 2019/2020

Report to: Audit and Risk Committee, September 2020

Report by: Kaye Bate, Corporate Risk Officer



### **SUBJECT MATTER/RECOMMENDATIONS**

This report provides details of the key risk management developments during 2019/2020 for the committees' review.

This report will provide a significant source of evidence to enable the Committee to approve the Annual Governance Statement.

**Recommendation** - The Committee is requested to note and approve the annual report on the Council's risk management arrangements.

## 1. INTRODUCTION/BACKGROUND

- 1.1 The purpose of this report is to provide an annual report of key risk management developments across the Council over the last 12 months for the committees' review.
- 1.2 The Chief Executive has strategic responsibility for risk management, supported by the Executive Leadership Team who act as the Council's strategic risk management group.
- 1.3 Heads of Service direct the risk management process in their service areas.

### 2. ANNUAL RISK MANAGEMENT REPORT

- 2.1 This report will provide a significant source of evidence to enable the Committee to approve the Council's Annual Governance Statement.
- 2.2 The report will also help to inform the Committee's view of the adequacy of the Council's risk management arrangements and as such allow it to fulfill its responsibility outlined in its terms of reference.

#### 3. FINANCIAL IMPLICATIONS

3.1 None.

#### 4. RISK IMPLICATIONS

4.1 See attached report.

### 5. **CONCLUSIONS**

- 5.1 Over the last year the Corporate Risk Officer and the Executive Leadership Team has undertaken further steps towards establishing the Risk Management Framework which together with the culture ensures effective and consistent risk management is an integral part of the authority's activities.
- 5.2 Fundamental to the successful implementation of risk management is an adherence to the principles as set out within the framework. At the time of writing, there are no significant non-compliance issues to report with regards to corporate risk management.

| Area for consideration                         | Comment             |
|--|---------------------|
| Monitoring Officer Consultation                | No                  |
| Section 151 Officer Consultation               | No                  |
| Existing Council Policies                      | No                  |
| Financial Implications within existing budgets | No                  |
| Legal Implications (including human rights)    | No                  |
| Risk Implications                              | See attached report |
| Equality Issues/EQIA assessment                | No                  |
| Details contained in strategy                  |                     |
| Crime & Disorder                               | No                  |
| Every Child Matters                            | No                  |

### Annual Report on Risk Management Arrangements 2019 / 2020

#### **Executive Summary**

Over the last year the Council has continued to improve and embed its risk management arrangements.

This report provides details of the key risk management developments during 2019/2020 for the committees' review.

This report will provide a significant source of evidence to enable the Committee to approve the Annual Governance Statement.

### 1. Purpose of the report

The purpose of this report is to provide an annual report of key risk management developments across the Council over the last 12 months. This provides the Committee with a significant source of evidence to approve the Council's Annual Governance Statement.

The report will also help to inform the Committee's view of the adequacy of the Council's risk management arrangements and as such allow it to fulfill its responsibility outlined in its terms of reference.

### 2. Background

The Chief Executive has strategic responsibility for risk management, supported by the Executive Leadership Team who act as the Council's strategic risk management group.

Heads of Service direct the risk management process in their service areas.

Over the last year the Corporate Risk Officer and the Executive Leadership Team has undertaken further steps towards establishing the Risk Management Framework, which together with the culture ensures effective and consistent risk management is an integral part of the authority's activities.

#### 3. Main Issues

Fundamental to the successful implementation of risk management is an adherence to the principles as set out within the framework. At the time of writing, there are no significant non-compliance issues to report with regards to corporate risk management.

The steps taken to embed risk management across the Council are described below.

### a. Risk Management Framework

The Risk Management Framework is published on the Councils website, under Your Council / Council Policies, Strategies and Plans / Policies and Strategies. The Risk Management Framework was last reviewed in January 2020.

The framework is reviewed every three years (or more frequently if required by changes to statutory legislation) and relevant parties consulted before submitting to the Audit and Risk Committee. The Risk Management Framework was last approved by the Audit and Risk Committee in March 2020.

On an annual basis details of responsible officers will be reviewed to ensure that they remain relevant and up to date

### b. Corporate Risk Register

The Corporate Risk Register, maintained by the Corporate Risk Officer, is now well-established and captures risks identified by Executive Leadership Team. The Corporate Risk Register is required to be reviewed by Executive Leadership Team on a quarterly basis and was last reviewed in January 2020. During the year new risks have been identified and included on the register and risk have been removed as they are no longer required to be included and / or they are considered to be a service risk. The layout of the Corporate Risk Register was reviewed during the year at the request of Executive Leadership Team.

The corporate risk register reflects those key business risks that are required to be managed at a corporate level. There are currently 22 risks on the corporate risk register.

Risk score is calculated by multiplying the likelihood by the impact. The current position of the risk register is shown on the matrix below.

The responsible officer for each risk is identified and any action required to reduce the risk to the corporate appetite has a completion date.

Risks are scored based on the criteria below:

### Likelihood:

|   | Likelihood    | Description  | Probability  | Timing                             |
|---|---------------|--|--------------|------------------------------------|
| 5 | Very Likely   | The event is expected to occur or has occurred and is continuing to impact | Over 90%     | More than once per year            |
| 4 | Likely        | The event will probably occur in most circumstances                        | 56 % to 90 % | Once per year                      |
| 3 | Fairly Likely | The event could occur at some time   | 16 % to 55 % | At least once between 1 – 5 years  |
| 2 | Unlikely      | Not expected but the event may occur at sometime                           | 5 % to 15 %  | At least once between 5 – 10 years |
| 1 | Very Unlikely | The event may occur only in exceptional circumstances                      | Less than5 % | Probably within 10–15 years        |

Where the probability and timing score differently, a judgement should be made as to the correct likelihood score.

## **Impact**

| Impact Type              | 1<br>Negligible   | 2<br>Minor   | 3<br>Moderate   | 4<br>Significant  | 5<br>Severe   |
|--------------------------|---|--|---|---|---|
| Financial<br>(loss)      | £0k – <£10k   | £10k – <£50k   | £50k - <£250k   | £250k – £1m   | Over £1m  |
| Service<br>Provision     | No effect   | Minimal disruption to<br>the whole<br>organisation / service   | Significant<br>disruption of one<br>part of the<br>organisation   | Significant<br>disruption to<br>large parts of<br>the organisation<br>or Suspended<br>Short Term                                  | Service suspended<br>long term or<br>statutory duties not<br>delivered  |
| Projects                 | Minor Delay –<br>days   | A few Milestones<br>missed   | Significant<br>milestones missed /<br>delayed   | A Major<br>Milestone<br>missed  | Project does not<br>achieve objectives<br>and misses majority<br>of Milestones  |
| Health &<br>Safety       | One Injury or<br>illness requiring<br>First Aid<br>Treatment<br>No lost time injury<br>days                 | Injury or illness<br>requiring medical<br>treatment<br>Lost time injury <10<br>days                                | Serious injury or<br>illness<br>Lost time injury >10<br>days  | Significant /<br>extensive injury<br>or illness<br>Permanent or<br>partial disability   | Multiple Loss of Life /<br>Large scale major<br>illness<br>Permanent Total<br>Disability  |
| Objectives               | No effect   | Some Team<br>Objectives not met  | Team objectives not met   | Portfolio<br>Objectives not<br>met  | Corporate Objectives not met  |
| Morale                   | No effect   | Some hostile<br>relationships and<br>minor non-<br>cooperation   | Hostile relationships and major non- cooperation across the organisation  | Industrial Action   | Mass Staff leaving /<br>unable to attract staff   |
| Reputation               | No media<br>attention / minor<br>letters  | Adverse local media<br>Leader  | One off national<br>media exposure  | Prolonged<br>Adverse<br>National<br>exposure  | Extensive coverage in<br>National Press and on<br>TV. Requires<br>resignation of Senior<br>Officer / Member   |
| Government<br>Objectives | No effect   | Poor Assessments(s)  | Service taken over temporarily  | Service taken over temporarily  | Service taken over permanently  |
| Statutory /<br>Legal     | No impact /<br>breech   | Warning received   | Breech<br>Challenging<br>Improvement<br>Notice  | Enforcement<br>Action<br>Improvement<br>Notice  | Prosecution<br>Fine   |
| Community<br>Risk        | Insignificant impact to health, persons displaced disruption to community services, economy and environment | Minor impact to<br>health, persons<br>displaced disruption<br>to community<br>services, economy<br>and environment | Damage to specific location or number of locations, fatalities and some causalities, displacement of > 100 people for 1 – 3 days, Limited impact on economy and environment | Significant damage, 100 to 500 people displaced for longer than 1- week, significant impact on community services and environment | Significant of fatalities and injuries, extensive damage to property, displacement of >500 people for prolonged duration, serious damage to infrastructure, serious long-term impact on environment |

Identify the impact most relevant to the risk being evaluated (it is not necessary for all points in each category to apply.

## Risk Matrix

## IMPACT OF RISK

|            |   |               | 1             | 2             | 3             | 4               | 5               |
|------------|---|---------------|---------------|---------------|---------------|-----------------|-----------------|
|            |   |               | Negligible    | Minor         | Moderate      | Significant     | Severe          |
|            | 5 | Very Likely   | Medium<br>5   | High<br>10    | High<br>15    | Very High<br>20 | Very High<br>25 |
| OF RISK    | 4 | Likely        | Very Low<br>4 | Medium<br>8   | High<br>12    | High<br>16      | Very High<br>20 |
|            | 3 | Fairly Likely | Very Low<br>3 | Medium<br>6   | Medium<br>9   | High<br>12      | High<br>15      |
| LIKELIHOOD | 2 | Unlikely      | Very Low<br>2 | Very Low<br>4 | Medium<br>6   | Medium<br>8     | High<br>10      |
|            | 1 | Very Unlikely | Very Low<br>1 | Very Low<br>2 | Very Low<br>3 | Very Low<br>4   | Medium<br>5     |

### Risk Rating Actions:

| Very High<br>20 - 25 | Risk outside risk appetite. Action required to reduce rating to an acceptable level   |
|----------------------|---|
| High<br>10 - 16      | Risk outside risk appetite. Action required to maintain or reduce rating.   |
| Medium<br>5 - 9      | Acceptable with some mitigating and contingency planning. Routine reviews should be carried out to ensure there is no change which makes them more severe |
| Very Low<br>1 - 4    | Within risk appetite but kept under review. No further action required unless risk become more severe   |

The risk matrix below shows how the risks identified in the Corporate Risk Register are distributed. There are currently 22 risks included on the Corporate Risk Register. The risks considered to be outside the Councils risk appetite have action plans in place to mitigate or reduce the risk. The risks that fall within the risk appetite or acceptable have action plans in place to reduce the risk further.

### **RISK MATRIX**

| 5 |   |                           | 10b Business Continuity –<br>Brexit – Short and longer<br>term impact of a failure to<br>conclude a post Brexit EU<br>trade deal  | 1 – Reduction in financial<br>resources<br>2 – Reduced spending in Great<br>Yarmouth<br>20 – Tree and Land<br>Management  |  |
|---|---|---------------------------|---|---|--|
| 4 |   | 19 – Change<br>Management | 18b – Sufficient resources<br>and resilience to ensure<br>effective contract<br>management  | 5 - Local/National Economy 6b - GDPR impact on Payment Card Industry data security standards PCIDSS 8b - Cyber Security 9 - Event Management - for large scale events held in the Borough by a third party 22 - IT systems capability and interaction   | 3 - Flooding<br>4 — Flood defence<br>and coastal<br>protection |
| 3 |   |                           | 6a – Compliance with General Data Protection Regulations (GDPR) 7 - Information Security 11 – Management of Major Projects 16 - Infrastructure not being able to meet demand 17 - No 5-year Housing Land Supply and timescale Local Plan can be delivered 18a – Sufficient resources and resilience to ensure effective procurement | 8a - Data quality 10a - Business Continuity 12 - Reliance on key individuals and capacity of teams 13 - Unforeseen changes Government policies 14 - Delivery of long term strategic objectives 17 - Business improvement in the major leisure facilities under delivers 21 - Loss of Reputation |  |
| 2 |   |                           |   | 15 - Lack of community cohesion / community tensions  |  |
| 1 |   |                           |   |   |  |
|   | 1 | 2                         | 3   | 4   | 5  |

Impact

## b. Member Involvement

The Corporate Risk Register is presented to the Audit and Risk Committee on a half yearly basis following the review by the Executive Leadership Team. The Corporate Risk Register was last reviewed on March 2020.

## c. Department / Service Risks

The roles and responsibilities of Directors and Heads of Service include the following:

Risk is an agenda item on all directorate meetings to identify any emerging risk and changes.

Key risks to service objectives, project, partnership and change management processes under their control are identified, recorded and managed.

Managers carry out risk assessments as a routine part of service planning and management activities.

Director of Finance is notified of any significant changes in service provision likely to arise if a risk materialises to enable him/her to ensure that appropriate and adequate insurance and financing measures are in place.

Those risks having a corporate impact are reported for consideration for inclusion in Corporate Risk Register.

### d. Corporate Risk Group

A Corporate Risk Group was created in October 2016. The purpose of the Group is an advisory group to provide a focus to the Councils overall approach to risk management. The group meet on a quarterly basis although a meeting can be called by any group members at any time.

The Group consists of Officers from services whose work has a direct bearing upon the Council's corporate risk and the required outcomes are:

- To provide an officer coordinating group with an overview of corporate risk
- To provide a review mechanism for Council activities that contribute to corporate risk
- To ensure that the Council have a suitable Risk Management Framework to address, mitigate and manage existing and emerging risks at all organisational levels and within projects and partnerships
- To ensure suitable process is in place to escalate risk into the Corporate Risk Register from service level (e.g. service, project and partnership registers) and equally to move risks down from the Corporate Risk Register
- To make recommendations and to report back to ELT as required
- To raise awareness of risk management issues throughout the Council and with external partners and to encourage members, employees and partners to manage risks effectively.
- To promote good risk management and ensure effective governance arrangements in all service areas.
- To regularly review the Corporate Risk Register and Partnership Register.

### e. Partnerships

The Council are involved in a number of partnerships, forums and groups in order to assist with the delivery of community strategies and in helping to promote the well-being of the area.

A Partnership Group has been created with a small number of public sector partners. The purpose of the group is to identify gaps in delivery or opportunities to deliver better outcomes through working together more effectively and provide guidance on the governance arrangements that should be in place for specific partnerships.

In recognition of the need to ensure that all partnerships continue to perform well, deliver value for money and support the council's strategic objectives a Partnership Governance Framework was written and approved by Executive Leadership Team and the Audit and Risk Committee in December 2018. The framework defines and standardises the councils' approach to managing partnerships, in order to strengthen accountability and manage risk.

The framework will be reviewed at least every 3 years, by the Corporate Risk Officer (or more frequently if fundamental changes are required). On an annual basis details of responsible officers will be reviewed to ensure that they remain relevant and up to date.

Great Yarmouth Borough Council has adopted the Audit Commission definition of partnership which is:

'an agreement between two or more independent bodies to work collectively to achieve an objective'

The framework provides guidance to officers on:

- What partnership working is
- How to enter into a new partnership
- How to set up a new partnership
- How to maintain appropriate governance arrangements in existing partnerships
- How to exit from a partnership

## The framework does not cover:

- Procurements (unless they are delivering major services in a strategic arrangements)
- Informal discussion / consultation groups
- Short term arrangements

In support of the Partnership Governance Framework a Partnership Register is maintained.

The partnership register main functions are:

- To provide an overview of the partnerships that the Council has and how these link to the council's Strategic, Corporate / Contractual and Operational objectives
- To provide a framework to allow a robust challenge and scrutiny of the partnerships and membership of outside bodies to take place
- To identify any group relationship (for accounting purposes) and/or any governance issues for exception reporting.

It is intended that partnerships will be managed at the service level but with an overview and challenge at corporate leadership level.

The Partnership Register is maintained by the Corporate Risk Officer and is reviewed by Executive Management Team on a quarterly basis. There are currently 47 partnerships on the register that the council are involved in or lead on.

The Partnership Register will be presented to the Audit and Risk Committee on a half yearly basis following the review by Executive Management Team.

At the time of writing we are not aware of any significant non-compliance issues to report with regards to partnership management however work is required to strengthen some of the controls / governance arrangements within some partnerships.

A further review of the Partnership Governance Framework and Partnership Register was undertaken during the year at the request of Executive Leadership Team. Once approved ffurther work will be undertaken to raise the profile to ensure compliance with Partnership Governance Framework and so all applicable governance and risk management arrangements are applied and consistently used across the organisation.

#### f. Health and Safety

The Corporate Health and Safety Group is a sub group of the Executive Leadership Team (ELT) reporting to the Corporate Management Board via ELT. Corporate Health and Safety Advice is carried out by an Environmental Health Officer two days a week with additional support bought in from Norfolk County Council.

### Risk Priorities 2020/2021

A work plan has been developed and the risk priorities for this year have been identified following a review of incident statistics, organisational activities, internal health and safety policies and a review of service risk assessments.

The health and safety priorities for action have been identified as: -

- Monitoring health and wellbeing performance and implementing actions to improve performance in this area. This piece of work has been carried forward from last year due to a lack of available resource to facilitate this project in the HR department.
- Lone Worker device re-procurement. This was postponed for a year due the Corporate Health and Safety Officer role being vacant for several months
- Simplifying the incident and warning marker procedure. Anecdotal evidence suggests some incidents are not being reported as the current incident reporting procedure is complex and time consuming
- Work at height and confined spaces. These are potentially high-risk activities carried out in Council Buildings
- Review of PPE procurement to ensure uniformity across the council

The Corporate Health and Safety Group meet quarterly and monitor progress with these priorities.

#### Planned Work for 2020

The Corporate Health and Safety Advisor has identified some key actions for 2020/21. Due to significant other pieces of work carried out in 2019/20 and the post being vacant for a number of months, several key pieces of work identified as a priority last year have been carried over to this year. These include auditing the following areas:

- Crematorium
- Norse waste management (ensuring that the risk to members of the public in relation to vehicle movements are managed effectively)

Audits will also take place looking at:

- Work at Height in and Confined Spaces
- The Waterways, to ensure identified actions from the previous audit have been completed.

The COVID-19 impact has had an impact on the delivery of some of the programmed work for 2019/20.

The work plan for 2020/21 has also identified that the following policies need to be reviewed and implemented:

- Work Equipment
- Manual Handling
- Fire and Evacuation

Work will also need to be undertaken to rebrand existing policies with the new Council logo.

## **Warner Marker System**

As from the 1 February 2020 the warning marker system is now managed by Environmental Services. A review of the way the system is currently operated is being undertaken, alongside a review of the incident reporting procedure.

### Work Completed 2019/20

Work completed includes the following:

### Monitoring

The following internal health and safety audits have been completed:

- Panic alarms
- Waterways and Boating Lake

### New and/or revised policies introduced

The following policies were reviewed and/or introduced:

- New and Expectant Mothers
- Young Persons
- First Aid at Work
- Body Worn Cameras
- Personal Protective Equipment

#### **Guidance and Information.**

The Mangers safety bulletin continues to be produced monthly to support managers in carrying out the monthly management cycle checks.

### **Health and Safety Co-ordinators**

The Health and Safety Coordinators role is continuing, and they support the managers in carrying out the health and safety tasks in the monthly management cycle. Training is carried out with the co-ordinators on a quarterly basis

### **Body Cameras**

Body-worn video cameras have been provided to a number of identified front line officers, these are intended to act as a deterrent towards acts of aggression towards GYBC staff. There are several benefits associated with the use of body worn video cameras such making staff feel more secure and safe whilst undertaking their duties and they can provide admissible evidence helping to identify and bring to account perpetrators and witnesses of an incident that has taken place.

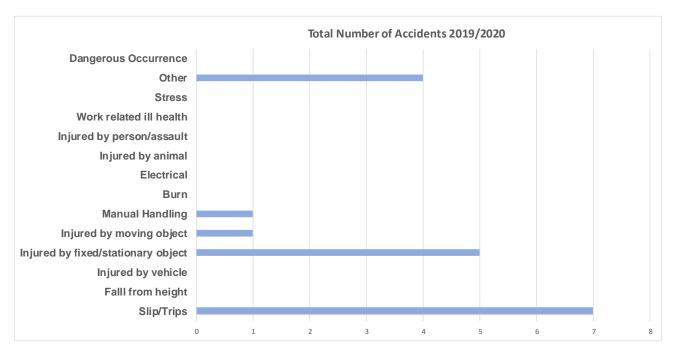
The Borough Council of Kings Lynn and West Norfolk provide us with a hosted and managed service. This includes the provision of devices, hardware, software, licencing and connectivity to their secure environment, a secure environment where footage will be able to be downloaded daily via a secure isolated VPN network as well as management and control of the data.

### **Skyguard Lone Working System**

The contract for these devices expires in September 2020 and requires re-procurement. Technology has advanced in the last few years and the Council will be trialling a number of alternative lone working solutions.

#### **Accidents and Incidents**

The number of accidents and incidents recorded for 2019/20 are as follows:



- There were 18 accidents which resulted in injury or ill health; this is decrease of 12 on the previous year
- The top two staff accidents reported during 2019 were again slips and trips (7), and hit by moving or stationary object (5)
- There were no RIDDOR reportable incidents during 2019.
- There were no accidents to members of the public although one person had a suspected heart attack in one of our buildings

It is pleasing to note a reduction in the number of incidents to staff and that there were no RIDDOR reportable incidents in the last year.

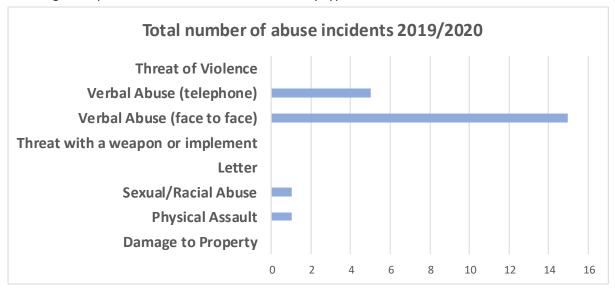
In June 2020 a simplified accident reporting form and procedure will be introduced which will encourage the reporting of near misses as well as accidents. This will also streamline the system which will be linked to the warning marker reporting procedure.

There were 22 incidents of abuse to staff, this is half of the previous year's figure of 44 incidents. Since last year a CCTV system has been implemented in Greyfriars and this year will see the roll out and use of body cameras which it is hoped will reduce face to face incidents of abuse especially to Civil Enforcement Officers.

It is felt that there is still a significant number of incidents that are not reported as staff still see verbal abuse as 'just part of their job'. This type of abuse is not acceptable and further work will be undertaken this year to ensure incidents of abuse are reported and followed up promptly with a warning marker where necessary.

Incidents during last year have been mainly face to face verbal abuse and verbal abuse over the telephone. Unfortunately, there have been some COVID related incidents where members of the public have deliberately coughed at employees. These incidents have been taken seriously and were reported to the police and the individuals banned form Council buildings.

The following chart provides a breakdown of incidents by type:



### **Employee enquiries and complaints**

Corporate Health and Safety have addressed a wide range of employee enquiries and complaints including: Fire, DSE and COVID-19.

#### **Other Work**

The Corporate Health and Safety advisor has been involved with contributing to guidance on Event Safety for the Great Yarmouth Event Safety Advisory Group, developing a SharePoint system for use by the group and new Terms of Reference.

Training was provided and delivered for all staff given body worn cameras and COVID-19 Guidance was provided for employees, volunteers and Councillors.

### g. Risk Management Software

The council does not use any specialised software for monitoring its risks. The Corporate Risk Register is maintained on an excel spreadsheet.

### i. Financial Risk Management

Risk management techniques have continued to form part of annual budget-setting processes. The reserves policy also uses risk to inform the determination of the minimum level of reserves required each year. Risk assessment continues to inform decisions made around Treasury Management.

### j. Project Risk Management

The incorporation of risk management within all projects is now a requirement within the Project Management Office (PMO) which sits within the Inward Investment service. The PMO ensures compliant and effective delivery of all Corporate Projects, managed within PRINCE2 project management principles. The Head of Inward Investment continues to oversee the Project Management Office with corporate projects being led by a Project Manager and Project Sponsor and where applicable external project management support. Recent personnel changes has meant there are some gaps in resourcing, however, the Council is looking to appoint two Senior Project managers to ensure the team continues to drive forward the projects for the Council. The Executive Leadership Team (ELT) continues to provide strategic oversight and Project Sponsors. The eligible document management for projects is now being put into place to mitigate any potential issues with audit.

Alongside that, the Council 'Corporate Project Board' (CPB) continues to operate and meet on a regular basis. The CPB has overarching oversight of the projects and ensures quality delivery against the project, programme and budget. Highlight reports are submitted monthly and include risks and issues which are closely monitored. Additional procedures have been put into place and will be managed by the Project Support Officer alongside the Project Managers to ensure a robust risk approach is taken for each individual project. Project documentation will be stored in a project SharePoint site, alongside a project performance section including risk and issue monitoring and regularly reviewed.

### k. Business Continuity

The Business Continuity function is a managed service supplied by Norfolk County Council who provide a Resilience Officer based in Great Yarmouth. The service agreement was renewed for 12 months from 1st April 2020. Key deliverables:

- External Audit: all outstanding actions following the review of June 2018 have been closed.
- The Resilience Officer worked with the Norfolk Resilience Forum to undertake contingency planning
  for Brexit and ensured that local risks were correctly escalated, and a response process was in place.
   Impact of trade deal negotiations will continue to be monitored.
- The Business Continuity Plan templates were revised and updated which included an impact assessment of critical service delivery. The Emergency Response Plan and the Corporate Business Continuity Plan were also updated
- From early March 2020 the focus has been the response to the COVID 19 pandemic which has involved a fundamental change in operational procedures including remote working - an important business continuity strategy. This work is expected to extend for a prolonged period and include a recovery phase

#### l. Insurance

Insurance arrangements are reviewed on an annual basis to ensure that adequate cover is in place and the Authorities assets protected and changes are made, as required during the insurance year.

Claims are handled promptly. The Risk and Insurance Section will liaise with other departments to gather information required by the insurance company.

The council's insurance programme is placed with five insurers – albeit AIG Europe and HSB Engineering are both via RMP:

AIG Europe HSB Haughton Engineering Travelers Insurance

ACE European Group Zurich Municipal Insurance

By placing the insurance programme with the insurers above we were required to appoint a Broker, Arthur J Gallagher is the appointed broker for the Council.

A dedicated insurance page is available for staff on the council's internal web page, The Loop.

The Councils website provides details of how to make a claim and an online claim form is available to complete.

The insurance contract was extended to 31 March 2021. Work on the insurance tender is due to commence in June 2020, however the current COVID 19 may have an impact on the delivery of this project.

Insurance advice has been provided in connection with the COVID 19 pandemic.

The Corporate Risk Officer is a member of the Events Safety Advisory Group and provides guidance / advice in connection with events held in the borough as well as providing insurance advice on various projects / capital programmes in the borough.

### m. Communication and Training

The Risk Management Framework is available to all staff, the public and other stakeholders and published on the Council's Internet and staff internal web page, The Loop.

A dedicated risk management page is available for staff on the council's internal web page, The Loop.

The Council has recently invested in an e-learning package, for mandatory training, which is available to staff.

An annual reminder is sent to Executive Leadership Team and Head of Service on an annual basis to raise awareness of the Risk Management Framework, its purpose and officer's roles and responsibilities.

Risk Management training was delivered to extended management team in February / March 2020. The COVID 19 lockdown has prevented further training to be scheduled.

### n. Internal and External Audit reports

Internal Audit will review risk during any audit they undertake, and this report will need to be read in conjunction with the Head of Internal Audit Annual Report and Opinion. The recommendations and issues raised will be addressed during the year and progress / implementation reported back to the Internal Auditors.

Internal Audit has four categories by which they classify internal audit assurance over the processes they examine. Detailed below are the reports issued along with the Audit Opinion of the controls in place and the number of recommendations made as a result of their findings:

| Audit Area                                    | Assurance<br>Level | Recommendations |           |                    | s  |
|---|--------------------|-----------------|-----------|--------------------|----|
|   |                    | Urgent          | Important | Needs<br>Attention | Ор |
| GY2001 GYB Services                           | Reasonable         | 0               | 3         | 10                 | 0  |
| GY2002 Accountancy Services                   | Substantial        | 0               | 0         | 0                  | 0  |
| GY2003 Accounts Receivable                    | Reasonable         | 0               | 1         | 7                  | 0  |
| GY2004 Income Review                          | Substantial        | 0               | 0         | 1                  | 0  |
| GY2005 Council Tax and NNDR                   | Reasonable         | 0               | 1         | 1                  | 1  |
| GY2006 GY Norse                               | Reasonable         | 0               | 0         | 10                 | 1  |
| GY2007 S106                                   | Reasonable         | 0               | 6         | 0                  | 1  |
| GY2008 Housing Strategy                       | Reasonable         | 0               | 1         | 4                  | 0  |
| GY2009 Preservation Trust                     | Limited            | 1               | 5         | 5                  | 1  |
| GY2010 Corporate Governance                   | Reasonable         | 0               | 5         | 2                  | 1  |
| GY2011 Housing Benefits & Council Tax Support | Substantial        | 0               | 0         | 1                  | 0  |

| GY2012 Markets                            | Reasonable | 0   | 1   | 2   | 1   |
|---|------------|-----|-----|-----|-----|
| GY2013 Housing Needs and Allocations      | Postponed  | N/A | N/A | N/A | N/A |
| GY2014 Key Controls and Assurance - Draft | Reasonable | 0   | 4   | 5   | 1   |
| GY2015 Equinox                            | Reasonable | 0   | 1   | 5   | 1   |
| GY2016 Corporate Enforcement - Draft      | Reasonable | 0   | 5   | 2   | 1   |
| GY2017 Housing Adaptations - Draft        | Reasonable | 0   | 1   | 1   | 0   |
| GY2018 Data Centre Back up & Recovery     | Reasonable | 0   | 3   | 1   | 0   |
| GY2019 Cyber Security Maturity Assessment | Reasonable | 0   | 2   | 5   | 0   |
| GY2020 Starters, Movers and Leavers Draft | Reasonable | 0   | 3   | 5   | 0   |
| Go Trade Audit – Position Statement       | N/A        | N/A | N/A | N/A | N/A |
| ESF – Position Statement                  | N/A        | N/A | N/A | N/A | N/A |

Of the 19 assurance audits completed within the year a total of 18 resulted in a positive assurance grading being given.

The Head of Internal Audit Annual Report and Opinion 2019/20 gave a reasonable opinion on the framework of governance, risk management and control.

### 4. Conclusions

In our view, the progress outlined demonstrates that the Council continues to improve upon its risk management arrangements. This helps support the risk management evidence provided in the Annual Governance Statement.

## Progress on issues to be addressed in Annual Report on Risk Management Arrangements 2019/2020

|   | Issues to be addressed   | Progress update  | Responsible Officer       |
|---|--|--|---------------------------|
| 1 | Due to re-organisations and staff leaving membership of the Corporate Risk Group is required.  | Action Completed – Terms of reference undated and further update during the year due to further staff changes  | Corporate Risk<br>officer |
| 2 | Heads of Service to be contacted to identify further risk management training requirements.  | <b>WIP</b> : risk management training provided to Extended Management Team   | Corporate Risk<br>Officer |
| 3 | Fraud Alerts received are to be published on the council's intranet and awareness emails to be sent to all staff as they provide important advice and guidance for individuals and organisations of the ongoing threat from criminal fraudsters.   | Outstanding - Banking cyber fraud published on the Loop. Email alerts sent to officers of scams and frauds during COVID 19. Advice published on The Loop for Invoice Fraud.  | Corporate Risk<br>Officer |
| 4 | Further work is required to raise the profile and to drive forward the application and implementation of the Partnership Governance Framework and Principles, so all applicable governance and risk management arrangements are applied and consistently used across the organisation and to | WIP - Partnership Register is reviewed by the Corporate Risk Group and ELT / MT. Further work completed to ensure that the register correctly reflects the partnerships that the council are involved in. The Partnership Governance Framework and the layout of the Partnership register was reviewed and is awaiting approval by ELT / MT. | Corporate Risk<br>Officer |

|    | Issues to be addressed   | Progress update  | Responsible Officer                 |
|----|--|--|-------------------------------------|
|    | ensure that this correctly reflects                                      |  |                                     |
|    | the partnerships that the council  |  |                                     |
|    | are involved in and the risks  |  |                                     |
|    | affecting the Authority.   |  |                                     |
| 5  | Key actions for 2019/20 include:   | WIP - The following policies were reviewed   | Corporate Health                    |
|    | ,  | and/or introduced:   | and Safety Officer                  |
|    | Monitoring the following areas:  | .,.  |                                     |
|    | Crematorium  | New and Expectant Mothers  |                                     |
|    | <ul> <li>Norse waste management</li> </ul>                               | ·  |                                     |
|    | (ensuring that the risk to   |  |                                     |
|    | members of the public in relation  |  |                                     |
|    | to vehicle movements are   |  |                                     |
|    | managed effectively)   |  |                                     |
|    | • Tree safety management (in-  |  |                                     |
|    | house).  |  |                                     |
|    |  |  |                                     |
|    | Revising and implementing the  |  |                                     |
|    | following policies:  |  |                                     |
|    | Homeworking  |  |                                     |
|    | COSHH     November of Free start Mathematical                            |  |                                     |
| 6  | New and Expectant Mothers  To ensure all staff are adequately.           | Action Completed Now mandatant   | Corporate Health                    |
| О  | To ensure all staff are adequately trained in Fire Safety and that there | <b>Action Completed</b> - New mandatory elearning training provided. This is now the   | and Safety Officer                  |
|    | are effective measures in place  | responsibility of HR and has been rolled out to  | and Safety Officer                  |
|    | during out of hour use of the main                                       | all staff. Use of building out of hours by third   |                                     |
|    | Council Buildings.   | parties was reviewed   |                                     |
|    | Council Buildings.   | parties was reviewed   |                                     |
| 7  | To continue to encourage staff to  | Action completed - Body-worn video cameras   | Corporate Health                    |
|    | report incidences of verbal abuse.                                       | have been provided to a number of identified   | and Safety Officer                  |
|    | Body cameras to be rolled out to   | front line officers. Kings Lynn Council hosted   |                                     |
|    | enforcement staff and to obtain  | and manage the service. Training was   |                                     |
|    | costing from Kings Lynn Council to                                       | provided and delivered for all staff given body  |                                     |
|    | manage this service.   | worn cameras.  |                                     |
|    | CCTV provision to be provided in   |  |                                     |
|    | Greyfriars House and costings to be                                      |  |                                     |
| 0  | obtained.  | MID. The contrast for those devices avaira-  | Cornorata Haalth                    |
| 8  | The contract for the Lone Worker<br>System expires in September 2019     | <b>WIP</b> - The contract for these devices expires in September 2020 and requires re-   | Corporate Health and Safety Officer |
|    | and requires re-procurement.   | in September 2020 and requires reprocurement. The Council will be trialling a  | and Salety Officer                  |
|    | and requires re-procurement.   | number of alternative lone working solutions   |                                     |
| 9  | Conflict resolution training to be                                       | Action Completed - Validium training for front   | Corporate Health                    |
| 5  | provided to relevant officers and to                                     | of house staff was provided  | and Safety Officer                  |
|    | deliver training organised with  | The state of the s |                                     |
|    | Validium for front house staff.  |  |                                     |
| 10 | Warning Marker System to be  | WIP - As from the 1 February 2020 the  | Corporate Health                    |
|    | reviewed to ensure data is up to   | warning marker system is managed by  | and Safety Officer                  |
|    | date, reviewed on a regular basis  | Environmental Services Review has been   | ,                                   |
|    | and easily accessible by staff.  | completed. Waiting for iCT to complete   |                                     |
|    | •  | reworking of the system to allow it to be  |                                     |
|    |  | implemented.   |                                     |
|    |  |  |                                     |

|    | Issues to be addressed   | Progress update  | Responsible Officer          |
|----|--|--|------------------------------|
| 11 | Template of suite of documents to be used when setting up, delivering and monitoring projects have been drafted and to be endorsed by the Staff engagement group before rolling out. | WIP - The Project Management Framework document and accompanying templates have been presented and accepted by ELT and Extended Management Team following consultation with the Staff Engagement Group and other key project officers. The document and accompanying templates are being made available to Project Managers and Officers. Cascade briefings are to be scheduled as post Covid-19 response work dissipates and the Council go back to normalisation and recovery. | Head of Inward<br>Investment |
| 12 | The Councils insurance contract expires on 30 September 2020, therefore will continue to work with the insurance consortium to procure insurance services.                           | WIP - The insurance contract was extended to 31 March 2021. Work on the insurance tender is due to commence in June 2020, however the current COVID 19 may have an impact on the delivery of this project.   | Corporate Risk<br>Officer    |
| 13 | Discussion to be held with insurance provider to identify insurance related training that can be provided to staff.  | Outstanding – awaiting feedback from insurers  | Corporate Risk<br>officer    |

### Key risk management developments 2019/2020:

The Corporate Risk Register was reviewed by ELT and Audit and Risk within the timescale stated in the Risk Management Framework. Heads of Service and Directors were reminded of their roles and responsibilities.

Action Plans are in place for all risk include on the Corporate Risk Register in order to reduce the risk to an acceptable level or to reduce the risk further. During the year new risks have been identified and included on the register and risk have been removed as they are no longer required to be included and / or they are considered to be a service risk. The layout of the Corporate Risk Register was reviewed at the request of ELT.

The Corporate Risk Group have met on a quarterly basis to review and advise on risk management arrangements and recommendation and advice provided implemented.

The Partnership Governance Framework and Partnership Register was reviewed at the request of Executive Leadership Team. Once approved further work will be undertaken to raise the profile to ensure compliance with Partnership Governance Framework and so all applicable governance and risk management arrangements are applied and consistently used across the organisation.

The Corporate Health and Safety Group meet on a quarterly basis and continue to monitor progress with priorities and work plan.

The Annual Cycle Plan and Managers Safety Bulletin continues to assist Heads of Service to identify areas that need reviewing and topical issues.

The Health and Safety Coordinators role continue to support the managers in carrying out the health and safety tasks in the monthly management cycle. Training is carried out with the co-ordinators on a quarterly basis.

The following internal health and safety audits have been completed:

- Panic alarms
- Waterways and Boating Lake

The following policies were reviewed and/or introduced:

- Young Persons
- First Aid at Work
- Body Worn Cameras
- Personal Protective Equipment

A simplified accident reporting form was introduced, and procedure will be introduced which will encourage the reporting of near misses as well as accidents. This will also streamline the system which will be linked to the warning marker reporting procedure.

Corporate Health and Safety have addressed a wide range of employee enquiries and complaints including: Fire and DSE.

The Corporate Health and Safety advisor has been involved with contributing to guidance on Event Safety for the Great Yarmouth Event Safety Advisory Group, developing a SharePoint system for use by the group and new Terms of Reference.

Risk management techniques continue to form part of the annual budget setting process.

The 'Corporate Project Board' (CPB) has overarching oversight of the projects and ensures quality delivery against the project, programme and budget. Highlight reports are submitted monthly and include risks and issues which are closely monitored. Project documentation will be stored in a project SharePoint site, alongside a project performance section including risk and issue monitoring and regularly reviewed.

The Business Continuity function is supplied by Norfolk County Council who provide a Resilience Officer based in Great Yarmouth, work undertaken during the year:

- All outstanding internal audit recommendations have been implemented.
- The Resilience Officer worked with the Norfolk Resilience Forum to undertake contingency planning for Brexit. Impact of trade deal negotiations will continue to be monitored.
- The Business Continuity Plan templates were revised and updated which included an impact assessment of critical service delivery. The Emergency Response Plan and the Corporate Business Continuity Plan were also updated

Insurance arrangements were reviewed to ensure adequate cover and the Council's assets are protected. The insurance contract has been extended until 31 March 2021. The council are monitoring the COVID-19 pandemic and the possible impact on the implementation of the insurance tender.

The Corporate Risk Officer, Health and Safety Advisor and Resilence Officer have been significantly involved with contributing to guidance via the Great Yarmouth Event Safety Advisory Group, as well as providing advice on various projects / capital programmes in the borough.

The Corporate Risk Officer, Health and Safety Advisor and Resilience Officer have been significantly involved work in response to and providing advice and guidance to employees, volunteers and Councillors in connection with the COVID-19 pandemic. This work is expected to extend for a prolonged period and include a recovery phase.

# Issues to be addressed in Annual Report on Risk Management Arrangements 2020/2021:

|    | Issues to be addressed   | Responsible Officer                    | Due Date       |
|----|--|--|----------------|
| 1  | Heads of Service to be contacted to identify further risk  | Corporate Risk Officer                 | Ongoing        |
|    | management training requirements and to implement the training suggestion of the Corporate Risk Group  |  |                |
| 2  | Discussion to be held with insurance provider to identify  | Corporate Risk Officer                 | Ongoing        |
|    | insurance related training that can be provided to staff.  | •                                      |                |
| 3  | Fraud Alerts received are to be published on the council's intranet and awareness emails to be sent to all staff as they provide important advice and guidance for individuals and organisations of the ongoing threat from criminal fraudsters.   | Corporate Risk Officer                 | Ongoing        |
| 4  | Once approved by ELT further work will be undertaken to raise the profile to ensure compliance with Partnership Governance Framework and so all applicable governance and risk management arrangements are applied and consistently used across the organisation.  | Corporate Risk Officer                 | 31 March 2021  |
| 5  | <ul> <li>Health &amp; Safety Audits will be undertaken for:</li> <li>Working at Height in and confined spaces</li> <li>The Waterways, to ensure identified actions from the previous audit have been completed.</li> <li>Crematorium</li> <li>Norse waste management (ensuring that the risk to members of the public in relation to vehicle movements are managed effectively)</li> <li>Tree safety management (in-house).</li> </ul> | Corporate Health and<br>Safety Officer | 31 March 2021  |
| 6  | The following polices to be reviewed and implemented:  Work Equipment Audit  Manual Handling Audit  Fire and Evacuation Audit  Homeworking   | Corporate Health and<br>Safety Officer | 31 March 2021  |
| 7  | The contract for the Lone Worker Device devices expires in September 2020 and requires re-procurement. The Council will be trialling a number of alternative lone solutions.   | Corporate Health and<br>Safety Officer | 1 October 2020 |
| 8  | Conflict resolution training to be provided to relevant officers.  | Corporate Health and<br>Safety Officer | 31 March 2021  |
| 9  | ICT Team to undertake work in connection with the on-<br>line Warning Marker System  | Corporate Health and<br>Safety Officer | 31 March 2021  |
| 10 | Template of suite of documents to be used when setting up, delivering and monitoring projects have been produced. Cascade briefings are to be scheduled as Covid-19 response work dissipates and the Council go back to normalisation and recovery.  | Head of Inward<br>Investment           | 31 March 2021  |
| 11 | The Councils insurance contract expires on 31 March 21. To continue to monitor impact of COVID 19 and the impact on delivery of this project.  | Corporate Risk Officer                 | 1 April 2021   |

## 5. Recommendations

The Committee is requested to note and approve the annual report on the Council's risk management arrangements.

Corporate Risk Officer June 2020