

Subject: Annual Report on Risk Management Arrangements 2017/18

Report to: Audit and Risk Committee, 18 June 2018

Report by: Kaye Bate, Corporate Risk Officer

SUBJECT MATTER/RECOMMENDATIONS

This report provides details of the key risk management developments during 2017/2018 for the committees review.

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

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. MAIN BODY

- 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.

6. RECOMMENDATIONS

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

7. BACKGROUND PAPERS

Areas of consideration: e.g. does this report raise any of the following issues and if so how have these been considered/mitigated against?

Area for consideration	Comment
Monitoring Officer Consultation:	No
Section 151 Officer Consultation:	No
Existing Council Policies:	No
Financial Implications:	No
Legal Implications (including human rights):	No
Risk Implications:	See attached report
Equality Issues/EQIA assessment:	No
Crime & Disorder:	No
Every Child Matters:	No

Annual Report on Risk Management Arrangements 2017 / 2018

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 2017/2018 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 December 2017.

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 December 2017.

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

As part of the annual review process in December 2017 changes were made to the risk scoring criteria / matrix to bring in line with other risk registers / risk assessments used in the Authority.

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 on 14 May 2018.

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 than 5 %	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 Negligible	2 Minor	3 Moderate	4 Significant	5 Severe
Financial (loss)	£0k – <£10k	£10k – <£50k	£50k - <£250k	£250k – £1m	Over £1m
Service Provision	No effect	Minimal disruption to the whole organisation / service	Significant disruption of one part of the organisation	Significant disruption to large parts of the organisation or Suspended Short Term	Service suspended long term or statutory duties not delivered
Projects	Minor Delay – days	A few Milestones missed	Significant milestones missed / delayed	A Major Milestone missed	Project does not achieve objectives and misses majority of Milestones
Health & Safety	One Injury or illness requiring First Aid Treatment No lost time injury days	Injury or illness requiring medical treatment Lost time injury <10 days	Serious injury or illness Lost time injury >10 days	Significant / extensive injury or illness Permanent or partial disability	Multiple Loss of Life / Large scale major illness Permanent Total Disability
Objectives	No effect	Some Team Objectives not met	Team objectives not met	Portfolio Objectives not met	Corporate Objectives not met
Morale	No effect	Some hostile relationships and minor non-cooperation	Hostile relationships and major non-cooperation across the organisation	Industrial Action	Mass Staff leaving / unable to attract staff
Reputation	No media attention / minor letters	Adverse local media Leader	One off national media exposure	Prolonged Adverse National exposure	Extensive coverage in National Press and on TV. Requires resignation of Senior Officer / Member
Government Objectives	No effect	Poor Assessments(s)	Service taken over temporarily	Service taken over temporarily	Service taken over permanently
Statutory / Legal	No impact / breach	Warning received	Breach Challenging Improvement Notice	Enforcement Action Improvement Notice	Prosecution Fine
Community Risk	Insignificant impact to health, persons displaced disruption to community services, economy and environment	Minor impact to health, persons displaced disruption to community services, economy and environment	Damage to specific location or number of locations, fatalities and some casualties, 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
LIKELIHOOD OF RISK	5	Very Likely Medium 5	High 10	High 15	Very High 20	Very High 25
	4	Likely Very Low 4	Medium 8	High 12	High 16	Very High 20
	3	Fairly Likely Very Low 3	Medium 6	Medium 9	High 12	High 15
	2	Unlikely Very Low 2	Very Low 4	Medium 6	Medium 8	High 10
	1	Very Unlikely Very Low 1	Very Low 2	Very Low 3	Very Low 4	Medium 5

Risk Rating Actions:

Very High 20 - 25	Risk outside risk appetite. Action required to reduce rating to an acceptable level
High 10 - 16	Risk outside risk appetite. Action required to maintain or reduce rating.
Medium 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 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 22 risks are distributed. There are 17 risks considered to be outside the Councils risk appetite however further action has been identified to reduce that risk further. The 5 risks that fall within the risk appetite or acceptable have action plans in place to reduce the risk further.

RISK MATRIX

Likelihood	5				1 – Reduction in financial resources 2 – Reduced spending in Great Yarmouth	
	4		22 – Change Management		5 - Local/National Economy 6 - Introduction of General Data Protection Regulations (GDPR) 9 - Event Management	3 - Flooding 4 - Flood and coastal Defence
	3		7 - Information Security 13 – Project Management 19 - Infrastructure not being able to meet demand 20 - No 5 year Local Plan and timescale Local Plan can be delivered 21 – Sufficient resources and resilience to ensure effective procurement and contract management		8 – Data Quality 12 - Business Continuity 14 – Reliance on key individuals and capacity of teams 15 – Unforeseen changes in Government policies 16 - Delivery of long term strategic objectives 17 - Business improvement in the major leisure facilities under delivers 18 - Lack of community cohesion / community tensions	10 – Building design and Fire prevention system to prevent or limit the spread of fire 11 - Lease Expiry – dilapidation claim
	2					
	1					
		1	2	3	4	5
	Impact					

c. 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 11 December 2017.

d. Department / Service Risks

The roles and responsibilities of Directors 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.

e. 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
- Review the Corporate Risk Framework on an annual basis
- To bring together elements of service risk
- To make recommendations and to report back to ELT as required

f. Partnerships

A Partnership (Risk) Framework is currently available for the Managers as guidance only however as a result of an Internal Audit Report – Assurance Review of Risk Management the partnership Governance framework was to be reviewed and the Partnership Register reintroduced. Work to implement this recommendation has been progressing during this financial year.

g. 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 the EMT. Difficulties in recruiting to the post of corporate Health and Safety Officer, led to an internal reorganisation, where the main duties of the post are now being carried out by the Acting Commercial Team Manager with support bought in from Norfolk County Council.

Risk Priorities

For 2018, a work plan has been developed and the risk priorities for this year have been identified following a review of incident statistics, internal health and safety policies and the findings of the annual audit.

For 2018, the health and safety priorities for action have been identified as:-

- Fire safety, ensuring all staff are adequately trained and that there are effective measures in place during out of hour use of the main Council Buildings.
- Implementation of the revised Health and Safety Policy
- Specific safety audits of the top risks in areas which have been identified through the annual audit
- Review of the guidance on home and flexible working
- Personal protective equipment-specifically delivery of body armour and body cams
- Re-instatement of the Health and Safety co-ordinators role
- Annual management cycle audit and monitoring

The quarterly Corporate Health and Safety Group meetings will continue its role monitoring progress with these priorities.

Planned Work for 2018

The Corporate Health and Safety Advisor has identified some key actions for 2018. These include:-

- Carrying out a security and safety review of the Town Hall
- Internal audits for Legionella and asbestos
- Monitoring the new annual audit and linking this with the monthly managers bulletins
- Rolling out the Health and Safety Co-ordinators role to assist managers to complete the annual audit
- Provision of conflict resolution training for staff
- Review of Lone Worker devices

Revising the Council's:-

- Homeworker Policy
- Legionella Policy
- Driving Policy
- Work equipment
- COSHH Policy

Annual Cycle Plan and Newsletter

The annual cycle plan that helps Head of Service identify the areas of health and safety that require monitoring has been reviewed and has been well received. This has been supplemented with a monthly newsletter for Managers dealing with topical items and including targeted reminders about the annual cycle checks that are due that month.

Work Completed 2017

A range of work has been completed that includes the following:-

Training

Suspicious packages training was provided for all front line staff

Fire extinguisher training was delivered for key staff

Training and information has been provided to key reception staff in respect of general evacuation plans (GEEP's) and personal evacuation plans (PEEP's)

Audits

The following internal health and safety audits have been completed:-

Lone Working

Asbestos

New and/or revised Policies introduced

The following policies were reviewed / developed and introduced:-

- Fire
- Suspicious Packages
- Asbestos
- Visitor safety
- Security
- Lone Worker
- Violence
- Health and Safety Policy
- PPE Policy

Guidance

A manager's health and safety handbook has been developed for new managers that which will enable them to build competence in managing health and safety risks in their workplace

Personal safety advice for lone workers was developed and provided to all those who work alone.

A safety booklet was produced for Councillors.

Skyguard Lone working system

Work has been carried out to ensure that lone workers more effectively use these devices. This system is due to be reviewed in 2018 prior to expiry of the contract later in the year.

Procurement

The Procurement and Commissioning Guide (Health and Safety) was updated to align with the overall procurement approach and a Health and Safety Contractor Monitoring Policy and Health and Safety Procurement and Commissioning Policy was developed

Incidents/Accidents during 2017

The number of incidents recorded for 2017 are as follows:-

- There were 19 accidents and 14 incidents of abuse to staff; this is a slight increase in accidents from the previous year.
- The top two staff accidents reported during 2017 were slips and trips (7), and manual handling (4).
- There were no RIDDOR reportable incidents during 2017.

The number of staff subjected to verbal abuse remains significant especially those working in parking enforcement. Concerns remain that this continues to be under reported with some staff viewing it as an occupational hazard. In any format, it is unacceptable and work continues to encourage reporting and to look at ways for staff to militate against it.

It is hoped that the roll out of body cameras to enforcement staff will be effective in reducing such incidents. This has been especially effective for parking enforcement officers in other local authorities where the body cameras have been introduced.

Employee enquiries and complaints

The team dealt with a range of employee enquiries and complaints

Other Work

The Corporate Health and Safety advisor has been significantly involved with contributing to guidance via the Great Yarmouth Event Safety Advisory Group in respect of the proposed air show in June, as well as providing health and safety advice on the renovation of the Councils Waterways and the paddling pool at Gorleston.

h. 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). The new PMO has been set up to ensure compliant and effective delivery of all Corporate Projects. The Project and Programme Manager was appointed during 17/18, who has brought into place a full team complement that is now driving forward the projects for the Council. The eligible document management for projects is now being put into place to mitigate any potential issues with audit.

Alongside that, a Council 'Corporate Project Board' has been set up which 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 are now being put into place and will be managed by the Project Support Officer to ensure a robust risk approach is taken for each individual project. These R+I logs will be stored in SharePoint 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 and out-of-hours support by the Norfolk County Council Resilience Duty Officer.

Following the recent organisational changes a service improvement plan has been agreed to update the business continuity and emergency response processes. The action plan, which runs to 30 June 2018 will focus on revising business continuity plans, implementing an effective emergency response communication structure and delivering a training and awareness programme. The revised processes will be embedded in business-as-usual from July 2018 supported by an agreed work schedule.

In addition the recent coastal erosion incident at Hemsby, which used a Local Co-ordination Group to manage the multi-agency response, will be fully debriefed and the recommendations incorporated into GYBC emergency management processes.

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 as required during insurance year.

Claims are handled promptly. The Risk and Insurance Section will liaise with other departments in order 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

Zurich Municipal Insurance

ACE European Group

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 Councils Intranet page.

The Councils website provides details of how to make a claim and there is the availability of completing an on line claim form.

The Corporate Risk Officer has been significantly involved with contributing to guidance via the Great Yarmouth Event Safety Advisory Group in respect of the proposed air show in June, 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 Intranet and Internet.

A dedicated risk management page is available on the Council's intranet page.

The Council has invested in an e-learning package.

Executive Leadership Team, Senior Managers and members of the Corporate Risk Group were provided with Risk Management training by an external provider.

Training was rolled out to service areas to assist with the completion of Service Improvement Plans and further embed risk management process. Training also included health and safety and Business Continuity to see how the 3 services areas work together.

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 Internal Audit Managers 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 recommendation made as a result of their findings:

Audit Area	Assurance Level	Recommendations			
		Urgent	Important	Needs Attention	Op
GY1801 - Corporate Health & Safety	Limited	0	6	8	0
GY1802 - Contract Management	N/A	N/A	N/A	N/A	N/A
GY1803- Building Control	Reasonable	0	2	2	2
GY1804 - Community Development (EHH)	Reasonable	0	4	2	5
GY1805 - Right to Buy	Reasonable	0	0	3	0
GY1806 - Network Infrastructure	Limited	1	4	11	2
GY1807 - Corporate Governance	Reasonable	0	1	3	0
GY1808- Equinox Enterprises	Limited	0	8	7	2
GY1809 - Cross Authority Review HR & Payroll	N/A	N/A	N/A	N/A	N/A
GY1810 - Integra & Cash Application	Reasonable	0	2	3	1
GY1811 - Accounts Receivable	Reasonable	0	3	9	4
GY1812 - Council Tax & NNDR	Reasonable	0	4	4	1
GY1813 - Housing Benefit & Council Tax Support	Reasonable	0	0	3	0
GY1814 - Temporary Accommodation, Allocations & Homelessness	Reasonable	0	1	2	1
GY1815 - Housing Adaptations	Limited	2	6	0	0
GY1816 - IT Project & Programme Management	N/A	N/A	N/A	N/A	N/A
GY1817 - Key Controls & Assurance	Reasonable	0	2	0	0
GY1818 - Accountancy Services	Substantial	0	0	1	0
GY1819 - Income	Reasonable	0	2	5	1
GY1820 - Procurement	Deferred				
GY1821 - Development Management	Reasonable	0	4	1	0
GY1822 - Car Parking	Deferred				
GY1823 - Grants Process	Cancelled				
GY1824 - Phoenix Pool	N/A	N/A	N/A	N/A	N/A

Of the 19 assurance audits completed within the year a total of 15 resulted in a positive assurance grading being given.

The Head of Internal Audit Annual Report and Opinion 2017/18 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 2017/2018

Issues to be addressed	Update
The Risk Management Framework is being reviewed.	Completed - The Risk Management Framework was reviewed as part of the annual review process to ensure that responsible officers remain relevant and up to date. Changes were made to risk scoring criteria / matrix to bring in line with other risk registers / risk assessments used in the Authority.
The Partnership Governance Framework is to be reviewed along with an update to the register.	Completed - The Partnership Governance framework was reviewed and a Partnership Register compiled to be approved by ELT and A & R
Further work is to be carried out to review how service risks can be escalated to the Corporate Risk Register.	Ongoing - Service Improvement Plans now included Risk. These are to be reviewed by the Corporate Risk Officer for possible escalation to the Corporate Risk Register.
Work with the contracted H & S Advisory Services from Norfolk County Council and monitor progress against the contract.	Completed – commissioned further Health and Safety resource from NCC.
The role of the departmental health and safety champions is to be reviewed during the year to see if they can be more effectively used to help Heads of Service.	Completed. Job descriptions created and to be rolled out.
The new annual audit and guidance for Heads of Service will be launched.	Completed.
The Corporate Health and Safety Officer will work with HR to assess the most effective method to deliver effective Health and Safety Training.	Completed – Health and Safety Officer regularly meets with the HR.
<p>The Corporate Health and Safety Officer will revise the following policies:-</p> <ul style="list-style-type: none"> • Violence and Lone Worker policies • Legionella Policy • PPE Policy • Health and Safety Policy 	Completed – All policies reviewed and various departments consulted.
The annual cycle plan is to be reviewed. This is being redesigned to provide more practical guidance to Managers to help them complete the required checks.	Completed. The annual cycle plan that helps Head of Service identify the areas of health and safety that require monitoring has been reviewed and has been well received. This has been supplemented with a monthly newsletter for Managers dealing with topical items and including targeted reminders about the annual cycle checks that are due that month.
The Personal and General Evacuation Plans are to be reviewed.	Completed

All staff are to be educated in Business Continuity. Heads of Service and Team Managers have been reminded of their responsibilities to ensure plans are updated and reviewed.	Ongoing – further Business Continuity / Resilience resource commissioned from NCC.
Executive Leadership Team, Senior Managers and members of the Corporate Risk Group are to be provided with Risk Management training by an external provider.	Completed. Risk management training was provided by an external trainer to Senior Managers and members of the Corporate Risk Group. Further training was rolled out to Heads of Service and included Health and Safety Advisor and Business Continuity Officer.
The Fire Policy has been reviewed, which has identified additional training with staff on the use of Fire extinguishers is required. This is programmed to be completed by June 2017.	Completed – fire extinguisher training provided.
Replace the current annual health and safety audit with a new approach, giving focus to actions taken to manage the top risks for GYBC.	Completed - Redesigned to provide more practical guidance to managers to help them complete the required tasks.
To ensure internal audit recommendations are implemented within the agreed timeframe all recommendations will be the responsibility of Heads of Service or Directors to ensure that the appropriate action is taken, and where there are resource / capacity issues these will be discussed at Executive Leadership Team.	Ongoing - Work is continuing to address outstanding audit recommendation however the number of outstanding recommendations is at a more acceptable level and progress is being made to implement the recommendations.

Key risk management developments 2017/2018:

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.
During the year one new risk has been added and four risk have been removed from the Corporate Risk Register. For the risks that fall outside the risk appetite further action has been identified to reduce the level of risk to the Authority. For some risks where the action plans have been implemented this has resulted in the current score and / or the target score reducing.
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 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 Newsletter continues to assist Heads of Service to identify areas that need reviewing and topical issues.

<p>Training has been provided in the following areas: Suspicious packages training was provided for all front line staff Training and information has been provided to key reception staff in respect of general evacuation plans (GEEP's) and personal evacuation plans (PEEP's)</p>
<p>The following internal health and safety audits have been completed:- Lone Working Asbestos</p>
<p>The following policies were reviewed/developed and introduced:-</p> <ul style="list-style-type: none"> • Fire • Suspicious Packages • Asbestos • Visitor safety • Security • Lone Worker • Violence • Health and Safety Policy • PPE Policy
<p>A manager's health and safety handbook has been developed for new managers that which will enable them to build competence in managing health and safety risks in their workplace.</p>
<p>Personal safety advice for lone workers was developed and provided to all those who work alone.</p>
<p>A safety booklet was produced for Councillors.</p>
<p>Work has been carried out to ensure that lone workers more effectively use the Skyguard Lone working devices. This system is due to be reviewed in 2018 prior to expiry of the contract later in the year.</p>
<p>The Procurement and Commissioning Guide (Health and Safety) was updated to align with the overall procurement approach and and a Health and Safety Contractor Monitoring Policy and Health and Safety Procurement and Commissioning Policy was developed.</p>
<p>Risk management techniques continue to form part of the annual budget setting process.</p>
<p>The Project and Programme Manager was appointed during 17/18, who has brought into place a full team complement. Risk management is incorporated within all projects. A Council 'Corporate Project Board' has been set up which has overarching oversight of the projects and ensures quality delivery against the project programme and budget. Reports are submitted monthly and include risks and issues which are closely monitored.</p>
<p>Additional Business Continuity resources have bene commissioned from NCC.</p>
<p>Insurance arrangements were reviewed to ensure adequate cover and the Authorities assets are protected and claims handled promptly.</p>

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

Issues to be addressed 2018/2019:

Heads of Services to be contacted to identify further risk management training requirements.
Further work required to identify how service risks can be escalated to the Corporate Risk Register.
The Corporate Risk Group, Terms of Reference to be reviewed and quarterly meeting dates to be scheduled around key dates for committee reports.
Fraud Alerts received are to be published on the councils 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.
Further work to embed the Partnership Governance Framework into the Authority and Partnership Register to be reviewed to ensure that all partnerships are captured.
To ensure all staff are adequately trained in Fire Safety and that there are effective measures in place during out of hour use of the main Council Buildings.
The revised Health and Safety Policy to be published and implemented.
Safety audits to be undertaken of the top risks in areas identified through the annual audit process.
Guidance on home and flexible working to be reviewed.
To continue to encourage staff to report incidences of verbal abuse and to look at ways for staff to militate against it. Body cameras to be rolled out to enforcement staff to assist with reducing such incidents.
Health and Safety co-ordinators role to be re-instated and rolled out the Health and Safety Co-ordinators role to assist managers to complete the annual audit
A security and safety review of the Town Hall is to be undertaken.
Internal audits to be undertaken for Legionella and asbestos.
Conflict resolution training to be provided to relevant officers
The Lone Worker devices system to be reviewed prior to renewal in 2018.

The following policies are to be revised:-

- Homeworker Policy
- Legionella Policy
- Driving Policy
- Work equipment
- COSHH Policy.

The Business Continuity Plans are to be revised, an effective emergency response communication structure to be implemented and a training and awareness programme to be delivered. The revised processes will be embedded in business-as-usual from July 2018 supported by an agreed work schedule.

Recommendations made as a result of the recent coastal erosion incident at Hemsby, will be incorporated into GYBC emergency management processes.

Discussion to be held with Internal Audit regarding providing Heads of Service to be provided with a copy of all outstanding internal audit recommendations. This would assist Heads of Service to monitor progress with audit recommendations especially if they have a future date so they are not forgotten. Currently Heads of Service are only reminded when they receive a request for a progress up date.

Discussion to be held with insurance provider to identify insurance related training that can be provided to staff.

5. Recommendations

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

Corporate Risk Officer
June 2018