

Strategic Risk Register 2022/23



August 2023

No.	Risk <i>Cause and Effect</i>	Corporate Goal Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions/Planned Mitigations	Deadline		
1	<p>Threats to the Economic Growth of Walsall are not identified and mitigated, together with opportunities for sustainable growth being missed.</p> <ul style="list-style-type: none"> Loss of EU funding compromising coverage of strategic objectives in inclusive growth, jobs and skills. Economic uncertainty weakens the investment market and the opportunities for our residents to secure sustainable employment. Continued uncertainty around the cost of living and any as to the ongoing effects of the Covid-19 pandemic. Business Rate income under threat as a result of weakening markets and reducing business confidence. Change in shopping habits threatening town and district centres. Insufficient land available for development. Insufficient funding to bring all brownfield land back into the marketplace. Uncertainty over future capital funding to enable development. Enterprise Zones reverting to Local Authorities of geographical origin at 31 March 2025, resulting in smaller share of consolidated surpluses for Walsall. Interpretation and distribution of the UK Shared Prosperity Fund (UKSPF). Lack of pipeline development which will limit Walsall's opportunities to secure funding. <p><i>The effect would be reduced future income streams for the council, increased unemployment and reliance on services from the community, reduced aspirations for the next generation.</i></p>	<p>Economic Growth</p> <p>Executive Director Economy, Environment & Communities</p>	<p>Existing Controls:</p> <ul style="list-style-type: none"> Reviewing investment options for development sites. Economic Growth Programme continuing to March 2023. Strategies and Policies in place. Single Accountable Body status implemented from Feb 2020. <p><i>Assurances: Government has issued the Future High Streets Fund and the Town Deal and the Levelling up fund. Walsall has secured £11.4m from FHSF, has been allocated £41.6M from the Town Deal pot, and has just been successful in securing £20m in Round 2 of LUF.</i></p> <p><i>Site Allocation Document and Area Action Plan adopted by Walsall Council.</i></p> <p><i>Pipeline development plan has been developed and addressed through close working with Combined Authority and LEP and alignment with Walsall's capital programme</i></p> <p><i>Delivery of Town Centre Masterplan will address vulnerability of town centre economy.</i></p>	Current Score		4	4	16	Red ↔	<p>1) We continue to engage with central government funding streams whether directly through LAs e.g. Levelling Up Fund or managed through the WMCA, including the latest brownfield funding. Further place making interventions to be funded through UK Shared Prosperity Fund and Commonwealth Games Legacy Fund</p> <p>2) Continued promotion of investment opportunities in a range of media, including Walsall Town Centre, Walsall to Wolverhampton Corridor and Junction 10 cluster as priorities in West Midlands Investment Prospectus. Developing the narrative of the Walsall to Willenhall corridor and delivering investor workshops to stimulate the market</p> <p>3) Walsall Council as the Single Accountable Body for LEP Legacy funds will manage EZs up to the point of reversion back to LAs at March 25. The Black Country Collaboration Agreement is being updated to ensure that agreements to share legacy funds, including a fair settlement with Wolverhampton Council in relation to the North EZ are legally binding.</p> <p>4) Developing the transformative town centre Connected Gateway scheme and Town Deal projects which contribute to the repurposing of the town centre and diversification of the economy.</p> <p>5) Plans to market Walsall Town Centre with its own branding to increase real estate values, lift the mood, and promote Walsall as a prosperous place to live, work and play.</p> <p>6) Work with CA and partners to identify and bring forward employment sites and include within investment propositions for the town.</p> <p>7) Develop pipeline projects and secure support to resource this.</p> <p>8) Focus on land assembly using powers such as CPO and partnership working to bring forward sites which have been inactive and/or derelict long term.</p> <p>9) Create and practise progressive and pragmatic planning policy, processes and</p>	<p>Ongoing</p> <p>October 2023</p> <p>March 2026</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>
				Target Score							

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				3	3	9	Amber	decision making to bring forward housing and employment sites. 10) Develop an action plan in the form of a framework to support the delivery of the council's economic strategy	March 2024

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	<i>Cause and Effect</i>								
2	<p>Proud Continuous Improvement does not achieve the outcomes and benefits required to ensure that available resources are directed to deliver the greatest outcomes for the community.</p> <ul style="list-style-type: none"> Lack of commitment to change/change fatigue Technical DaTS capability and service design (business analysis) capacity not sufficient to enable change to be implemented which delivers demonstrable benefits against the Proud Promises; Directorates and Services work in disparate way; The organisation does not have the skills or expertise required to deliver and sustain change and is reliant on expensive external resources; Proud Continuous Improvement work is not focused on the right changes or stretching enough to achieve the targets and outcomes identified The changes made are not fully adopted by the organisation, new ways of thinking and working are not fully embedded. The organisation cannot sustain the changes made. <p><i>The effect would be that costs of service provision remains above optimum level and opportunity cost of this cannot be removed. The Council would not become fit for purpose to face future challenges. Behaviours and Culture would not change, and customer service levels would be variable alongside the Council's ability to attract and retain top talent in the sector.</i></p>	<p>ALL</p> <p>Executive Director Resources and Transformation</p>	<p>Existing Controls:</p> <ul style="list-style-type: none"> As the Proud Programme transitioned into continuous improvement activity from April 2022, Proud governance arrangements were amended for Walsall Proud Board (WPB), Business Design (BDA) and Technical Design Authorities (TDA). The Terms of Reference for these forums have been refreshed and aligned to the revised approach. Directors and SMG have been updated with the changes; Transformation and Finance Group established to consider transformation expenditure and benefit delivery. Proud Work Streams reaffirmed with CMT Sponsor and Work Stream Lead governed by Work Stream Steering Group (one for each Work Stream) and Programme Management from Proud Programme Management Office (PMO); Oversight by CMT of Proud activity on a weekly basis through Proud Slot. Programme definition baselined and roles and responsibilities approved; Standard programme and project management processes now in place to track progress against plan, manage resources and risks; PMO now established standard documentation for reporting to Board including highlight reports assurance against plan and risk register; Proud Promises: Customer, Employee and Efficiencies being tracked by Highlight reporting on each Work Stream; Work Force Strategy and organisational development strategy in development, taking account of findings from Employee Survey. Additional Employee Surveys undertaken (2 on Covid Working from Home) and a full employee survey completed September 2021; 	<p>Current Score</p> <p>4 3 12</p>		<p>Red</p> <p>↔</p>	<p>1) Via the Proud Implementation Plan a resource profile was produced to identify skills and capacity required to deliver the programme activity. This was approved at Proud Board. Recruitment to transformational roles continues to be challenging, in some areas temporary contracted resources are being used. Change Centre of Excellence roles now defined and evaluated, moving into recruitment. These roles will be revisited as part of the wider Enabling & Support Services programme to ensure current structure is fit for purpose.</p> <p>2) The Proud PMO is maturing and has implemented standards and processes to aid consistency of projects. This includes training and support for key roles such as SRO and Workstream lead. Training An IT system is being implemented to show project and workstream progress.</p> <p>3) Resource requirements will continue to be monitored as transformation projects continue to be developed – through business case development. The demand process is also being reviewed to ensure that the PMO are meeting the wider Council's transformation priorities.</p> <p>4) LGA Peer Review action requiring the embedding of the Proud deliverables in a</p>	<p>Ongoing March 2023 and beyond</p>	
				<p>Target Score</p> <p>4 2 8</p>		<p>Amber</p>		<p>First Phase of Verto rollout April 2023</p> <p>Ongoing</p> <p>Ongoing</p>	

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			<ul style="list-style-type: none"> • Workstream delivery aligned to services through the development of service transformation plans which is the delivery vehicle through which a balanced 2023/24 position and 4 year MTFO from 2024/25 will be achieved; • Regular reporting on benefits delivery via Board, and Cabinet / CMT; • Proud Communications releases regular updates on achievements and progress; • Refreshed risks and issues register completed and presented monthly at Proud Board. <p>Assurances:</p> <ul style="list-style-type: none"> • Monthly monitoring of financial benefit and highlight report on Proud activity and workstream progress to Board; • Re-established “transformation/finance” group to track and monitor transformation investments and benefit delivery • Regular reporting to Cabinet on benefit delivery; <p>Separate corporate financial reporting includes delivery of benefit savings and requirement to address any financial saving shortfalls to ensure council outturns within budget despite any in year financial and demand pressures; Evidenced by Outturn 2022/23 and previous years all within budget with unqualified audit.</p>					<p>continuous improvement programme and ensuring they are achieved. This will be achieved from the evolving outcomes based budgeting the council is undergoing and rigorous monitoring and performance through CMT and Cabinet to rectify non-delivery issues</p> <p>5) The transformation and change team are working closely with the Council Hub and finance on service transformation planning and budget setting process going forwards, ensuring focus remains on Proud promises, benefit delivery and sustainable change.</p> <p>6) Customer and Employee Surveys to be completed to measure Proud Promises.</p>	<p>Ongoing</p> <p>Q3 2023</p>

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3	<p>Partnership relationships with other sectors and our major suppliers fail to deliver on shared objectives and therefore outcomes for the community.</p> <ul style="list-style-type: none"> • <i>Non vibrant voluntary sector;</i> • <i>Weak relationships with Partners;</i> • <i>Lack of supply chain resilience / suppliers of services in market;</i> • <i>Provider fails;</i> • <i>Financial pressures in other sectors reduce the resources they can deploy;</i> <p><i>The effect of this risk materialising would be increased future costs for the Council to deliver the same or reduced services or service disruption due to provider or contractor failure.</i></p>	<p>Communities</p> <p>Executive Director Adult Social Care</p>	<p>Existing Controls:</p> <ul style="list-style-type: none"> • Development of a strategic partnership board and a range of thematic boards to oversee delivery of the priorities in Walsall. • Contract Management Procedures in place. • Robust Relationships with Police/Health/Housing/FE/Schools / Fire/VCR/CDM sector. • Care Home Closure Procedures in place for provider failure. Domiciliary care market closure, attracting the marketplace procedures. Suppliers of food/cleaning materials/other goods and supplies required by Council. • Major contracts have robust response plans in place to be activated if the company fails. • Risk Assessment of major contractors completed. <p>Assurances:</p> <p><i>Quality Audit and Monitoring Resources in Adult Social Care.</i> <i>PwC work across all Directorates.</i></p>	4	3	12	Red ↔	<p>1) New outcome focused contracts to be established for priority aims Increase the percentage of suppliers who are contracted with the Council.</p> <p>2) Additional resources in ASC identified for quality audit and monitoring. QICT established, however, monitoring functions to be scoped as part of HUB implementation.</p> <p>3) Design and implement the Quality assurance and Contract Monitoring function of the Council Hub.</p> <p>4) Develop quality surveillance with systems with collective responsibility for the quality of (all) care provision.</p> <p>5) Development and launch of new whole-age care framework Reimagining Care. Part of ASC's Continuous Improvement plan.</p> <p>6) Strategic Procurement function to be developed in the Council Hub.</p> <p>7) Modelling of future demand and market sustainability project as part of Reimagining Care to inform 2024-25 budget and mitigate increases in inflation and NLW.</p>	<p>April 2024</p> <p>Autumn 2023</p> <p>Timeline for implementation Spring 2023</p> <p>Mid-late 2023</p> <p>Framework in development. Transitional contracts agreed by Cabinet 12.02.2020 with all aligned to March 2024 Procurement now part of the Hub but further development required to ensure it meets the council needs during Spring 2023.</p>
				Current Score					
				Target Score					
				4	2	8	Amber		

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4a	<p><i>Cause and Effect</i></p> <p>The Council is unable to maintain statutory service standards to support the most vulnerable in society.</p> <p>Demand management:</p> <ul style="list-style-type: none"> • Thresholds, understanding and application of thresholds insufficient across the partnership, leading to unnecessary referrals of children and families from single agencies. • Right Help Right Time: Children who do not require specialist services may be open across Children’s Social Care. Children’s Services become overstretched and are unable to maintain service standards. As a consequence children may not be adequately safeguarded from harm. • High profile child protection cases from other areas and associated media coverage may result in increased demand within the service due to increased risk aversion among professionals and public concern, creating more demand at the front door and a higher demand for child protection plans and children entering care. • <u>Increasing pressures within families due to the ongoing cost of living crisis may increase demand. There may be a particular increase in demand around Early Help and an increase in the number of children presenting with neglect.</u> <p>Children in specific circumstances are not adequately supported and are left at risk (missing, criminal exploitation, SEND, complex needs/ tier 4 / CSE / exclusion):</p> <ul style="list-style-type: none"> • Intelligence around vulnerable children are not robustly captured or joined up within children’s services and across the partnership, there is a lack of action to disrupt criminal activity and support is not sufficient. • This can lead to children and young people being sexually or criminally exploited, going missing and being left at risk of short or long term harm, poor outcomes and of becoming perpetrators themselves. <p>Provision of services does not meet the needs of children and families across Early Help, Social Care and Education (including SEND):</p> <ul style="list-style-type: none"> • Systems, processes and quality of practice are not robust, contribution of partners is not 	<p>People</p> <p>Executive Director Children’s Services</p>	<p>Existing Controls:</p> <ul style="list-style-type: none"> • Safeguarding practice standards are in place alongside the Right Help, Right Time guidance to ensure that professionals understand requirements and thresholds for statutory services. • The All Age Exploitation supports best practice in this area. Closer monitoring of child exploitation is taking place through strategic management structure and operations group and the new strategy has been launched. • New Early Help Strategy has been developed and launched with partners and regular “time to talk” partnership events are held to ensure that everyone is aware of their responsibilities in delivering effective Early Help. • Key safeguarding multi-agency messages from the Walsall Safeguarding Partnership are issued to all staff on a weekly or bi-weekly basis. • The implementation of Inclusion, Access and SEND strategies and a robust Schools Causing Concern Protocol are in place. • Key operational sub-groups are in place for MASH and SEND, working cross partnership to monitor demand and improve practice. • A robust Quality Assurance Framework ensures that qualitative and quantitative data is brought together to identify areas of good practice and areas for improvement. • Demand is monitored with any change responded to quickly. Demand data is also shared with partners to support conversations about ensuring that children are receiving the right help at the right time. • There is a strong learning and development offer in place for all staff. • New practice models now in place and are being embedded. • Skilled and experienced performance team is able to understand and respond to the data and analysis needs of the business. • Robust performance management culture being adopted across services. 	<p>Current Score</p> <p>3</p>	<p>3</p>	<p>9</p>	<p>Amber</p> <p>↓</p> <p>Reduced from Red - 12 (3 x 3)</p>	<p>1) Improvement plans across social care and SEND are in place in response to the ILACS inspection in 2021 and SEND re-inspection in 2022 to drive continuous improvement in relation to the inspection findings.</p> <p>2) Initial phases of the MOSAIC health check were completed. Phase 2 is now being developed following the implantation of the upgrade with the initial focus on improving Family Safeguarding reporting.</p> <p>3) Implement MOSAIC Portal to enable partners to record early help interventions directly into systems and to see relevant family history.</p> <p>4) Implement Sentinel system to facilitate the identification and claims for families through the Supporting Families programme and also to support the joining up of data across different services to provide a more complete picture of needs for children and families.</p> <p>5) Contribute to the Domestic Abuse (DA) Needs Analysis and the development of the strategy and use the findings to support the development of services for families where DA is an issue.</p> <p>6) Lead on the needs analysis for Family Hubs with a particular focus and deep dive on Early Years.</p> <p>7) A review of demand across the localities is being undertaken to ensure that resources are in the</p>	<p>Ongoing</p> <p><u>October</u> <u>May 2023</u></p> <p><u>October</u> <u>Sept 2023</u></p> <p><u>May 2023</u> <u>– testing is being finalised with go-live imminent.</u></p> <p><u>October</u> <u>May 2023</u></p> <p><u>September</u> <u>May 2023</u></p> <p><u>September</u> <u>April 2023</u></p>
				<p>Target Score</p> <p>3</p>	<p>3</p>	<p>9</p>	<p>Amber</p>		

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	<p>sufficient, and advice and information provided to parents and carers is not of a suitable quality.</p> <ul style="list-style-type: none"> Performance information and analysis are not robust and do not support service planning and improvement. <p>This can lead to children and families not being supported in a way which maximises their opportunities and outcomes and the council not being compliant with legal and statutory requirements, resulting in legal challenge and poor inspection outcomes.</p>		<ul style="list-style-type: none"> <u>Websites are being updated to ensure parents and professionals have access to information to support self-service.</u> <u>Systems are being updated and implemented across the directorate to ensure that they are fit for purpose and support front line practice effectively while also allowing data to be accessed and analysed to support service assurance and development.</u> <p>Assurances:</p> <ul style="list-style-type: none"> <i>Multi-agency threshold training has been delivered across the Safeguarding Partnership. Ongoing monitoring of demand and capacity demonstrates where this has been implemented successfully or where further training is required.</i> <i>Half termly Schools Causing Concern Protocol is identifying schools that need additional support, gathering assurances on action plans and providing effective challenge. Monitoring of school attainment and performance is part of this.</i> <i>Ongoing programme of audits is in place and are being used alongside performance and demand data to provide assurance and inform action plans.</i> <i>External oversight from Ofsted and DLUHC confirms the quality of provision of services and assurance that the right families and children are being supported in the right way.</i> <u>Ongoing performance management arrangements provide assurance that the required data is available and that analysis is robust, in line with business need and carried out with an understanding of operational and strategic detail which impacts on any conclusions the analysis draws</u> 					<p>right place to manage changing demand and differing needs</p>	

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	<i>Cause and Effect</i>								
4b	<p>Adult Social Care The risk of being unable to maintain service standards to support the most vulnerable in the Borough continues to provide some challenges at this time due to increased demand on adult social care.</p> <p>Safeguarding demand continues to be prioritised and referrals screened and progressed to a safeguarding enquiry where appropriate.</p> <p>Immediate risk management plans are put into place where possible, with the aim to reduce risk and immediate visits scheduled where the risk is to be considered high or further information is needed to be obtained to ensure the welfare of the citizen.</p> <p>Whilst the numbers of safeguarding referrals remains in line with 2021, the complexity of situations is apparent. There is an increase of referrals relating to self-neglect and domestic abuse and these are areas of focus and key priority for the safeguarding partnership.</p> <p>ASC continue to work within the statutory duties outlined in the Care Act 2014, and other legislative frameworks including the Mental Capacity Act, Mental Health Act and Human Rights Act.</p>	<p>People</p> <p>Executive Director Adult Social Care</p>	<ol style="list-style-type: none"> Safeguarding referrals are prioritised and screened and progressed to a safeguarding enquiry where appropriate. The IROs that moved to CXC has freed up staff within the adult social care Access Team to focus solely on safeguarding referrals. The new dedicated safeguarding team along with the additional three IROs ensures that all referrals are screened and immediately risk assessed and managed on the same day of referral. EDT have access to the safeguarding concerns inbox for monitoring and responding during out of hours. A new safeguarding adults lead post has been recruited to and the new member of staff will start in December 2023. This will provide additional capacity at an operational and strategic level and will further strengthen the department's quality audit function and workforce development and training. A staff tracker is in place to monitor resources, and staff and managers work across the directorate to cover unplanned absence to avoid impacting on service delivery. Business Continuity and emergency response plans in place whereby the department will deploy staff from other service areas / teams to support the safeguarding function at any time there is a shortage of staff that risks impact on service delivery, in particular , timely assessment of risk in the context of safeguarding referrals in to the Access Safeguarding Team. Operational and senior management meetings take place weekly to review safeguarding activity across the directorate in line with the ASC QAF, and general risk management. Perform Plus management methodology is used to ensure safeguarding concerns and enquiries are recorded and reported at all levels, and the impact evidences a significant reduction in delays and enquiries beyond 70 days. The data is reported from Mosaic (client record management system) within a dashboard operated by PowerBi. This is live information and enables managers to continuously monitor 				<p>Current Score</p> <p>3 3 9</p> <p>Amber ↓ Reduced from Red - 16 (4 x 4)</p> <p>Target Score</p> <p>4 2 8</p> <p>Amber</p>	<ol style="list-style-type: none"> A CQC Peer Review took place on the 12 and 13 September and included a review of the Council's safeguarding arrangements and practice. A pre-review Self-Assessment has been completed and along with the review findings, an action plan will be developed and overseen by the ASC Continuous Improvement Programme (CIP) On-going support is being provided to CAM by ASC, demand activity is regularly audited and plans in place to manage safeguarding activity. ASC are conducting an options appraisal for further strengthen its front door safeguarding function with the possibility of developing a Multi-Agency Safeguarding Hub (MASH) for adults , similar to the safeguarding arrangements within Children's Services. Safeguarding concerns in relation to self-neglect and domestic abuse have increased in the past two years in line with national trends. ASC as part of the wider Safeguarding Adults Partnership in Walsall have developed a new framework for preventing and responding to incidents of self-neglect and is in the process of reviewing the local MARAC to improve outcomes for adults with care and support needs at risk of domestic abuse. A new referral form is in development which will be integrated with the ASC record management system (Mosaic) , which when launched, aims to free up the IRO capacity to focus on initial screening of the referrals, and potential to improve the timeframe between concern and carrying out a s42 enquiry (or other actions , depending on the risk and threshold. 	<p>Completed – CIP ongoing</p> <p>On-going reduced from weekly to monthly peer support</p> <p>31 March 2024</p> <p>30 October 2023</p> <p>31 March 2024</p>

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			<p>activity and manage resources according to demand and urgency.</p> <p>7. A multi-agency self -neglect and hoarding panel has been established and chaired by the operational safeguarding team manager. Social workers and allied professionals can refer people to the panel for professional advice and as part of a risk enablement, to agree actions that support people to remain as independent as possible.</p> <p>8. The department's safeguarding adults' function is supported by the West Midlands Safeguarding Policy and Procedures. Walsall Council has its own Corporate Safeguarding Policy, and the department has locally developed guidance for staff.</p> <p>9. A Safeguarding Quality Audit system is in place which includes auditing of both referrals/ concerns and safeguarding enquiries conducted under s42 of the Care Act 2014. Audit reports are produced quarterly and evidence that staff have good legal literacy and that more than 90% of people subject to safeguarding enquiries achieved their desired outcomes in 2021/22 and 2022/23 – this is reported in the national Safeguarding Adult Collection data (SAC)</p> <p>10. An independent case file audit on 100 people who used adult services in 2022/23 achieved an assurance rating of GOOD (green) including evidence of good safeguarding practice and strength based, person centred approaches in the majority of cases.</p> <p>11. The Walsall Safeguarding Partnership has restructured and this has been beneficial for adult safeguarding, with stronger links to the wider network and a dedicated board overseen by an Independent Chair.</p> <p>12. Multi-agency audits are undertaken quarterly and include areas such as domestic abuse, self neglect, transitions and fire risk and safety.</p> <p>13. A safeguarding sub-group of the Adult Safeguarding Board provides governance for the audit process and the learning from audit findings. Audit findings and action plans are reported into the Walsall Safeguarding</p>					<p>6. The service is developing a QAF with plans in place to launch in the 3rd quarter of 2023/24</p>	<p>31 December 2023</p>

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			<p>Executive Board made up of the Executive Director for ASC, Senior Police Officer/Commissioner and CEO of the Black Country ICB</p> <p>14. Within ASC, audit findings and plans are reported to the Senior Management Operational Meetings and the Quality and Safety Committee.</p> <p>15. The Walsall Safeguarding Partnership provide safeguarding training for the health and care sector, a recent audit evidences good compliance against a number of key performance standards, with plans in place to address identified gaps</p> <p>16. ASC Staff receive mandatory safeguarding training at an appropriate level for their role and function. A tracker has been developed to monitor training activity and compliance within ASC.</p> <p>17. The Principal Social Worker holds a bi-monthly Practice Leads Forum with managers and senior practitioners where safeguarding adults is a standard agenda item.</p> <p>18. Staff supervision has been strengthened and compliance is reported on a tracking system , with good level of management oversight as reported at weekly perform plus meetings. The department will be carrying out a quality audit in the future.</p> <p>A provider based escalation protocol is in place and quality issues as well as safeguarding concerns are referred to the Access Safeguarding Team , with strong links with commissioning and the Quality in Care Team QiCT, as well as Health watch and CQC supported by a Quality Compliance Framework</p>						

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5	<p>External Changes in Political and/or legislative environment including ongoing impact of Covid-19 and Cost of Living pressures.</p> <ul style="list-style-type: none"> Changes in political direction from government; Changes in priority locally; Government driven reform to local government structures / devolution Lack of reform – local government finance, social care funding Government funding package insufficient to support increased cost of living pressures across all council services <p>The effect of this risk materialising is that some of the generational change required for example long term regeneration plans or public health driven initiatives may be subject to changing landscape where strategic direction or political landscape changes.</p>	<p>All</p> <p>Executive Director Resources and Transformation</p>	<p>Existing Controls:</p> <ul style="list-style-type: none"> Regular statutory officers' meetings review and consider national and local environment. Main record of the council's statutory obligations is contained within the Constitution. The council monitors legislative and policy changes and implements change where necessary to ensure it acts lawfully. CMT oversight ensures organisation remains flexible to change. Medium term financial strategy and rolling 4-year medium term financial outlook in place and regularly reviewed and updated for national and local changes in policy and legislative changes. Enables and supports forward planning and responsiveness to change. Focus on ensuring there is cross party support, and the business driver is the Council Plan. Continued delivery of Proud transformation and workstreams agreed targets. Part of the WM local resilience forum watching brief on emergency planning. Household support scheme, Crisis support scheme and Council Tax support schemes in place to support the most vulnerable. Quarterly performance of the Council plan is taken through CMT, Cabinet and Scrutiny on a quarterly basis. CMT review of Strategic Risks (quarterly) Formal horizon scanning exercise at least annually for emerging risks, to ensure that on-going activity feeds the processes and formal proactive action plans are in place when is most efficient and effective to do so. <p>Assurances: Management mechanisms in place – no unexpected or unforeseen changes in last 12 months. A Corporate Peer Review was undertaken in January 2023 and positive feedback received with relevant actions to be planned and implemented.</p>					<p>Current Score</p> <p>3 2 6 Amber</p> <p>⇔</p> <p>Target Score</p> <p>3 2 6 Amber</p>	<p>Ensuring the authority keeps up to date with relevant changes and considers impacts at the earliest opportunity.</p> <p>Continual review of Cost of Living pressures and Government funding as part of the annual budget cycle throughout the year.</p> <p>Corporate Peer Review report received February 2023 and an agreed action plan submitted March 2023 with actions to be implemented within 6 months to make any necessary improvements.</p>	<p>Ongoing</p> <p>Ongoing</p> <p>September 2023</p>

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No.	Risk	Corporate Goal Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions	Deadline
	<i>Cause and Effect</i>								
6	<p>There is a lack of community cohesion and resilience placing increased pressure on public sector resources.</p> <ul style="list-style-type: none"> Demographic changes in the Borough; Increase in hate crime and a feeling of segregation; Expectations in community around public services are increasing when funding is reducing. Support for residents around status and access to services. 	<p>Communities</p> <p>Executive Director Economy, Environment & Communities</p>	<p>Existing Controls:</p> <ul style="list-style-type: none"> Walsall, as one of the five integration areas, has benefited from central government investment. Research by the Belong Network and the University of Kent has drawn a direct correlation between the work of this investment and the increase in community activism and increased cohesion. Close work with police and other partner organisations through the Safer Walsall Partnership including a resilient 				<p>Current Score</p> <p>4 2 8</p> <p>Amber</p> <p>↔</p> <p>Target Score</p>	<p>The 3 key areas of work will focus on:</p> <p>1) Sustainable funding solution informed by VCS knowledge to allow for the work of the organisation to continue. This is expected to be delivered through a combination of DLUHC/Lottery and the Public Sector within Walsall. Continued development of the</p>	Ongoing

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<ul style="list-style-type: none"> • Digitalisation of public services – potential exclusion of some residents with English as a Second Language or other access needs. • “Sense of belonging” may weaken with lack of physical presence and social mixing activity. <p>The effect of this is reduced satisfaction of residents and increased cost pressure in the future.</p>		<p>communities approach to issues such as hate crime.</p> <ul style="list-style-type: none"> • Further development of a resilient Communities approach within Walsall to increase work across communities in Walsall. • Demographic data used to inform the corporate planning process. • Increased focus on outcomes in the corporate plan as well as preventive activities to reduce burden on public sector e.g. homelessness reduction. • Developing measurable integration strategies with sustainable ESOL learning in the community. • Support for residents with the EU Settlement Scheme through partners • Further development of CAM Programme to improve accessibility for diverse groups of residents. • <u>The Walsall for All (WFA) board meets on a regular basis and has a funding plan in place. Its focus is on influencing and leadership rather than activity however it still has a vibrant group of organisations playing an active part in cohesion activities. The Chair is the Chief Executive of AAINA Community Hub and its membership is a cross section of statutory partners and independent organisations focused on building a Walsall for All. The approach. The focus of this group is community cohesion and they will be involved in the preparation of our new EDI strategy, which is currently being scoped.</u> <p><i>Assurances:</i></p> <p><i>“Substantial” assurance from internal audit work 2019/20 on Community Safety.</i></p>	4	1	4	Amber	<p>Resilient Communities approach within Walsall and increased partnership working. This continues to leverage the Walsall for All approach in its design. 2023/24 budget proposal allocating 150K ongoing support to the Walsall for All agenda. Walsall for All relaunch event in March 2023.</p> <p>2) Support CAM Programme facilitating feedback from diverse groups of residents on digitalisation and access.</p> <p>3) Support the WFA Pledge and Race Charter to foster sense of belonging.</p> <p><u>Partnership working is developing and delivering through the Safer Walsall Partnership.</u></p> <ul style="list-style-type: none"> • <u>Ensure community channels are refreshed and maintained for capturing all rather than the same voices.</u> • <u>Review of Community Tension Monitoring arrangements to support above actions and ensure corporate oversight. A new tensions monitoring approach is being trialled.</u> • <u>Independent Advisory Group (IAG) refresh with Police.</u> <p><u>Planning is underway for “Team Walsall” which will be an alliance of voluntary sector organisation’s including Walsall for all, some VCS anchor organisations and some smaller organisations. This work builds on the Resilient communities approach. This initiative is expected to further embed our resilient communities approach within Walsall and will positively impact cohesion</u></p>	<p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>October 2023</p> <p>October 2023</p> <p>Initial design meeting with communities – July 2023</p>
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August 2023

								<u>Short term funding has been identified for community Conversation initiative which is a pre-ESOL approach to new communities. This was successfully trialled through Walsall for All.</u>	
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Strategic Risk Register 2022/23



August 2023

No	Risk	Corporate Goal Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions	Deadline
	<i>Cause and Effect</i>								
7	<p>Financial Resilience of the council is impacted by the failure to achieve the savings required or manage demand pressures to enable a balanced budget and Medium-Term Financial Plan to be delivered.</p> <p>Demand and / or costs (individual / combined) increase beyond current forecasts, (including impact on economic growth and jobs, cost of materials, staffing shortfall, etc) in relation to:</p> <ul style="list-style-type: none"> • <i>Cost of living;</i> • <i>Demand increases in statutory services;</i> • <i>Unforeseen expenditure via a fine or extraordinary event;</i> • <i>Failure in budget management across multiple departments;</i> • <i>Financial risk / uncertainty of exit from the EU;</i> • <i>Lack of certainty around funding and loss of European funds;</i> <p><i>This would affect the financial resilience of the council by having to use reserves to balance the budget putting future stability and sustainability of finances at more risk. As reserves are set at a prudent level, replenishment would be required from services, adding to the financial pressure. Having to set an even more challenging savings programme in future years to address a lack of achievement from current plans, which would impact services and result in reputational damage. Any ongoing impact of the cost of living may also impact on this situation, for instance with the risk of aS114 in future years.</i></p>	<p>Communities</p> <p><u>S151 Officer</u></p>	<p>Existing Controls:</p> <ul style="list-style-type: none"> • Robust financial governance and financial planning and budget monitoring processes; • Corporate reporting of forecast demand and cost pressures in year and in budget setting includes forecast of cost of living impact (on contracts energy, pay inflation) and includes scenario planning; • Budget holders trained in budget responsibilities and supported by finance business partners who report to the statutory S151 Officer; • Financial risk assessment informs annual budget and level of recommended reserves and contingencies – Statutory Statement from S151 Officer including robustness of the budget estimates and adequacy of reserves; • Comprehensive service financial risk assessments in place as part of budget setting process; • Adequate corporate reserves and provisions to manage unforeseen financial issues in place and monitored regularly; • Service demand trackers in place in ASC and Children's to monitor, report on and manage volatile areas of demand (care packages, LAC, etc); • Regular reporting of financial performance to CMT, Cabinet and Scrutiny including progress against delivery of savings and alternative actions where delivery is delayed; • Review of CIPFA's Finance Management Code requirements shows that the council is fully or substantially compliant in most areas, with actions identified in relation to outstanding areas. • Strategic Investment Board oversees the use of capital resources and ensure robust investment decisions in place. • CEO/CFO/HOF Monthly meetings include review of financial performance and savings realisation; 	<p>Current Score</p> <p>4</p>	<p>4</p>	<p>16</p>	<p>Red</p> <p>↔</p>	<p>1) Continue to review savings delivery plans, demand and cost pressures in 2023/24 and impact on MTFO;</p> <p>2) Ensure robust delivery plans for all identified MTFO savings <u>and identification of mitigating in year actions to address delays;</u></p> <p>3) Review impact analysis of expected funding announcements.</p> <p>4) <u>Continue to develop MTFO and Budget Setting process and Proud Transformation to deliver a balanced 4 year budget, utilising intelligence and benchmarking data to inform opportunities for cost reduction / efficiency saving approaches.</u></p> <p>3)5) <u>Continue to lobby for ongoing multi-year funding Settlements which address the real cost of social care provision.</u></p>	<p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>
				<p>Target Score</p> <p>3</p>	<p>3</p>	<p>9</p>	<p>Amber</p>		

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No	Risk <i>Cause and Effect</i>	Corporate Goal Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions	Deadline
			<ul style="list-style-type: none"> • WMCA Constitution which sets out voting rights covering approval of WMCA budgets and steps to take if not approved. • Scheduled CEX and Leader briefings scheduled so significant concerns are flagged at WMCA Board being the ultimate decision making body. • See also Risk 2 for internal controls and related assurances in relation to Proud continuous improvement - this includes programme governance and reporting, including regular review of benefit savings delivery, aligned to the corporate financial reporting processes. <p>Assurances:</p> <ul style="list-style-type: none"> • Regular review of MTFE and MTFO and regular review of savings tracker by Finance, CMT and Cabinet; • Annual Internal Audit of core financial systems; • External Audit conclusion on the council's arrangements for securing value for money and audit of the annual accounts. • Corporate financial reporting includes delivery of benefit savings and requirement to address any financial saving shortfalls is embedded across the council to ensure council outturns within budget despite in year financial and demand pressures; Evidenced by Outturn 2022/23 and previous years all within budget with unqualified audit. 						

Strategic Risk Register 2022/23



August 2023

No.	Risk <i>Cause and Effect</i>	Corporate Goal Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions	Deadline
8	Risk of Cyber Security attacks. With the council's increasing reliance on digital service delivery if the council is affected by a cyber-attack which would necessitate IT services being withdrawn whilst remedial work is undertaken to restore systems, then it could have a detrimental impact on our ability to deliver some or all services including : support for vulnerable adults and children, ability to contact the council, customer self-serve capability via web and contact centre, impact on financial income and council reputation.	ALL Executive Director Resources and Transformation	Existing Controls: A multi layered approach: <ul style="list-style-type: none"> PSN compliance (This regime covers areas such as keeping software up to date). ICT security roadmap, the engagement with Microsoft has concluded and a Cyber Security team has recently been put in place dedicated to improving our security along the guidelines recommended by Microsoft and the National Cyber Security Council (NCSC). Training and skills transfer to ICT staff in managing cyber. Regular external and internal penetration testing. Continue receiving alerts from external sources related to Security. Examples of these sources are Microsoft, Janet (Internet service provider), NCSC, WARP and Government Security group. Staff training including mandatory IG accreditation and learning from Phishing simulation test. Regular updates and reminders to staff through Inside Walsall. Banner alerts inside emails to remind staff not to open unsolicited attachments. Multi-factor authentication enabled in all user accounts, service accounts, test accounts and guest accounts. Back-up and restore regime is appropriate Microsoft Best Practice recommendations are regularly reviewed and applied. Access to specialist Technical Advisor via Microsoft Support Agreement Cyber Security Training is an annual mandatory requirement (alongside IG Training) Phishing Simulation exercises carried out on an ad-hoc basis Simulated attacks using NCSC exercises Rubrik Back-up for M365 products provides immutable storage and virus checking at point of back-up Assurances: <ul style="list-style-type: none"> Continuous audits via Internal Audit; Quarterly Cyber Security Report presented to CMT; Quarterly penetration testing by external specialists. 	Current Score			Red ↔	1) Back-up and restore regime meets NCSC and Microsoft Best Practice recommendations. 2) Access to specialist Technical Advisor via Microsoft Support Agreement. 3) Complete the implementation of Rubrik Cloud Back Up Service for MS-0365 on-premise Data Centre and Azure Data Centre . 4) Complete actions detailed in Cyber Security Treatment Plan. 5) Complete first draft of Cyber Security Response Framework. 6) Cyber Attack Simulation Exercise planned.	Ongoing In progress June December 2023 December 2023 September 2023 23 July 2023
				5	3	15			

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No.	Risk <i>Cause and Effect</i>	Corporate Goal Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions	Deadline		
9	<p>Threats in relation to failing to comply with the legal obligations and duties of the UK General Data Protection Regulations, the Data Protection Act 2018 and relevant legislative requirements.</p> <ul style="list-style-type: none"> The inappropriate and or unlawful collection, processing, sharing and retention of information with regards to: <ul style="list-style-type: none"> New processing or sharing arrangements or systems implementation without assurances or risk assessments Inappropriate or non-compliant records management practices Inappropriate sharing of information through new ways of working The loss, disclosure or unavailability of information through cyber attacks The excessive collection, use, retention or sharing of data Failing to apply adequate and or appropriate technical or organisational security controls Failing to comply with the principles in law Failing to share lessons learnt Failing to provide sufficient resources to comply with the legal obligations Failing to provide sufficient funding to enable appropriate levels of security, accountability, compliance and assurance Failing to comply with recommendations made by the DPO/SRO where risks have been identified Failing to comply with or abide by policy, procedures, standards and or guidance implemented to support our compliance requirements <p><i>The effect would be a breach of the regulations and or legislation which may result in loss of reputation, loss of jobs, monetary penalties up to £17m or 4% of turnover and the potential for criminal prosecution.</i></p>	ALL Executive Director Resources and Transformation	<p>Existing Controls:</p> <ul style="list-style-type: none"> Regular review and reporting for accountability through the Forum for Information Governance and Assurance which reports upwards through Information Champions to DMT's to CMT. Compliance of the Public Sector Network certification process for information security Compliance and submission of the annual Data Security and Protection Toolkit. Registration with the ICO Regular news, awareness and guidance shared with all staff in relation to lessons learnt and changing ways of working. Embedded requirements on Information Champions to share the outcomes and reports from FIGA throughout directorates Embedded requirements on Information Champions to support the management and investigation of data breaches in a timely manner for compliance of reporting obligations. Updated and embedded standards, procedures and guidance within the IG framework and policy. Transparent Data Protection Processes and Privacy Notices are published Artificial Intelligence – Guidance Briefing being produced for staff and members. <p>Assurances: <i>Reporting and monitoring of our compliance obligations, duties and requirements are reported and actioned accordingly through the FIGA group, IG team and Information Champions. Utilising the ability to communicate effectively any key requirements, changes and awareness at all levels.</i></p> <p><i>Senior level attendance by the DPO at DMT and CMT meetings as required for further sharing of lessons learnt, identified risks and increased awareness to ensure accountability.</i></p> <p><i>Internal Audit through Mazars, and additional assurance including the completion of national</i></p>	Current Score		4	4	16	Red ↔	<p>1) We continue to raise awareness of any identified risks throughout the council.</p> <p>2) All staff are required to complete the annual mandatory training which contains the key requirements.</p>	FIGA Meets regularly and is represented by Information Champions This is Mandated between 1 st of April and 31 st of Dec yearly.
				3	3	9	Amber	<p>3) We continue to support services with new initiatives and ways of working to ensure information and data is captured, held and processed in keeping with DPA legislation.</p> <p>4) Procedures, standards and guidance continues to be implemented and updated through FIGA.</p> <p>5) The IG Team are working on electronic document records management system which looks to resolve current manual records noncompliance issues.</p> <p>6) Continued and ongoing compliance monitoring looks to ensure appropriate levels of awareness is raised at the most appropriate senior management levels.</p> <p>7) Regular attendance at CMT to ensure key messages and awareness is shared.</p>	Engagement with ICT and Technical Design Authority which meets weekly Information Governance Policy reviewed annually Business Case developed Q4 2022/23 FIGA monthly Quarterly attendance at CMT with report on Cyber		

Strategic Risk Register 2022/23



August 2023

No.	Risk <i>Cause and Effect</i>	Corporate Goal Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions	Deadline			
10	<p>Business Continuity Management</p> <p>Failure to deliver key services in the event of significant business interruption, including services delivered by contractors and partners.</p> <p>Potential causes include loss of:</p> <ul style="list-style-type: none"> key staff (skills, knowledge and/or capacity); telephone systems; ICT system; buildings; and utilities. <p>Potential effects include failure to:</p> <ul style="list-style-type: none"> provide essential services to vulnerable residents; maintain essential infrastructure; pay staff, suppliers, and contractors; communicate internally and/or externally; and meet constitutional requirements. 	<p>ALL</p> <p>Executive Director Economy, Environment & Communities</p>	<p>Existing Controls:</p> <p>The Council's business continuity strategy includes the following:</p> <ul style="list-style-type: none"> A Business Continuity section should be included in all Service's 'Programmes of Work' to ensure that their Business Continuity Plans are reviewed on a biannual basis. Implementation of Business Continuity Management within Walsall Council is being led by the Resilience Team. A detailed project monitoring sheet will be maintained and updated by the Resilience Team for each Directorate. A programme of awareness, validation and audit of all Business Continuity Plans exists to verify the arrangements and review the assumptions upon which the BCP was written. Each Team/Service within will be required to maintain a Business Continuity Plan, including a Business Impact Assessment to identify and prioritise their functions, back up locations and Action Cards detailing required resources. A system is in place to record BCP activations and lessons learned. <u>Revised BCPs include communications plans.</u> <p>Further details can be found here: http://int.walsall.gov.uk/Service_information/Resilience_Unit/Business_Continuity_Management</p> <p><i>Assurances:</i> The strategy includes a programme of awareness, validation and audit of all BCPs to verify the arrangements and review the assumptions upon which the BCP was written.</p> <p><i>An internal audit was completed in March 2022. The key findings were moderate assurance on system design and limited assurance on effective controls. There are 54 outstanding -medium priority recommendations which are listed in the further actions section.</i></p>	Current Score			4	3	12	Red ↔	<p>1) Review and update of business continuity strategy. New approach will reduce the number of individual plans from 92 to around 15. <u>This work continues following on from a National Power Outage exercise and Walsall focused equivalent. Due to top staffing and leave this has been delayed.</u></p> <p>2) Updating of business impact assessments and recovery plans, in line with revised strategy (one per director). <u>UPDATE: The BC area of work has now been split between the two EPOs within the team (previously one led with this) Service area BIA are still being worked upon. Once they have been completed the Directorate BIA can be produced</u></p> <p>3) Exercising of key plans (prioritised by business impact assessments).</p>	<p><u>March December 2023</u></p> <p><u>March 2023 February 2024</u></p> <p><u>July 2023 May 2024</u></p>
4	2	8	Amber									

Strategic Risk Register 2022/23



August 2023

No.	Risk <i>Cause and Effect</i>	Corporate Goal Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions	Deadline
11	Climate Change Failure to achieve climate change objectives <ul style="list-style-type: none"> Walsall Council to be net-zero by 2041 WMCA – Net zero carbon economy by 2041 Black Country – Industrial decarbonisation by 2040 	ALL Executive Director Economy, Environment & Communities	Existing Controls: The council revised its climate change ambitions in October 2022. It had been working towards carbon net zero by 2050. The new target is for the borough to be net-zero by 2041. Therefore, a new action plan is required. The current five-year action plan identifies actions up to 2025 and focussed on Scope 1 (direct emissions from owned/controlled sources) and Scope 2 emissions (indirect emissions from the generation of purchase energy) under the themes of: <ul style="list-style-type: none"> Strategy Energy Waste & Consumption Transport Nature Resilience & Adaptation All Cabinet and CMT reports to reference Climate Change implications. Note: Scope 3 – other indirect emissions from within the council supply chain are not included in the current action plan but will be required to achieve the new target. <u>An appointment of a Climate Change Manager has been made to develop the new action plan.</u> <u>A Climate and Environment forum has been formed as part of the Walsall Proud Partnership.</u> Assurances: <u>An Internal Audit was carried out prior to the change in target outlined above. This audit report (issued March 2023) assessed the:</u> <ul style="list-style-type: none"> <u>'Adequacy of System Design' as offering 'Limited Assurance.'</u> <u>'Effectiveness of Operating Controls' as offering 'Moderate Assurance.'</u> <u>Actions to address the 'Limited Assurance' finding are contained within the 'Further Actions' Section.</u>	Current Score			Red Amber ↑	<u>The Internal Audit report made a number of recommendations. The key recommendations align with the following planned actions:</u> <ul style="list-style-type: none"> <u>Recruit two Net Zero Project Officers to assist in the delivery of the Climate Emergency Action Plan.</u> <u>A revised Climate Change Action Plan / Strategy is to be drafted.</u> <u>A baseline CO2 emissions report is to be completed, and an annual report will document progress.</u> <u>Annual 'Climate Emergency Action Plan' report to Cabinet and Economy and Environment Overview and Scrutiny Committee.</u> <u>A Climate and Environment forum has been formed as part of the Walsall Proud Partnership – a terms of reference for this Climate and Environment Forum group is currently being developed. This group will be key in developing the borough wide action plan, along with wider community consultation.</u> Key actions in the current plan will continue to be implemented to deliver Net Zero 2041 and include: <ul style="list-style-type: none"> <u>Working towards Net Zero through the Strategic Asset Plan (reducing energy consumption / producing our own energy)</u> <u>Replacing streetlights with LED by December 2024.</u> 	
				4	42	168			

Strategic Risk Register 2022/23



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No.	Risk <i>Cause and Effect</i>	Corporate Goal Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions	Deadline
								<ul style="list-style-type: none"> • <u>Waste strategy to reducing waste and increase recycling (new HWRC by 2025).</u> • <u>Decarbonisation of the Council fleet by 2030.</u> • <u>Tree planting – one for every household by 2030.</u> • <u>Sustainable design and future planning policies (housing and transport).</u> <p>Key actions in current plan include:</p> <ul style="list-style-type: none"> • Working towards Net Zero through the Strategic Asset Plan (reducing energy consumption / producing our own energy) • Replacing streetlights with LED by December 2024. • Waste strategy to reducing waste and increase recycling (new HWRC by 2025). • Decarbonisation of the Council fleet by 2030. • Tree planting – one for every resident by 2030. • Sustainable design and future planning policies (housing and transport). <p>Annual 'Climate Emergency Action Plan' report to Cabinet and Economy and Environment Overview and Scrutiny Committee.</p> <p>A baseline CO₂ emissions report has been completed, and an annual report will document progress.</p>	<p>October 2023</p> <p>October 2023</p> <p>Complete</p> <p>April 2023</p>

Strategic Risk Register 2022/23



August 2023

No.	Risk <i>Cause and Effect</i>	Corporate Goal Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions	Deadline
								A partnership forum has been formed with Walsall Proud Partners. The 2023/24 budget includes funding for dedicated climate change officers to develop the new action plan.	

Strategic Risk Register 2022/23



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No.	Risk Cause and Effect	Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions/Planned Mitigations	Deadline
12 - NEW	Significant Failure of Governance – a breakdown in governance to merit formal external intervention either from auditors or central government.	MO and S151 Officer	<p>Annual completion of Annual Governance Statement (AGS) statement, presented by Leader and Chief Executive to Audit Committee and reviewed by External Audit.</p> <p>External Audit report on governance arrangements as part of annual VFM assessment and Annual Report.</p> <p>Annual review of constitution. Decision-making processes, with clear schemes of delegation, are transparent, regularly reviewed, clearly followed and understood, enabling decision-makers to be held to account effectively. Evidence of the decisions following good public law decision making principles (reasonableness, proportionality, fairness, etc.).</p> <p>Review of governance reports from other authorities undertaken and reported to CMT.</p> <p>Review of Grant Thorntons second report on Lessons from Public Interest Reports and other Interventions, and the Council’s Corporate Peer Challenge (CPC) Report and action plan reported to Audit Committee.</p> <p>Whistleblowing policy and monitoring of whistleblowing claims.</p> <p>Quarterly meeting of CEO, CFO and MO. Statutory officers work effectively together and have a voice for key decisions.</p> <p>Regular meetings between CEO and Political Group Leaders.</p> <p>Annual monitoring report of elected member complaints considered by Standards Committee.</p> <p>Quarterly meetings with External Auditors and CEO, CFO, MO.</p> <p>2 weekly meetings between Head of Internal Audit and Head of Finance and Assurance (HOF&A). Quarterly meetings with Internal Auditors and CFO and HOF&A.</p>	Current Score			Amber N/A - New	<p>AGS process going forwards to include more information regarding the culture and behaviour of the organisation.</p> <p>Review and update whistleblowing policy.</p> <p>Ensure clear succession planning for key statutory officer posts. Use workforce planning and development to ensure posts are permanently recruited to.</p> <p>Review of scrutiny function following BVI Thurrock, and the training given to members to support the function.</p> <p>Review of Councillor training and development programme.</p>	Ongoing
				4	2	8			
				3	2	6	Amber		

Risk Management Quick Guide

Current (C) – with the current controls/mitigations

Target (T) – the score that brings the rating to within appetite for the risk.

Direction of Travel (Trend):

↓ Risk score reduced ⇔ no change to risk score ↑ risk score increased

LIKELIHOOD

Risk appetite level – Risks above this level will need particular resources and focus

I M P A C T	5 Catastrophic			Risk 8		
	4 Severe		Risks 6, 12 (New)	Risks 2, 3, 10	Risks 1, 7, 9, 11	
	3 Material		Risk 5	Risks 4a, 4b		
	2 Minor					
	1 Negligible					
			1 Rare	2 Unlikely	3 Possible	4 Probable

Risk acceptance level (activity below which attracts minimum effort and resources)

Risk Ratings: 1 – 4 = low risk (Green) / 4 – 10 = medium risk (Amber) / 12 – 25 – high risk (Red)

Likelihood and Impact guide.

Likelihood			Impact		
Score 1-5	% chance	Time Frequency	Score 1-5	Disruption to Services and/or Residents affected or aware	Budget
1 Rare	< 10%	Rare occurrence	1 Negligible	Minor disruption to services <i>Up to 5%</i>	>1%
2 Unlikely	10 - 30%	Once in 5 years	2 Minor	1-2 weeks <i>Up to 10%</i>	>5%
3 Possible	30-60%	Once 2 years	3 Material	Up to one month <i>Up to 25%</i>	5-10%
4 Probable	60-90%	Once a year	4 Severe	1 – 3 month <i>Up to 50%</i>	10-20%
5 Almost Certain	> 90%	within 6 months	5 Catastrophic	Over 3 month <i>Over 50%</i>	20%

PREVIOUS 4B – @ AT MARCH 2023

No.	Risk	Corporate Goal Lead	Existing Controls and Assurances	Impact	Likelihood	Risk score	Status & Trend	Further Actions	Deadline
4b	<p><i>Cause and Effect</i></p> <p>Adult Social Care</p> <p>The risk of being unable to maintain service standards to support the most vulnerable in the Borough continues to provide some challenges at this time due to increased demand on adult social care.</p> <p>Safeguarding demand continues to be prioritised and referrals screened and progressed to a safeguarding enquiry where appropriate.</p> <p>Immediate risk management plans are put into place where possible, with the aim to reduce risk and immediate visits scheduled where the risk is to be considered high or further information is needed to be obtained to ensure the welfare of the citizen.</p> <p>Whilst the numbers of safeguarding referrals remains in line with 2021/22, the complexity of situations is apparent. There is an increase of referrals relating to self-neglect and domestic abuse and these are areas of focus and key priority for the safeguarding partnership.</p> <p>ASC continue to work within the statutory duties outlined in the Care Act 2014, and other legislative frameworks including the Mental Capacity Act, Mental Health Act and Human Rights Act.</p>	<p>People</p> <p>Executive Director Adult Social Care</p>	<p>Existing Controls</p> <ul style="list-style-type: none"> Ongoing focus, training, development and audit to ensure staff are developing safe, effective practice Active engagement and partnership working within the safeguarding partnership. Development of strategy, action & delivery plans to respond to the changing needs of the Borough Staff are evidencing embedding of strengths-based practice and defensible decision making which is evident through internal and multi-agency adult activity. Recent independent audit of 100 case files concluded – 70% of cases are good or excellent with learning identified from the audit. Ongoing monitoring of demand and capacity to ensure this activity is prioritised and resourced appropriately. Additional agency staff supporting access team following an increase in safeguarding concerns being raised. Launch of new risk enablement tools April 2020 to evidence decision making rationale in response to safeguarding concerns. Clear learning and development offer in place for all staff to ensure staff are upskilled and able to meet the needs of the citizens and achieve best practice outcomes. Safeguarding is a key priority and statutory duty within the Care Act for the local authority. <p><i>Assurances:</i></p> <ul style="list-style-type: none"> ✓ Ongoing programme of internal and multi-agency audits in place to provide assurance and inform action plans. ✓ Staff supervision and management oversight of case work. ✓ Oversight from the safeguarding partnership through forums such as practice quality assurance meeting. ✓ Reporting to the quality and safety committee safeguarding activity and actions to offer mitigation where appropriate. 	<p align="center">Current Score</p> <p align="center">4 4 16</p> <p align="center">Target Score</p> <p align="center">4 2 8</p>	<p>Red</p> <p>↔</p>	<p>Amber</p>	<p>We continue to work in partnership with the Walsall safer partnership to address challenges such as exploitation, violence reduction and domestic abuse. A new post of exploitation SW is being created to support this agenda.</p> <p>Business case completed to extend additional resources in the Access team to tackle backlogs and reduce risk.</p> <p>A programme of transformation will consider the business needs through the CAM workstream, but also look to how we can strengthen adult safeguarding.</p> <p>Information sharing systems (MAST/Graphnet) continue to be developed which would enhance existing systems.</p>	<p>“Front door” new arrangements to be proposed by Summer 2023</p> <p>MAST – TBC, some slippage due to partner agencies.</p>	

No.	Risk <i>Cause and Effect</i>	Corporate Goal Lead	Existing Controls and <i>Assurances</i>	Impact	Likeli- hood	Risk score	Status & Trend	Further Actions	Deadline
			✓ External case file audit commissioned and completed - to be presented to the Performance and Finance committee.						