

City and County of Swansea

Notice of Meeting

You are invited to attend a Meeting of the

Governance & Audit Committee

At: Multi-Location Meeting - Gloucester Room, Guildhall / MS Teams

On: Wednesday, 28 February 2024

Time: 2.00 pm

Chair: Paula O'Connor

Membership:

Councillors: A Davis, P R Hood-Williams, J W Jones, M B Lewis, M W Locke,

S Pritchard, L V Walton and T M White

Lay Member(s): Gordon Anderson, Julie Davies and David Roberts

Watch Online: http://tiny.cc/GaA282

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3	Minutes. To approve & sign the Minutes of the previous meeting(s) as a correct record.	1 - 5
4	Part A - Reports For Discussion Internal Audit Monitoring Report - Quarter 3 - 2023/24. (Nick Davies)	6 - 31
5	Place: Internal Control Environment 2023/24. (Mark Wade)	32 - 46
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8	Part B - Reports For Information. Internal Audit Annual Plan Methodology Report 2024/25. (Nick Davies)	64 - 113

9	Annual Complaints & Compliments Reports 2022-23. (Sarah Lackenby)	114 - 145
10	Corporate Risk Overview - Quarter 3 2023/24. (Richard Rowlands)	146 - 175
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Next Meeting: Thursday, 14 March 2024 at 2.00 pm

Huw Gans

Huw Evans Head of Democratic Services Thursday, 22 February 2024

Contact: Democratic Services: - 636923



Agenda Item 3



City and County of Swansea

Minutes of the Governance & Audit Committee

Multi-Location Meeting - Gloucester Room, Guildhall / MS Teams

Wednesday, 17 January 2024 at 2.00 pm

Present: Paula O'Connor (Chair) Presided

Councillor(s)Councillor(s)Councillor(s)A DavisP R Hood-WilliamsM B LewisM W LockeS PritchardL V Walton

T M White

Lay Member(s)

Gordon Anderson Julie Davies

David Roberts

Officer(s)

Ness Young Director of Corporate Services

Sarah Lackenby Head of Digital and Customer Services

Rachael Davies Head of HR & Service Centre

Stephen Holland Principal Solicitor Nick Davies Principal Auditor

Michelle Davies Cash Management & Accounts Receivable Manager

Jeremy Parkhouse Democratic Services Officer

Also Present

Councillor R C Stewart Leader of the Council

Apologies for Absence

Councillor J W Jones and Gillian Gillett

63 Disclosures of Personal and Prejudicial Interests.

In accordance with the Code of Conduct adopted by the City and County of Swansea, no interests were declared.

64 Minutes.

Resolved that the Minutes of the previous meeting(s) of the Governance & Audit Committee were approved as a correct record.

65 Fundamental Audits 2022/23 Recommendation Tracker.

Nick Davies, Principal Auditor presented a report that provided a summary of the recommendations made following the fundamental audits in 2022/23 and identified whether the agreed recommendations had been implemented.

Of the 51 recommendations reported and agreed, 27 had been fully implemented, 7 partly implemented, 7 not implemented and 10 were not yet due for implementation. Ignoring the recommendations which were not yet due for implementation, the percentage of recommendations implemented by 30 September 2023 was 66%.

Appendix 1 showed that for each fundamental audit, the number of recommendations made following the 2022/23 audits and whether the recommendations had been implemented, partly implemented, not implemented or were not yet due.

In addition, Appendices 2 and 3 outlined that most of the recommendations that had either been partly implemented or had not been implemented related to the Accounts Receivable and Accounts Payable audits. The Accounts Receivable audit continued to be completed on an annual basis. The Accounts Payable audit was audited in full every two years but was now also subject to a mid-cycle follow-up review. The implementation of the outstanding recommendations would be reviewed as part of the 2023/24 audits. The remaining outstanding recommendations relating to the other fundamental audits would be followed-up when the audits were next completed.

The Chair sought assurance that the recommendations not implemented were being referred to Cabinet / Corporate Management Team / Monthly Performance Reviews and noted that disappointingly, some remained outstanding. The Principal Auditor confirmed that as far as he was aware the referrals were still being forwarded and added that the report presented today was as at the 30 September 2023 and some of the recommendations could now be implemented. He added that anything outstanding would be followed up during future reviews.

Discussions followed regarding: -

- Ensuring that recommendations partly or not implemented in Accounts
 Receivable / Accounts Payable which had their deadlines extended, were not
 missed and considering introducing an alternative classification for these items.
 The Principal Auditor would highlight this to the Chief Auditor.
- Recovery of arrears Delays with the recruitment process internally due to staff shortages, which had been addressed and staff had been appointed before Christmas 2023.
- The possibility of bringing forward the deadline date of September 2024 to implement outstanding recommendations as the recruitment difficulties had now been addressed. It was confirmed that the recommendations would be followed up before the end of the current financial year.

Resolved that the contents of the report be noted.

Implementation of Accounts Receivable Internal Audit Service's (IAS) Follow Up Review Recommendations.

Michelle Davies, Cash Management and Accounts Receivable Manager presented a report which provided provide an update on the implementation of the Internal Audit Service (IAS) review of the Accounts Receivable function.

It was outlined that an Internal Audit follow up review of the Accounts Receivable (AR) was carried out in Quarter 1 2023 and the report was issued in March 2023. An assurance level of Moderate was again given. Details were provided on the reasons and progress since June 2023 to date. Appendix A provided the Action Plan progress.

It was explained that at the end of December 2023, eight of the fourteen previously agreed actions had been completed and details were listed, along with the progress of three other high / medium risk recommendations. It was added that the Accounts Receivable Team was aiming to implement the high / medium risk recommendations listed in paragraph 2.3 in full by September 2024 at the latest, whilst recognising that there would always be a level of overdue debt. It was noted that additional staff resources may be required to achieve this and the position would be kept under review.

A monthly breakdown of the Council's total outstanding debt profile since the previous Committee update in June 2023 was provided, along with in in-depth breakdown of the latest debt position.

The Committee were also updated on the remaining challenges for the service area.

Ness Young, Director of Corporate Services noted that Accounts Receivable was a small team who were working through completing the outstanding recommendations. A new member of staff had been appointed to exclusively deal with debt recovery, particularly the aged debt and Paralegals were currently being trained to improve the debt recovery process. The staffing situation would be kept under review in order to implement the outstanding recommendations by the September 2024 deadline.

The Committee discussed the following: -

- The timescales involved with debt recovery, including the manual procedures
 officers had to undertake, which were not ideal. The focus upon the recovery of
 higher debts and the timescales involved. The profile of debtors in respect of
 longstanding debts, which included small businesses.
- Concern that the position remained the same as previous years, the welcome introduction of new staff to address the outstanding debt and the financial position of the Council, which needed a quicker, more robust debt recovery process.
- Recognising the pressure on the Accounts Receivable Team and the input of additional resources to address the issue of the outstanding debt.
- Disposal of electronic and physical records within the necessary timescales in order to comply with GDPR and assurances that this was being addressed. It was confirmed that the majority of records were electronic, they had to be

retained for 6 years plus the current year and that resources would be allocated to destroy / delete the records within the timescales required.

- Credit facilities being offered in appropriate circumstances, departments obtaining up-front payment for services to minimize the debts and ensuring service departments were taking debt recovery seriously in order to reduce the workload of Accounts Receivable.
- Monthly meetings held with departments regarding debt recovery, particularly aged debts and addressing problems at both ends of the process.
- The challenging impact of the transfer to Oracle Fusion on the team, the
 functional problems in relation to debt recovery, particularly VAT coding and the
 negative impact upon team morale. It was confirmed that Oracle was less flexible
 than the previous system and change requests had been forwarded but it caused
 a lot of additional work for the team.
- How changes to the Oracle system could be implemented locally but the functionality regarding the required Accounts Receivable changes would mean changing the Oracle software global system.
- The size of the Oracle system across the Council and how well it was working overall across the Council.
- How the Council was addressing local issues and highlighting them to Oracle.
- Appreciating the frustrations faced by the team and the open responses provided by the manager.
- The relatively low amount of people involved in the UK Government's Debt Respite Scheme (Breathing Space), noting that figures had doubled this year and that people were ring-fenced for 60 days as part of the scheme, dependent upon the debt involved.
- The loss of interest income to the Council due to the amount of outstanding debts and the need to address debt recovery in a more stringent way.

Councillor R C Stewart, Leader of the Council recognised the effort and improvements that had taken place and highlighted the real challenges faced by implementing the complex Oracle system. He added that the Council were working hard to implement the additional change requests submitted by the Authority and noted that the Council faced revenue issues due to the lack of funding and not as a result of outstanding debts.

The Chair echoed the comments made and recognised the work completed, particularly the achievement of improving the outstanding debt in 2022 where 90% in volume and 98% in value of all debts were recovered. She added that she hoped that the additional resource, the involvement of senior people within the Authority and ongoing discussions with Oracle to make the necessary adjustments, would drive change.

In summary, the Chair requested that the Head of Digital and Customer Services sought priority action from Oracle for the areas that required enhancement that would be relative to all Oracle clients, which would also provide the biggest impact to assist the processes within the Team, for example VAT input becoming a mandated field.

Resolved that the contents of the report be noted.

67 Audit Wales Digital Strategy Review.

Sarah Lackenby, Head of Digital and Customer Services presented 'for information' the Audit Wales review of the Digital Strategy 2023-28.

It was explained that Audit Wales had undertaken a review of the digital strategies of the 22 principal Councils in Wales. The review sought to provide assurance that Councils' digital strategies would help to deliver well-being objectives, were in accordance with the sustainable development principle, are meeting people's needs, and delivering better outcomes. This work also built on the 'springing forward' review undertaken during 2021-22.

The Audit Wales review, including its conclusions, was provided at Appendix A and its recommendation was provided at Appendix B.

The Chair stated that she had gained assurance from the discussions regarding the report which occurred at the Service Improvement, Regeneration and Finance Scrutiny Performance Panel on 12 December 2023. She added that the Panel had agreed to an annual review of the Strategy, which was scheduled for March 2024. Further assurance would be gained from the Chair of Scrutiny providing an update report to the Committee during the summer months.

It was noted that Swansea Bay University Health Board (SBUHB) had recently won an award for its digital strategy in respect of the patients' journey from admission to discharge. It was added that to support partnership working, the Council should look at the discharge side of the strategy, particularly the move from hospital into community care and examine whether some innovative work could assist the process.

It was confirmed that the Social Services Department were already looking at the issue and that it would be discussed regionally at the West Glamorgan Regional Partnership Board where the Council works collaboratively with SBUHB.

David Roberts, Lay Member would forward a link to the SBUHB to the Democratic Services Officer for circulation to the Committee.

68 Governance & Audit Committee Action Tracker Report.

The Governance & Audit Committee Action Tracker was reported 'for information'.

The Chair noted that Committee training dates were to be confirmed. The Democratic Services Officer confirmed that they would be organised in the new Municipal year, once the Council diary for 2024/25 was finalised.

69 Governance & Audit Committee Work Plan.

The Governance & Audit Committee Work Plan was reported 'for information'.

The meeting ended at 3.05 pm

Chair

Agenda Item 4



Report of the Chief Auditor

Governance & Audit Committee – 28 February 2024

Internal Audit Monitoring Report Quarter 3 – 2023/24

Purpose: This report shows the audits finalised and any

other work undertaken by the Internal Audit Section during the period 1 October 2023 to 31

December 2023.

Policy Framework: None.

Consultation: Legal, Finance, Access to Services.

Recommendation: It is recommended that the contents of the report

be discussed and noted.

Report Author: Simon Cockings

Finance Officer: Ben Smith

Legal Officer: Stephen Holland

Access to Services

Officer:

Rhian Millar

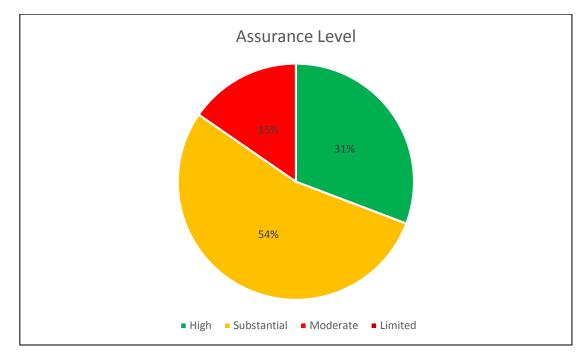
1. Introduction

- 1.1 The Internal Audit Annual Plan 2023/24 was approved by the Governance & Audit Committee on 12 April 2023. This is the third quarterly monitoring report to be presented to allow the Committee to review and comment upon the progress of the Internal Audit Section in achieving the Annual Plan.
- 1.2 This report shows the audits finalised in the period 1 October 2023 to 31 December 2023.

2. Audits Finalised 1 October 2023 to 31 December 2023

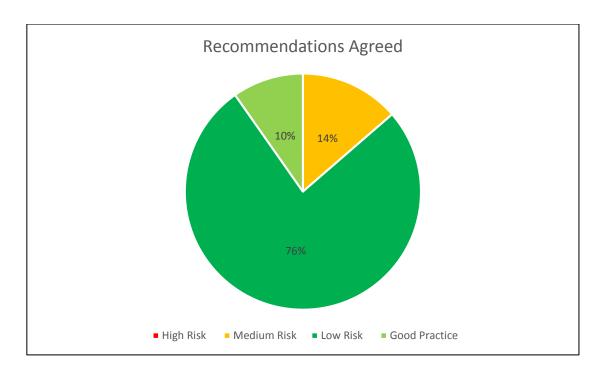
- 2.1 A total of 13 audits were finalised during the quarter. The audits finalised are listed in Appendix 1 which also shows the level of assurance awarded at the end of the audit and the number of recommendations made and agreed. Appendix 2 provides a summary of the scope of the reviews finalised during the period.
- 2.2 An analysis of the assurance levels of the audits finalised is shown in the following table and chart:

Assurance Level	High	Substantial	Moderate	Limited	Total
Number	4	7	2	0	13



- 2.3 A total of 154 audit recommendations were made and management agreed to implement all of the recommendations made. i.e., 100% of the recommendations made were accepted against a target of 95%.
- 2.4 All recommendations made are classified as High Risk, Medium Risk, Low Risk or Good Practice. An analysis of the recommendations agreed during the quarter is shown in the following table and chart:

Risk	High	Medium	Low	Good	Total
Level	Risk	Risk	Risk	Practice	
Number	0	21	118	15	154



- 2.5 The Audit Plan is a 'living' document which is likely to change during the year due to emerging risks or new priorities. However, it is important that the Committee can monitor progress against the plan approved at the start of the year. To achieve this, Appendix 3 shows each audit included in the Plan approved by Committee on the 12 April 2023 and identifies the position of each audit on 31 December 2023.
- 2.6 Staff sickness in the Internal Audit Team has continued to be significant during the third quarter, with a total of 34 days sickness absence recorded. Cumulative sickness absence to the end of quarter three totalled 138 days. At the time of compiling this report, one member of staff remains absent due to long-term sickness and they continue to be supported by Human Resources.
- 2.7 As noted in the previous monitoring report, one further part-time member of staff that had been absent due to long-term sickness for over a year left the council in late September. The part-time post was advertised in October but unfortunately the recruitment campaign was unsuccessful. As a result, a new full-time Trainee Auditor post has been created in the team and we hope to be able to commence recruitment for this post imminently. As a result of the vacancies noted above, 30 days were lost in quarter three, with a cumulative total of 92 days being lost in the year to date due to vacant posts. Further days will also be lost due to the vacant post in quarter four.
- 2.8 The Internal Audit Annual Plan for 2023/24 contains 116 separate audit activities. As at 31 December 2023, 54 audit activities (46%) had been completed, with one additional activity (1%) substantially complete with the audit report issued as draft. As a result, 55 audit activities have been completed to at least draft report stage (47%). An additional 30 activities were in progress at the end of the quarter (26%). As a result,

approximately 73% of the audit activities included in the 2023/24 Audit Plan had either completed or were in progress. A copy of the plan showing the status of the activities as at the 31 December 2023 can be found in Appendix 3.

- Two audit reports issued with Moderate assurance level were issued in the quarter as noted in paragraph 2.2 above and as shown in appendix 1 and
 The two audits that received audit reports with a moderate level of assurance were Crwys Primary School and Trading Standards Division.
- 2.10 Follow-up audits have been scheduled to revisit Crwys Primary School in quarter four 2023/24 and Trading Standards in quarter one 2024/25 to review the progress that has been made in implementing the recommendations made. The results of the follow-up audits will be reported back to the committee in a future monitoring report.

3 Changes to the reporting of Moderate Audit Reports

- 3.1 In an attempt to make the volume of material presented to the Governance and Audit Committee more manageable and focused, the Chief Auditor in consultation with the Corporate Management Team proposes amendments to the way information relating to moderate assurance audit reports is presented to the committee.
- 3.2 The previous process is summarised below:
 - i) A summary of the issues resulting in High and Medium risk recommendations was included in the quarterly internal audit monitoring reports.
 - ii) Representatives from the service area were required to attend the committee and present an update report outlining progress made in addressing the recommendations. Note that in most cases, the update reports presented a positive outcome with appropriate action being taken and no further intervention or oversight being required by the committee.
 - iii) Internal Audit undertake a full follow-up review within 3-6 months of the audit and report the findings back to the committee via the quarterly monitoring reports.
- 3.3 The proposed new process is summarised below:
 - i) Committee are made aware when a moderate audit report has been issued via the quarterly monitoring reports and will be informed of the scheduled date that the follow-up review is due to be undertaken.
 - ii) Representatives from the service area will not be required to attend the committee meeting and no update report will be required from the service
 - iii) Internal Audit undertake a full follow-up review within 3-6 months of the audit and report the findings back to the committee via the quarterly monitoring reports.
 - iv) If the follow-up review concludes that insufficient action has been taken to address the issues identified and testing concludes that a number of

- recommendations have not been implemented, then the service will be required to prepare an update report for presentation at the committee.
- 3.4 Exceptions to the above revised process could be any moderate reports issued where the Chief Auditor is of the opinion that any issues or risks identified are broad and significant enough to warrant early committee oversight and intervention. Examples could include any Fundamental Audits that receive a moderate assurance rating or any audits that have a wider remit across the Council such as reviews relating to Procurement, Freedom of Information etc.
- 3.5 The introduction of the new process should:
 - i) Ensure the committee focuses on areas where recommendations are not being addressed and action is not being taken, to ensure those service areas are being held to account.
 - ii) Reduce demand on services areas that are already acting on the recommendations made in audit reports.
 - iii) Assist in making the committee agenda packs more manageable and meaningful.
 - iv) Ensure committee oversight of broader risks and council wide issues is maintained.

4 Additional work undertaken by Internal Audit in the Quarter

4.1 The Internal Audit Team also certified the following grants as required by the terms and conditions of the grant issued by the Welsh Government.

Grant	Amount
Regional Consortia School Improvement	£8,467,231
Grant (RCSIG) 2022/23	
Pupil Development Grant 2022/23	£9,690,092

- 4.2 The Fundamental Audit Recommendation Tracker exercise was also completed as reported the Governance and Audit Committee in January.
- 4.3 The team also commenced the annual consultation exercise with all Heads of Service across the Council to help inform the Audit Plan for 2024/25.

5. Follow-Up of Audits with Moderate Assurance Levels Completed 1 October to 31 December 2023

- 5.1 The follow-up procedures operated by the Internal Audit Team include revisiting any routine audits which received a Moderate or Limited level of assurance to confirm and test that action has been taken by management to implement the recommendations made in the original audit.
- 5.2 The follow-up audit is usually within six months of the final report being issued and includes testing to ensure that any High or Medium Risk recommendations have been implemented. Where agreed

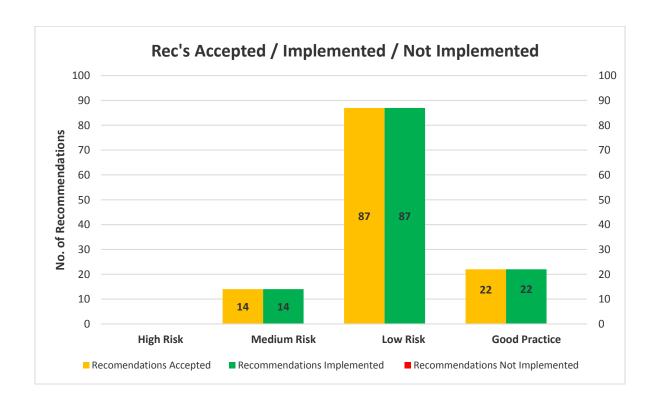
recommendations have not been implemented, this will be reported to the appropriate Head of Service (or Chair of the Governing Body in the case of schools) and the Director of Finance & Section 151 Officer.

5.3 No audits with a Moderate assurance level were followed-up in the quarter.

Follow-Up of Audits with High and Substantial Assurance Levels Completed 1 October to 31 December 2023

- 6.1 Where an audit has been awarded a 'High' or 'Substantial' level of assurance, the relevant Service is asked to confirm the implementation of the recommendations.
- 6.2 The results of the follow-ups for audits with 'High' or 'Substantial' assurance levels undertaken in quarter two can be found in Appendix 4. Further detail on the recommendations that have not been implemented can be found in Appendix 5. A summary of the results can be found in the table and corresponding chart below.

	F	Recommendation Risk Rating					
Recommendation	High	Medium	Low	Good			
Status	Risk	Risk	Risk	Practice			
Accepted	0	14	87	22			
Implemented	0	14	87	22			
Not Implemented	0	0	0	0			



7 Integrated Assessment Implications

- 7.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
 - Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - Foster good relations between people who share a protected characteristic and those who do not.
 - Deliver better outcomes for those people who experience socioeconomic disadvantage.
 - Consider opportunities for people to use the Welsh language.
 - Treat the Welsh language no less favourably than English.
 - Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.
- 7.2 The Well-being of Future Generations (Wales) Act 2015 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.
- 7.3 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.
- 7.4 The completion of the Integrated Impact Assessment Screening revealed that:
 - The Quarterly Internal Audit Monitoring Report has a low positive impact across all groups.
 - It has been subject to consultation with the Director of Finance & S151 Officer, Legal and Access to Services.
 - All Well-being of Future Generations Act considerations are positive and any risks identified are low.
 - The overall impact of the Quarterly Internal Audit Report is positive as it will support the Authority in its requirement to protect public funds.

8. Financial Implications

8.1 There are no financial implications associated with this report.

9. Legal Implications

9.1 There are no legal implications associated with this report.

Background Papers: Internal Audit Plan 2023/24

Appendices: Appendix 1 - Audits Finalised Q3 2023/24

Appendix 2 - Summary of Scope of Audits Finalised Q3 2023/24 Appendix 3 - Internal Audit Plan 2023/24 - Progress to 31/12/23 Appendix 4 - High/Substantial Audit Follow-Up Results Q3

Appendix 5 - Integrated Impact Assessment

MONITORING REPORT Q3 2023/24 - AUDITS FINALISED

Audit Area / Head of Service	Audit Area / Head of Service Audit Title D				Recommendations			
		Finalised	Level	Made	Agreed	Not Agreed		
Adult Services	Adult Services - Business Support Team	19/12/23	High	3	3	0		
Fundamental Systems	Housing & Council Tax Benefit	30/10/23	High	3	3	0		
Planning & City Regeneration	External Funding Team	20/12/23	High	2	2	0		
Contract Audits	Contracts Register	30/10/23	High	0	0	0		
Adult Services	Adult Services Establishments	24/10/23	Substantial	37	37	0		
	Integrated Community Equipment Service &							
Adult Services	Suresprung	20/11/23	Substantial	15	15	0		
Adult Services	Non-Residential Care	21/12/23	Substantial	8	8	0		
Education Planning & Resources	Bishop Gore Comprehensive School	18/12/23	Substantial	12	12	0		
Education Planning & Resources	Olchfa Comprehensive School	30/10/23	Substantial	11	11	0		
Building Services	Heol y Gors Plant Hire & Transport	07/12/23	Substantial	10	10	0		
Digital & Customer Services	Corporate Complaints	11/10/23	Substantial	9	9	0		
Education Planning & Resources	Crwys Primary School	29/11/23	Moderate	23	23	0		
Housing & Public Health	Trading Standards Division	05/12/23	Moderate	21	21	0		
			Total	154	154	0		

MONITORING REPORT Q3 2023/24 - SUMMARY OF SCOPE OF AUDITS FINALISED

Audit Area / Head of Service	Audit Title	Assurance Level	Audit Scope	Key Findings / Risks
Adult Services	Adult Services - Business Support Team	High	The audit included the review and testing of controls established by management over the following areas: Expenditure, Purchase Cards, Travel Expenses, Personnel records, Data Security	
Fundamental Systems	Housing & Council Tax Benefit	High	The audit examined the following processes: Verification of new claims, Assessment of claims, Changes in claimant circumstances, Extended Payments, Discretionary Housing Payments, Payment controls, Periodic reviews, Overpayments, Performance, Post Opening Procedures, GDPR/Retention	
Planning & City Regeneration	External Funding Team	High	The audit reviewed the procedures in place and included detailed testing on the following areas: Administration of Projects, Completion of Claims, Reconciliation and Verification of spend to the General Ledger, GDPR and Data Retention	
Contract Audits	Contracts Register	High	Testing was undertaken to examine the controls and procedures associated with the following: Procurement Team Organisation and Procedures, Contracts exist for all eligible Council expenditure, All Contracts are included in the Contract Register.	
Adult Services	Adult Services Establishments	Substantial	The audit reviewed the procedures in place in regard to the following areas: Expenditure, P-Cards, Security, Income / Sales, Petty Cash, Service Users' Money and Property, Inventory, Unofficial Funds, Employee Records	made, but a significant number of Low Risk and

MONITORING REPORT Q3 2023/24 - SUMMARY OF SCOPE OF AUDITS FINALISED

Adult Services	Integrated Community Equipment Service & Suresprung	Substantial	The audit reviewed the procedures in place and included detailed testing on the following areas: Joint Working Arrangement, Trustee Meetings / Charity Returns, Expenditure, Purchase Cards, Stock of Equipment, Testing of Lifting Equipment, Vehicles, Inventory, Employees, Income (Vending Machine and Payphone), Grants, GDPR and Data Retention	check had not been carried out for some time and consequently Inventory Certificates were not being completed as required (MR). A number of addtional
Adult Services	Non-Residential Care	Substantial	The audit reviewed the procedures in place and included detailed testing on the following areas: Invoice Verification, Service User Financial Assessment, Service User Charges, Recovery of Service User arrears, Welcome Break, GDPR/Data Retention	period of between six to ten months (MR). A number
Education Planning & Resources	Bishop Gore Comprehensive School	Substantial	Testing was undertaken to examine the controls and procedures associated with the following areas: Governance, Management of Delegated Resources, Cash, Collection and Banking of Income, Lettings, Bank Reconciliation, Expenditure, Computer Security, Unofficial Funds, Verification of Employees / Additional Hours Paid, Inventory, Minibus Records, Verification and Authorisation of Free School Meals	A review of inventory records showed that they had not been completed fully and were not up to date

Education Planning &	Olchfa Comprehensive		Testing was undertaken to examine the controls and procedures associated with the following areas: Governance, Management of Delegated Resources, Cash, Collection and Banking of Income, Lettings, Bank Reconciliation, Expenditure, Computer Security, Unofficial Funds, Verification of Employees / Additional Hours Paid, Inventory, Minibus Records, Verification and Authorisation of Free	the delegated budget in relation to supplies for a leaving party for the Headteacher, which were not for the benefit of pupils (MR). The school had also accepted a donation from one of it's current
Resources	School	Substantial	School Meals	Good Practice recommendations also noted.
Building Services	Heol y Gors Plant Hire & Transport	Substantial	Testing was undertaken to examine the controls and procedures associated with the following areas: Stock Records, Movements of Plant, External Hires, Purchases of new Plant, Recharges, Security of Plant, Diesel and AdBlue, Vehicle and Driver Checks	due to be implemented by March 2024. A number of
Digital & Customer Services	Corporate Complaints	Substantial	The audit reviewed the procedures in place and included detailed testing on the following areas: Corporate Complaints, Social Services Complaints, Ombudsman complaints, Performance and Monitoring, GDPR/Data Retention	all complaints are progressed and captured

MONITORING REPORT Q3 2023/24 - SUMMARY OF SCOPE OF AUDITS FINALISED

The audit reviewed the procedures in place and included detailed testing on the following areas: Expenditure including Purchase Cards, Cash/Credit Income including Licences, Income & Seized Cash Held Securely, Goods Held Securely, Inventory of Equipment, Travel Trading Standards Expenses, Employee Records, POCA Investigations, Controlled Subject to follow-up audit in Q1 2024/25.	Education Planning & Resources	Crwys Primary School	Moderate	The audit included the review and testing of the controls established by management over the following areas: Governance, Management of Delegated Resources, Budget Monitoring, Lettings, Banking Procedures, Unofficial Funds, School Meals Income, Bank Reconciliations, Expenditure, Employees, Health & Safety, Inventory, Computer Security	
		Trading Standards		testing on the following areas: Expenditure including Purchase Cards, Cash/Credit Income including Licences, Income & Seized Cash Held Securely, Goods Held Securely, Inventory of Equipment, Travel	
Housing & Public Health Division Moderate Stationary, Vehicles, GDPR and Data Retention. be reported to committee in due co	Housing & Public Health	Division	Moderate	Stationary, Vehicles, GDPR and Data Retention.	be reported to committee in due course.



Audit Title	Risk Rating	Status as at 31/12/2023	Corporate Priority	Days	Scope
Level 1 – Cross Cutting Reviews – Council Governan	ce & Control				
Corporate Governance Review	Med/High	Allocated	Cross Cutting	25	Review and assessment of corporate governance arrangements across the Council. Including review of management assurance controls in the corporate risk register and delegated decision making.
Risk Management	Med/High	In Progress	Cross Cutting	15	Annual rolling audit of risk management controls and monitoring in each directorate on a rotational basis.
FOI/SAR/EIR - Follow Up	Med	Final Issued	Cross Cutting	3	Follow up of moderate audit report issued.
Achieving Better Together – Transformation (inc. workforce strategy and savings delivery) *	New	Planned	Cross Cutting	15	New / TBC – review of the Transformation element including workforce strategy and delivery of savings proposals.
Oracle Cloud / Fusion Project*	New	Allocated	Cross Cutting	10	New / TBC – Review of ongoing progress with the project.
Regional Working*	New	Final Issued	Cross Cutting	10	New / TBC - Update on current and proposed regional working arrangements
Sickness & Overtime Review*	New	Allocated	Cross Cutting	15	New / TBC - Review of sickness and overtime levels across key departments
Level 2 – Fundamental Systems - Section 151 Office	r Assurance				
Financial Services – (1) Annual Audit, (2) 2-yearly A	udit, (2+Follov	v-up)- 2 yearly A	Audit plus follow-up.		
Pensions Admin (2)	Med/High	In Progress	Section 151 Assurance	20	Review of the operations and controls of the CCS LGPS Pension Fund Administration Team.
Teachers Pensions (2)	Med	In Progress	Section 151 Assurance	15	Review of the Teacher Pensions processes undertaken by the Payroll Section of the Service Centre.
Accounts Receivable (1)	High	In Progress	Section 151 Assurance	35	Review of the effectiveness of all Accounts Receivable / Debtor processes
Business Rates (NNDR) (2 + Follow-up)	Med/High	Allocated	Section 151 Assurance	5	Collection and administration procedures of National Non- Domestic Rates by the Council – Follow-up review of 22/23 audit findings.
Pension Fund Investments (2)	Med	Allocated	Section 151 Assurance	7	Review of Pension Fund Investment activities undertaken by the Treasury Management Team.
Housing Rents (2)	Med	Allocated	Section 151 Assurance	20	Review of the Housing Rents Team in the Housing & Public Health Service.



		Planned			Review of the controls and effectiveness of all Accounts
Accounts Payable (2 + Follow-up)	Med	ramed	Section 151 Assurance	5	Payable processes – Follow-up review of 22/23 audit findings.
Housing & Council Tax Benefit (2)	Med/High	Final Issued	Section 151 Assurance	40	Audit of the Housing Benefit & Council Tax Reduction System and processes
Council Tax (2 + Follow-up)	Med/High	Allocated	Section 151 Assurance	5	Review of all Council Tax collection processes and procedures – Follow-up review of 22/23 audit findings.
Capital Accounting (2)	Med	Allocated	Section 151 Assurance	25	Review of the controls in place for capital accounting
Level 3 – Service Level Audits – Other Assurance					
Education Planning & Resources					
Bishop Gore Comprehensive School	Med	Final Issued	Education	10	Review of compliance with Council policies and procedures.
Birchgrove Comprehensive School	Med	Final Issued	Education	10	Review of compliance with Council policies and procedures.
Morriston Comprehensive School	Med	Final Issued	Education	10	Review of compliance with Council policies and procedures.
Olchfa Comprehensive School	Med	Final Issued	Education	10	Review of compliance with Council policies and procedures.
School Kitchens*	Med/High	In Progress	Education	15	Financial and administration procedures in individual school kitchens across the school population.
Catering & Cleaning**	Med	Final Issued	Education	3	Ongoing audit from 2022/23 plan.
Schools DBS – Thematic Review	Med	Final Issued	Education	15	Review of DBS Controls within Schools following main DBS audit highlighting issues
MultiPay Cards Review – Thematic Review	New	In Progress	Education	10	New / TBC – review of use of payment cards and controls in schools.
Clydach Primary School	New	Final Issued	Education	3	Audit at the request of Education.
Crwys Primary School	New	Final Issued	Education	3	Audit at the request of Education.
Achievement & Partnership Service					
School Improvement Advisors	Med	Final Issued	Education	10	Review of the School Improvement Advisor (prev. named Challenge Advisors) Service.
School Governor Support Unit	New	In Progress	Education	10	Review of the operations of the School Governor Support Unit.

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Additional Learning Needs & Inclusion Team	Med	Allocated	Education, Safeguarding & Poverty	25	Review of Access to Learning, Psychology Service, Recoupment, SEN/ALN Support, Statements & LA IDP's and Learning and Behaviour Support.
Pupil Support Team	New	Deferred	Education, Safeguarding & Poverty	10	Review of the Pupil Support team inc. Home Tuition and EOTAS Pathways
Swansea Pupil Referral Unit	Med	In Progress	Education, Safeguarding & Poverty	10	Review of the operations of the PRU
Education Grants & Other					
Schools Annual Report	n/a	Final Issued	Education, Safeguarding & Poverty	3	Summary of School Audit work undertaken in 22/23
Education Improvement Grant	n/a	Final Issued	Education, Safeguarding & Poverty	15	Grant Certification of the Education Improvement Grant (prev. Regional Consortia School Improvement Grant)
Pupil Deprivation Grant	n/a	Final Issued	Education, Safeguarding & Poverty	15	Grant Certification
Child & Family Services					
Youth Offending Service	Med	Final Issued	Safeguarding	10	Review of the operations of the service.
Use of Taxis – Authorisations	Med	Final Issued	Safeguarding	10	Review of controls over the use of taxis within the service
Youth Provision in Early Help*	Med	Final Issued	Safeguarding	15	Review of controls within Young Peoples Support, Youth Clubs and Community Childcare
Western Bay Adoption Service & Adoption Allowances – Follow Up	Med	Final Issued	Safeguarding	5	Follow-up review of moderate audit report issued in 2022/23.
Adult Services					
Home Care*	Med/High	In Progress	Safeguarding	10	Carried forward from 2022/23 Plan.
Integrated Community Equipment Service & Suresprung	Med/High	Final Issued	Safeguarding	10	Review of controls in the community equipment service and Suresprung
Deprivation of Liberty Safeguards	New	In Progress	Safeguarding	10	Added at request of the Chair – Risk Register review.

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Flexible Support Service	Med	Final Issued	Safeguarding	10	Review of flexible support service within learning disability services.
Adult Services Establishments – Self Assessment Checklists	Med/High	Final Issued	Safeguarding	25	Self-assessment checklist review and evaluation of establishments providing adult services.
Supporting People Team	Med	Final Issued	Safeguarding	5	Review of operations and compliance within the team.
Housing Support Grant – Regional Coordinator Grant	n/a	Final Issued	Safeguarding	3	Grant Certification
Housing Support Grant	n/a	Final Issued	Safeguarding	10	Grant Certification
Adult Services – Directorate Services					
Client Property & Finance*	Med	In Progress	Safeguarding	15	Review of controls in place for client funds held and distributed by the Council as custodians, including payments, annual accounts and monthly reconciliations
Business Support Team – Adult Services	Med	Final Issued	Safeguarding	10	Review of the operations of the team.
Review of Transitional Placement Arrangements*	New	Allocated	Safeguarding	10	Carried forward from 2022/23 Plan.
Commissioning & Tackling Poverty					
Enable Support for Independent Living Grant	n/a	In Progress	Safeguarding	10	Grant Certification
Building Services					
Heol y Gors – Stores, Admin & Finance, Oracle T&L*	Med/High	Allocated	Economy & Infrastructure, Safeguarding	20	Review of compliance with Council policies and procedures.
Heol y Gors – Plant & Transport**	Med	Final Issued	Economy & Infrastructure, Safeguarding	3	Ongoing audit from 2022/23 plan.
Day to Day Repairs/Maintenance Section*	Med	In Progress	Economy & Infrastructure, Safeguarding	20	Carried forward from 2022/23 Plan.
Waste Management & Parks					
Cleansing Strategy*	New	Final Issued	Economy & Infrastructure, Resource & Biodiversity	5	Carried forward from 2022/23 Plan.
Highways & Transportation					

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Concessionary Bus Fares	Med	Final Issued	Economy & Infrastructure	5	Review of controls in relation to concessionary fares (annual).
Recovery of Abandoned Vehicles	Med/Low	Final Issued	Economy & Infrastructure	5	Review of recovery services.
Swansea Marina & Mumbles Boat Park	Med	Final Issued	Economy & Infrastructure	15	Review of Marina compliance with Council policies and procedures and operations of the Boar Park.
Central Transport Unit – Fuel	Med	In Progress	Economy & Infrastructure	10	Review of the controls in place around CTU Fuel.
Traffic Orders*	High	Allocated	Economy & Infrastructure	10	Carried forward from 2022/23 Plan.
Advance Payment Code*	Med	Allocated	Economy & Infrastructure	8	Carried forward from 2022/23 Plan.
Live Kilometre Support Grant	n/a	Final Issued	Economy & Infrastructure	5	Grant Certification
Housing & Public Health					
Housing Options*	Med	In Progress	Poverty, Safeguarding	20	Carried forward from 2022/23 Plan.
North Area District Housing Office	Med	Final Issued	Poverty, Safeguarding	15	Review of the operations of the North DHO
Central Area District Housing Office	Med	Allocated	Poverty, Safeguarding	15	Review of the operations of the Central DHO
Leasehold Properties*	Med	In Progress	Poverty, Safeguarding	15	Carried forward from 2022/23 Plan.
Home Improvement Team**	Med	Final Issued	Poverty, Safeguarding	3	Ongoing audit from 2022/23 plan.
Housing Loans and Grants	Med/High	Final Issued	Poverty, Safeguarding	25	Review of the controls and management of the various gran and loan schemes in place within Housing
Application Controls – CX System (Flare Replacement)*	Med	Deferred	Poverty, Safeguarding	5	Initial review of new application controls of CX
Trading Standards Division**	Med	Final Issued	Poverty, Safeguarding	3	Ongoing audit from 2022/23 plan.
Public Protection – Administration Division	Med	Allocated	Poverty, Safeguarding	15	Review of the operations of the service.
Licensing Division*	High	In Progress	Poverty, Safeguarding	15	Carried forward from 2022/23 Plan.
Registration Service	Med	Final Issued	Poverty, Safeguarding	15	Review of the operations of the service.
Pollution Control Division*	Med	In Progress	Poverty, Safeguarding	10	Review of the Pollution Control Division for compliance with Council policy and procedure
Welsh Housing Quality Standards (WHQS 2 plus Decarbonisation programme)*	New	Allocated	Poverty, Safeguarding	10	Carried forward from 2022/23 Plan.

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Rechargeable Works – Follow-up	Med	Final Issued	Poverty, Safeguarding	5	Follow-up of moderate audit report issued in 2022/23
Cultural Services	•			•	
Spot Checks	Med	Final Issued	Economy & Infrastructure	5	Spot checks undertaken at outdoor leisure sites including Recreational Ground, Singleton Carpark and Knab Rock Car Park income procedure checks
Swansea Grand Theatre & Catering	Med/High	In Progress	Economy & Infrastructure	25	Review of processes and procedures in Grand Theatre and the catering function for compliance with council policy.
Destination Lettings (inc. Langland Huts & Thistleboon Caravans) – follow-up	Med	Final Issued	Economy & Infrastructure	5	Follow-up of moderate report issued in 2022/23.
Planning & City Regeneration					
Swansea Market*	Med	Allocated	Economy & Infrastructure, Resources & Biodiversity	20	Review of the procedures and controls in place including income, rents, inventory, H&S, insurance and expenditure
External Funding Team*	Med	Final Issued	Economy & Infrastructure, Resources & Biodiversity	5	Carried forward from 2022/23 Plan.
Section 106 Agreements*	Med/High	Final Issued	Economy & Infrastructure, Resources & Biodiversity	10	Carried forward from 2022/23 Plan.
Planning - AONB	Med	Final Issued	Economy & Infrastructure, Resources & Biodiversity	10	Review of the planning controls and operations of the Area of Outstanding Natural Beauty Team.
Communications & Marketing					
Corporate Marketing*	Low	Final Issued	Transformation & Council Development	7	Carried forward from 2022/23 Plan.
Financial Services					
Purchase Card Transactions Monthly Review	Med	In Progress	Section 151 Assurance	10	Periodic review of Purchase Card Transactions for compliance with the P-Card policy
Taxation – VAT*	Med	In Progress	Section 151 Assurance	10	Review of arrangements for ensuring that Value Added Tax (VAT) is properly controlled and accounted for by the Authority
Trusts & Charities	Med	Final Issued	Section 151 Assurance	10	Review of the management and control of the various Trusts and Charities under the management of the Council
Accounts Payable Project Bank Accounts*	New	Allocated	Section 151 Assurance	8	Carried forward from 2022/23 Plan.

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Debt Recovery	Med/High	Planned	Section 151 Assurance, Safeguarding	15	Review of debt recovery processes including TPA's and Deferred Charges.
Non-Residential Care*	Med/High	Final Issued	Section 151 Assurance, Safeguarding	25	Carried forward from 2022/23 Plan.
Legal, Democratic Services & Business Intelligence					
Councillors & Co-opted Members Expenses and Allowances	Med	Final Issued	Monitoring Officer Assurance	10	Review of the administration of expenses and allowances
Legal Services Management of Risk*	Med	Deferred	Monitoring Officer Assurance	10	Carried forward from 2022/23 Plan.
Commercial Services					
Formal Contracts & Waivers*	New	Draft Issued	Section 151 Assurance	10	Carried forward from 2022/23 Plan.
Digital & Customer Services Audits					
Corporate Complaints*	Med	Final Issued	Transformation & Council Development	8	Review of the complaints recording, processing and reporting controls
Human Resources & Service Centre					
Cashiers Office – CCI Reconciliation	Med/High	Allocated	Transformation & Council Development	5	Review of the Chief Cashier Imprest reconciliation.
Officers Expenses	Med	In Progress	Transformation & Council Development	10	Review of the controls around officer expenses reimbursement.
Purchase Card Admin*	Med/Low	Final Issued	Transformation & Council Development	15	Carried forward from 2022/23 Plan.
Corporate Learning and Development Team*	New	Planned	Transformation & Council Development	5	Carried forward from 2022/23 Plan.
Management of Absence*	Med/High	In Progress	Transformation & Council Development	10	Carried forward from 2022/23 Plan.
Recruitment & Staff Contracts	New	Allocated	Transformation & Council Development	10	New audit requested as part of consultation exercise to look at issue and store of contracts. Scope to be confirmed.
Contract Audits					
Contract Register*	Med	Final Issued	Transformation & Infrastructure	10	Carried forward from 2022/23 Plan.
CPR Compliance Audit	New	Allocated	Transformation & Infrastructure	20	New audit introduced from 2023/24 reviewing CPR Compliance per directorate on a rolling programme across:

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					Place, Finance, Education, Social Services and Corporate
					Services. 2023/24: Social Services Directorate
Computer Audits					
Web Development*	New	Planned	Transformation & Council Development	10	New / TBC – developing the functionality of the Council web pages
Physical & Environmental Controls*	Med	In Progress	Transformation & Council Development	10	Review of the Physical and Environmental Controls that are in place for the effective operation of ICT servers and associated hardware, led by Digital and Transformation Services
Change Control –Oracle*	Med	In Progress	Transformation & Council Development	5	Review of the Oracle Change Control Procedures, carried out by the Oracle Support Team
Use of Idea - Data Matching NFI	n/a	Final Issued	Section 151 Assurance	5	Data extraction
Projects & Special Investigations					
Unpresented Cheques	n/a	In Progress	Section 151 Assurance	5	Investigation into any unpresented cheques as they arise
NFI Data Matching Investigations	n/a	In Progress	Section 151 Assurance	10	NFI Match investigations
Galileo Management System	n/a	In Progress	Section 151 Assurance	10	Audit Management System in year admin
Annual Plan & Annual Report	n/a	In Progress	Section 151 Assurance	5	Production of the Audit Annual Plan and Report
Annual Consultation Exercise	n/a	Final Issued	Section 151 Assurance	10	Consultation with HoS and CMT for the Annual Audit Plan
Recommendation Tracker Exercise	n/a	Final Issued	Section 151 Assurance	5	Review of implementation status of the recommendations made in the Fundamental Audits
Follow-ups	n/a	In Progress	Section 151 Assurance	20	Standard audit follow up work
Miscellaneous Audits					
Swansea Bay Port Health Authority	Med/Low	Final Issued	Section 151 Officer Assurance	10	Standard required periodic review of the controls within the SBPHA Administration.
Swansea Central Phase 1 Programme & City Deal Update*	New	Allocated	Transformation & Council Development	10	Review of programme progress and milestones
Net Zero 2030 Programme	New	Allocated	Section 151 Officer Assurance	10	New audit – Corporate Risk Register Review. Review of programme progress and milestones.

^{*} Audits deferred from 2022/23 plan. ** Audits in progress at year end from the 2022/23 plan.

HIGH SUBSTANTIAL AUDIT FOLLOW UP RESULTS Q3 2023/24

						F	Recomm	endation	s			Total	Total	Total Rec	
	Date Final	Date of Follow	Assurance	Н	R	М	R	Li	R	G	P	Recs	Recs	Not	
Audit Title	Issued	up	Rating	Α	1	Α	1	Α	1	Α	1	Acc'd	Imp'd	Imp'd*	Comments
Home to School Transport	09/12/21	05/10/23	High	0	0	0	0	4	4	0	0	4	4	0	
Birchgrove Comprehensive	06/06/23	19/10/23	High	0	0	0	0	8	8	1	1	9	9	0	
Corporate Governance	06/07/23	19/10/23	High	0	0	0	0	2	2	1	1	3	3	0	
North Area Housing Office (was Blaenymaes & Penlan)	07/07/23	23/10/23	Substantial	0	0	0	0	11	11	2	2	13	13	0	
Regovery of Apandoned Vehicles	29/06/23	24/10/23	High	0	0	0	0	1	1	3	3	4	4	0	
27 Civil Parking Enforcement	22/12/22	25/10/23	Substantial	0	0	1	1	5	5	1	1	7	7	0	
Concessionary Bus Fares 22-23	31/03/23	16/11/23	High	0	0	0	0	1	1	0	0	1	1	0	
School Improvement Advisors	13/06/23	17/11/23	High	0	0	0	0	5	5	1	1	6	6	0	
Morriston Comprehensive School	14/08/23	21/11/23	Substantial	0	0	2	2	12	12	2	2	16	16	0	
Grounds Maintenance & Central Operations (inc. Burials, Stores and Workshops)	02/03/23	22/11/23	Substantial	0	0	2	2	6	6	5	5	13	13	0	
Civic Admin-Mayoral Service-Mansion House	31/03/23	22/11/23	Substantial	0	0	2	2	6	6	0	0	8	8	0	
Flexible Support Service	20/07/23	24/11/23	Substantial	0	0	1	1	5	5	1	1	7	7	0	

HIGH SUBSTANTIAL AUDIT FOLLOW UP RESULTS Q3 2023/24

Income Tax - Self Employed & Miscellaneous	29/10/21	06/12/23	High	0	0	0	0	4	4	0	0	4	4	0	
Spot Checks	06/09/23	08/12/23	High	0	0	0	0	2	2	0	0	2	2	0	
Trusts and Charities 23- 24	05/09/23	08/12/23	High	0	0	0	0	0	0	3	3	3	3	0	
CREST 22-23	27/03/23	11/12/23	Substantial	0	0	1	1	7	7	0	0	8	8	0	
Elective Home Education Provision	24/02/23	11/12/23	Substantial	0	0	2	2	1	1	1	1	4	4	0	
Section 106 Agreements	30/08/23	13/12/23	Substantial	0	0	1	1	3	3	1	1	5	5	0	
P age Plagnning - AONB	13/06/23	13/12/23	Substantial	0	0	2	2	4	4	0	0	6	6	0	
				0	0	14	14	87	87	22	22	123	123	0	100.0%

<u>Key</u>

HR - High Risk. MR - Medium Risk. LR - Low Risk. GP - Good Practice.

A - Accepted. I - Implemented

Please ensure that you refer to the Screening Form Guidance while completing this form.

Servi	ch service area and ce Area: Internal Au torate: Resources		re you from?			
Q1 (a	a) What are you scr	eening for rel	levance?			
	users and/or staff Efficiency or saving pr Setting budget allocati New project proposals construction work or a Large Scale Public Ev Local implementation Strategic directive and Board, which impact of Medium to long term p improvement plans) Setting objectives (for Major procurement an	anisation or service oposals ons for new finance affecting staff, condended to exist ents of National Strate intent, including on a public bodies olans (for example example, well-be d commissioning	cial year and strate ommunities or accesting buildings, movey/Plans/Legislation those developed at functions e, corporate plans, coing objectives, equal decisions	gic financial pla ssibility to the b ing to on-line se n Regional Partn development pla ality objectives,	et the wider community, nning uilt environment, e.g., nervices, changing location ership Boards and Publ ans, service delivery and Welsh language strateg language opportunities	ew on lic Services d
	Please name and terly report to the Gortaken by the Audit What is the poter (+) or negative (-)	overnance and Team in the pe	Audit Committe eriod.	ee outlining t	ne findings and wor	
	n/a – no impact	High Impact	Medium Impact	Low Impact	Needs further investigation	
Older Any of Future Disabi Race (Asylur Gypsie Religio Sex Sexua Gende Welsh Povert Carers Comm Marria	en/young people (0-18) people (50+) her age group Generations (yet to be lity (including refugees) n seekers es & travellers on or (non-)belief I Orientation er reassignment Language ey/social exclusion s (inc. young carers) nunity cohesion ge & civil partnership ancy and maternity	born)	+ •			

Integrated Impact Assessment Screening Form

Q3 What involvement has taken place/will you undertake e.g. engagement/consultation/co-productive approaches? Please provide details below – either of your activities or your reasons for not undertaking involvement Consultation undertaken with the Director of Finance & S151 Officer, Legal, Access to Services, the Corporate Management Team and Heads of Service.

Have you considered the Well-being of Future Generations Act (Wales) 2015 in the Q4 development of this initiative: a) Overall does the initiative support our Corporate Plan's Well-being Objectives when considered together? Yes 🖂 No b) Does the initiative consider maximising contribution to each of the seven national well-being goals? Yes 🖂 No c) Does the initiative apply each of the five ways of working? Yes 🖂 No 🗌 d) Does the initiative meet the needs of the present without compromising the ability of future generations to meet their own needs? Yes 🖂 No Q5 What is the potential risk of the initiative? (Consider the following impacts – equality, socio-economic, environmental, cultural, legal, financial, political, media, public perception etc...) High risk Medium risk Low risk \bowtie Q6 Will this initiative have an impact (however minor) on any other Council service? ⊠ Yes If yes, please provide details below Council Services included within the Internal Audit planned programme of work for 2023/24 will be subject to internal audit reviews which may result in recommendations being made to improve compliance with Council policies and procedures and consequentially may result in changes to operations/processes within service areas if required. **Q7** What is the cumulative impact of this proposal on people and/or communities

when considering all the impacts identified within the screening and any other key decisions affecting similar groups/ service users made by the organisation? (You may need to discuss this with your Service Head or Cabinet Member to consider more widely if this proposal will affect certain groups/ communities more adversely because of other decisions the organisation is making. For example, financial impact/poverty, withdrawal of multiple services and

whether this is disadvantaging the same groups, e.g., disabled people, older people, single parents (who are mainly women), etc.)

To update committee on the work undertaken by Internal Audit in the period.

Integrated Impact Assessment Screening Form

Outcome of Screening

Q8 Please describe the outcome of your screening below:

The completion of the Integrated Impact Assessment Screening revealed that:

- The Quarterly Internal Audit Monitoring Report has a potentially low positive impact across a number of identified groups.
- It has been subject to consultation with the Director of Finance & S151 Officer, Legal and Access to Services.
- All WFG considerations are positive and any risks identified are low.
- The overall impact of the Quarterly Internal Audit Monitoring Report is positive as it will support the Authority in its requirement to protect public funds.

(NB: This summary paragraph should be used in the relevant section of corporate report)
☐ Full IIA to be completed
□ Do not complete IIA – please ensure you have provided the relevant information above to support this outcome

NB: Please email this completed form to the Access to Services Team for agreement before obtaining approval from your Head of Service. Head of Service approval is only required via email.

email.	
Screening completed by:	
Name: Simon Cockings	
Job title: Chief Auditor	
Date: 14/08/23	
Approval by Head of Service:	
Approval by Head of Service: Name: Ben Smith	

Please return the completed form to accesstoservices@swansea.gov.uk

Agenda Item 5



Report of the Director of Place

Governance & Audit Committee - 28 February 2024

Place: Internal Control Environment 2023/24

Purpose: The report presents the Place Directorate control

environment, including risk management, in place to ensure functions are exercised effectively; there is economic, efficient and effective use of resources, and; effective governance to secure these arrangements. It is recommended the report

is noted for discussion.

Consultation: Legal, Finance, Access to Services.

Recommendation: It is recommended that the contents of the report

be noted.

Report Author: Mark Wade

Finance Officer: Ben Smith

Legal Officer: Stephen Holland

Access to Services

Officer: Rhian Millar

1. Background

1.1 The Place Directorate is predominantly responsible for all operational front-line services namely, Highways and Transportation, Building Services, Property Services, Waste, Parks & Cleansing, Housing and Public Health, Planning & City Regeneration and Cultural Services.

2. Risk management and business continuity

2.1 Risks within Place are promptly identified and managed at appropriate levels (corporate, directorate, service, programme / project), and as far as possible mitigated, as part of the service review and planning cycle processes and ongoing self-evaluation. Monitoring is carried out through the Directorate performance management and reporting mechanisms at

PFM and DMT meetings and programme / project boards with risks escalated as appropriate (with particular focus on 'red' risks).

- 2.2 The corporate online system is used for documenting and managing risks and all risks are evaluated and RAG rated (on the basis of likelihood and impact) and updated at the end of each month. The risk management process is reported to the Audit Committee regularly. It is an expectation that the Place Directorate is fully compliant with reviewing control measures, risk wording and risk level each month as part of a joined-up approach. **See Appendix A**
- 2.3 The risks are shared with the responsible Cabinet Members. The P&FM meeting makes the decision about whether Directorate risks should be escalated to CMT for consideration as to whether they should become a corporate risk.
- 2.4 A risk being closely monitored during 23-24 is the growing homelessness pressure resulting in a 'red' risk status for the length of stay and families in B&B.
- 2.5 The councils operational NZ2030 strategy is also on a 'red risk status due to concerns about increased costs, the national strategy and availability of further funding and resource. Without additional funds and increased capacity, there will only be so far we can take the agenda forward.
- 2.6 Each service area also has a robust business continuity plan.
- 2.7 To note the addition of two new corporate risks within the period of 2023-24 to align with the newly adopted Transformation programme:

RISK: 360 – Waste Strategy

RISK: 372 – Future Libraries model

3. Performance management / KPIs

3.1 Each Service area reports on performance indicators, be they National or local measures and reporting takes place accordingly.

The majority of service areas will also now commence using the In Phase reporting mechanism for monitoring performance against our corporate well-being objectives and PI's.

Five new KPI's have been developed to support the monitoring of the 'delivering on Nature Recovery and Climate Change objective. The first round of reporting will be March 2024 (2023-24 figures)

- CCNR1 Number of trees planted during the year across the council
- CCNR2 The increase in number of council locations with renewable energy sources

- CCNR3 Number of Members and officers that have completed Climate Change and Nature Recovery Training
- CCNR4 Number of projects delivered through the Environmental Partners Framework to support ambition of Swansea Net Zero 2050.
- CCNR5 Percentage of the Council fleet which are Ultra Low Emission Vehicles (ULEVs)

4. Planning and decision making.

- 4.1 Each service within the Directorate has an annual service plan which sets out the steps that will be taken to deliver against agreed priorities. These plans are informed by all of the above and new Council policies, new statutory requirements, the latest performance information, any savings requirements set out within the Council's medium term financial plan and recommendations from internal or external audit.
- 4.2 The governance structure along with robust planning, monitoring, review and risk management practices ensures sound planning and decision making, performance and financial monitoring and robust consultative/partnership activity, as well as integrated and collaborative ways of working.

5. Budget and resource management

- 5.1 The Directorate is supported by dedicated Finance Partners who are part of the corporate finance team.
- 5.2 The Finance Partners work closely with the Directorate's budget officers meeting monthly to review budgets. The Finance Partner provides independent scrutiny and challenge of the Directorates financial plans, including direct advice to the statutory Director and the Council's S151 officer.
- 5.3 There are robust arrangements in place to ensure effective cross Council charging and income generation is maintained.
- Overall financial oversight of the Directorate's fiscal position and delivery against the medium-term financial plan takes place in the monthly P&FM and any issues are escalated to CMT and the s.151 officer. The s.151 officer's quarterly outturn report is informed by the Directorate's finance report.
- 5.5 In line with corporate requirements, the Place Directorate holds Performance and Financial Management meetings (PFM). This group monitors the progress of and addresses any issues:
 - Key performance indicators (KPIs)
 - Corporate, directorate and service risks
 - Capital and revenue budgets

- Freedom of Information Act (FOI) requests; Subject Access Requests (SAR) and complaints
- Directorate's sickness levels
- Procurement and financial controls
- The Directorate budget remains under significant pressure due to rising demand for services in some areas at a time of high inflation, pressures on income lines due to residual covid impact / slow recovery in some areas. Some service areas also have dedicated finance officers who monitor budgets/savings on a weekly basis in conjunction with senior officers and any issues etc are escalated directly to Head of Service/SMT/P&FM and respective Cabinet Members.
- 5.7 Managing Absence With a dedicated resource assigned to the Directorate, pilots have been completed in all seven service areas.
 - From 1/1/22 to 31/12/22 there was a total of 45,714 working days lost due to absence.
 - From 1/1/23 to 31/12/23 there was a total of 39,335 working days lost due to absence.
 - From **2022 to 2023** there has been a **13.95% percentage decrease** in working days lost due to absence.
- 5.8 Analysis of demand, costs of new statutory requirements or policy commitments, delivery against savings targets, inflationary pressures, new income opportunities are all routinely monitored through the above arrangements and then provided to CMT and Cabinet to inform the annual budget setting process.

6. Fraud and financial impropriety

- 6.1 The Directorate's systems of internal controls have been designed in accordance with the accounting instructions. Compliance is monitored through regular internal audits of the establishments and functions. Suspicions of impropriety are referred to internal audit and Human Resources. These measures have been shown to be effective in practice and helped to inform improvements over time.
- 6.2 All suspected frauds are referred to the Corporate Fraud Team. Controls are in place for processes where there is the possibility of fraud, and these are subject to regular audits. Senior manager approval to spend; contracts; agreements; POs and use of P-Cards is in place and escalated to HoS for authorisation prior to spend. Register of interests/ secondary employment etc. are all monitored to ensure compliance. Regular reviews of Officers authorisation levels for financial limits are in place. Relevant procedures in place. Audit trails and controls are also in place in accordance with audit requirements.

7. Compliance with policies, rules and regulatory requirements

- 7.1 The assurance framework and robust internal controls set out in this report provide a solid foundation for ensuring compliance with policies, rules and regulatory requirements within the Place Directorate. Periodic reminders are given to managers and team members and reemphasised in any training opportunities.
- 7.2 Due to the broad range of service areas within the directorate, there are regular requirements to attend Scrutiny sessions in support of the relevant cabinet members. These may relate to general service provision or more specifically specific reviews or project pre decision Scrutiny sessions.
- 7.3 Sound processes are in place for monthly SMT meetings, team meetings. 121s and appraisals ensure any areas of non-compliance are highlighted at the earliest point and remedied. HR policies are applied as appropriate. Dedicated sickness management monitoring resource is now in place as Directorate resource to support services with continued absence management compliance. All concerns raised with HoS, discussed at SMTs, team meetings and appropriate advice taken, eg HR, Procurement. There are a number of mandatory training courses for all officers to complete and refresh as required covering health and safety, safeguarding etc. Performance on compliance is strong, some areas of improvement are required. When this arises, clear actions are implemented within the respective services/areas and communicated to other services via DMT as required.
- 7.4 The directorate contributes regularly to the established Service Transformation Committees (STCs) to assist in developing new policy areas aligned with the new corporate objectives. The main STC's relevant to the Place Directorate are:
 - Climate Change and Nature Recovery:
 - Local Nature Recovery Action Plan
 - Waste Strategy collections, Circular Economy elements
 - Sustainable Transport Strategy
 - Swansea 2050
 - Local Area Energy Plan
 - Section 6 Biodiversity Action Plan (Including GI and Tree cover)
 - Economy & Infrastructure:
 - Local Economic Delivery Plan
 - Swansea Bay Strategy
 - Destination Management Plan
 - Housing Allocation Policy

- Maintenance of Road Infrastructure
- More Homes Delivery Programme
- Tawe River Corridor Action Plan

8. Programme and Project Assurance

8.1 All significant projects within Place have robust plans and business cases and run through the formal approval process. Sound governance is adhered to supporting individual projects as required. Where required Legal, Financial and Procurement approvals are sought in addition to HoS/Director/Cabinet approvals for programmes or projects. FPRs and CPRs compliance is strong.

Using Building Services as an example, there is a programme of projects with a turnover in excess of £90M with strong programme management in place to ensure delivery of the relevant Housing and Education projects each year.

The directorate is also responsible for delivery 100's of smaller projects and programmes across a significant range of areas.

- 8.2 The directorate has developed a cross cutting project management team to develop and deliver a wide range of projects, examples include:
 - The Delivery of the Climate Change and Nature Strategy The team leads on this authority wide programme, established to not only deliver the net zero council target by 2030, but also the Swansea wide campaign for net zero by 2050. Sound governance underpins the project, ensuring full engagement across all council directorates and with external partners. Team reports annually to Welsh Government on Council emissions.
 - Supporting service areas with IT cloud solutions Project management governance established in order to improve and develop robust processes and support key stakeholders to deliver a successful outcome for the service areas. The project team in particular are heavily involved in the launch of a new Civica product in the Public Health dept, plus new Housing and Asset Management software across a variety of service areas.
 - Economic Recovery Fund (ERF) The programme is coming to an end and has successfully approved over 120 applications (in excess of £30m).
 - Swansea Bay Strategy Delivery Plan to assist the cross cutting teams on operational delivery, reported through the E&I Programme Board.
 - **CCTV & Wi-Fi** the upgrade of the Council's CCTV system and roll out of public Wi-Fi is fully underway.

- All project progress is monitored and reviewed at bi monthly Place DMT meetings, using a traffic light 'RAG' process for escalation.
- 8.3 New to 23-24 is the Transformation Board. The Place Directorate report on five key projects through this route:
 - Regeneration
 - More Homes
 - Waste strategy
 - Net Zero 2030 and Green Fleet (ULEV)
 - New Library Hub Model

9. Internal controls

- 9.1 All officers have clear roles and responsibilities. Authorisation processes whether Oracle, HR or financial are clear and in place. Annual review of authorisation levels are carried out. Spending restrictions are in place with appropriate escalation up to HOS and Director level as appropriate. Risk assessments are in place for buildings and services.
- 9.2 The resilience of both internal control arrangements and the Directorate's workforce have been severely tested in recent times via various incidents, events and of course the pandemic. There is proven ability to flex resource and safely respond to priorities that change on a regular basis and indicates strong assurance.
- 9.3 PFM provides oversight of finance and performance monitoring including consideration of risk and escalation. Audits are carried out throughout services as per the agreed programme considering higher risk areas and also when issues arise. Compulsory staff training for many activities including finance, procurement, contracts, equalities etc is standard practice. Any adverse findings from audit reports are dealt with via appropriate action plans and are monitored at PFM.

10. Data security

- 10.1 Elements of the Directorate manages high levels of personal information and statutory requirements are such that this information needs to be routinely used to inform reports and plans. The consequences of any inadvertent data breach are always serious.
- 10.2 The processes for monitoring and reporting breaches are well established across the Directorate, as are the processes for learning from any such breach. Officers work closely with the Council's Data Protection Officer to ensure that any lessons learned from breaches anywhere in the Council and beyond are used to continually improve our processes.

10.3 Arrangements are in place and monitored at PFM and officers appropriately trained and reminded as to the importance of agreed procedures. This is apparent from the limited number of breaches and issues that have taken place within the Directorate relative to the large amount of correspondence dealt with. Breaches have been reported as follows:

No of Breaches	Period
13	³ / ₄ 2023-24
18	2022-23
17	2021-22
17	2000-21

10.4 Staff are required to complete the mandatory data protection and security e-learning course to ensure that they are aware of their responsibilities in relation to data protection and the timescales involved in the reporting of breaches. Refreshers may be required if breaches occur.

11. Partnership / collaboration governance

- 11.1 Elements of the Directorate are also involved in the regional working agenda via the City Deal This is in the capacity either of senior responsible owner of specific city deal projects or part of the programme board structure for relevant regional projects of Talent and Skills and Homes as Power stations. The directorate is also now supporting the emerging work of the Corporate Joint Committee specifically relating to key themes of Transport Planning, Planning, Economic Development and Energy.
- 11.2 The recently established framework set up to work with three environmental partners on the Climate Change and Nature Recovery agenda, has proved effective within its first year. Six projects have been delivered to date, with a final one scoped for action before year end.

12. Integrated Assessment Implications

- 12.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
 - Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - Foster good relations between people who share a protected characteristic and those who do not.
 - Deliver better outcomes for those people who experience socioeconomic disadvantage.

- Consider opportunities for people to use the Welsh language.
- Treat the Welsh language no less favourably than English.
- Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.
- 12.1.1 The Well-being of Future Generations (Wales) Act 2005 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.
- 12.1.2 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.
- 12.2 There is no direct impact associated with this report, but assessing long-term trends and preventing risks from becoming issues are key aspects of risk management. Sustainable ways of working are incorporated within the Council's risk management policy and framework. **See Appendix B.**

Summary of impacts identified and mitigation needed

All activities across the Place Directorate follow governance and procedure for approval and delivery. The report demonstrates sound systems are in place to reduce impact and mitigate any challenges.

Summary of involvement

Engagement and consultation is considered as required for all key projects within the Place Directorate.

WFG considerations

The Place Directorate senior team develop strong services plans across each area, which include consideration for all projects and business as usual services in relation to the wellbeing goals set out in the Well-being of Future Generations Act.

Any risks identified

Projects and business as usual activity across the Place Directorate utilises the Corporate/Directorate and Service Risk Register for escalation. Cross cutting projects are also monitored using the RAG process and escalated at DMT as necessary.

Cumulative impact

The report demonstrates by using a combination of monitoring processes and strong governance that the cumulative impact of potential issues is minimised.

13. Legal Implications

13.1 There are no legal implications.

14. Financial Implications

14.1 There are no financial implications.

Background papers: None.

Appendices:

Appendix A (Place Directorate) Corporate and Directorate Risk Report

(January 2024)

Appendix B IIA

Risk ID	Risk Level	Risk Title	Risk Description	Service area	Inherent Risk	2 Month Overall RAG	Prev Overall RAG	Current Overall RAG
269	Corporate	Delivering the Regeneration Programme	If the local economy and infrastructure is not transformed and supported to be resilient to economic challenges and changes to government policy on climate change, including flood risk and associated regulatory restrictions, and does not take advantage of opportunities to attract new development and investment, then it will not fulfil its potential as a regional centre to raise aspirations, improve services, lift skills, improve connectivity, create well-paid employment opportunities and improve the well-being of Swansea citizens.	Regeneration		ILAG	NAO	
334	Corporate	Homelessness & Housing Supply	If the cost of living crisis continues or gets worse, then it will lead to greater pressure on housing supply, increased housing costs, higher levels of homelessness and increased demand on housing, tenancy support, homelessness and other Council services.	Housing and Public Health				
338	Corporate	Net Zero 2030 target	If we do not transform the Council to meet the collective net zero commitments asked of public bodies by Welsh Government at sufficient pace and scale, then there is a possibility that the net zero target will not be met by 2030	Property Services				
360	Corporate	Development of New Waste Strategy - Transformation Programme	If the development of a new Waste Strategy is not adequately resourced, with timely decision making, then there is a risk of the new strategy being ineffective and its implementation being delayed. This may mean the Council not meeting future increased statutory recycling targets or benefitting from financial and environmental benefits.	Waste Parks and Cleansing				
61	Directorate	Disabled Facilities Grants - Programme Delivery and Budget Performance	If the DFG budget is not fully spent then this could have a reputational impact for the Authority, and result in a loss of fee income for the service. If the DFG programme is not fully committed, then disabled and vulnerable clients will not receive much needed adaptations, impacting on their ability to maintain living independently within their own homes.	Housing and Public Health				
63	Directorate	Risk Identified by the Food Standards Agency	The number of food inspections required for unrated premises for both food standards and food hygiene continues to increase due to the increase in and backlog of new businesses. In addition inspections are required in accordance with the risk rated inspection programme. There is also an increase in the number of premises where standards have deteriorated since the cessation of visits during covid 19. There could be an impact on public health and the reputation of the Council.	Housing and Public Health				
66	Directorate	Inadequate supply of affordable housing to meet neeeds	if the Authority can not deliver enough affordable housing to meet the identified need then there will be a negative reputational impact on the Authority.	Housing and Public Health				
318	Directorate	Quality Standard 2 &	If insufficient Welsh Government funding is made available to the Authority to achieve the Welsh Housing Quality Standard 2, including The Welsh Governments decarbonisation objectives, then the Authority will be unable to meet the standard by the deadline and it will also impact on the Authority¿s More Homes targets.	Housing and Public Health				
322		Parks Maintenance System (PMS)	If the Parks Maintenance System (PMS) fails then the Parks Service will be unable to deliver its grounds maintenance and burials operations, record and pay staff overtime and recharge internal/external clients for work undertaken.	Waste Parks and Cleansing				
323	Directorate		If the number of people in temporary accommodation continues to rise and WG removes or reduces funding for B&B accommodation, then the Authority may be unable to source and fund suitable temporary accommodation for anyone who becomes homeless and therefore unable to meet its statutory obligations.	Housing and Public Health				

328	Directorate	Parks Plant & Agricultural equipment replacement	If the Parks Service does not receive investment to deliver an asset replacement plan then the Parks Service will be unable to deliver its grounds maintenance, biodiversity and burials operations affecting ability to deliver council priorities and also impacting revenue from internal/external clients for work undertaken.	Waste Parks and Cleansing		
329	Directorate	Replacement of Waste Collection Fleet	If the Waste Collection fleet replacement is not commenced, then there is a risk of increasing vehicle failures as Refuse Collection Vehicles (RCVs) get older. This may mean the Council will face increased vehicle maintenance costs and/or increased vehicle hire charges and/or a risk of insufficient vehicles being available to complete all daily collection rounds.	Waste Parks and Cleansing		
331	Directorate	Building Control Service	If the level of external competition for building control services continues to increase, with private organisations continuing to recruit experienced Council officers, then there may be a significant reduction in fee income generated by the Authority in this area.	Housing and Public Health		
349	Directorate		IF the Council is not able to fund the relocation of Waste Services from Pipehouse Wharf THEN a commitment to regenerate the River Tawe Corridor will fall and funds will be required to ensure that the current site remains operational.	Property Services		
372	Directorate	Community hubs future libraries model	If we do not deliver a coordinated hub model that achieves efficiencies, whilst sustaining and improving current service levels for all involved, then we may see a reduction in resources and standards for the statutory library service.	Cultural Services		

Integrated Impact Assessment Screening Form – Appendix B

Pleas	se ensure that you	refer to the Sc	reening Form	Guidance w	hile completing	յ this form.
Servi	ch service area and ce Area: Building sportation, Waste, P	Services, P	roperty Servi			•
Direc	torate: Place					
Q1 (a	a) What are you scr	eening for rele	vance?			
	New and revised policic Service review, re-organisers and/or staff Efficiency or saving proposals construction work or an Large Scale Public Evolution Local implementation of Strategic directive and Board, which impact of Medium to long term provement plans) Setting objectives (for Major procurement and Decisions that affect the services Other	anisation or service oposals ons for new financial affecting staff, condaptations to existing the service of National Strategy intent, including the napublic bodies fullans (for example, example, well-being dommissioning definitions)	changes/reduction al year and strates munities or acces ng buildings, movin //Plans/Legislation ose developed at inctions corporate plans, of g objectives, equal	gic financial planssibility to the borning to on-line sent Regional Partnerselevelopment plansity objectives, V	nning uilt environment, e.g rvices, changing loc ership Boards and P ns, service delivery Welsh language stra	., new ation Public Services and ategy)
(b)	Please name and	fully describe	initiative here) :		
by th	ternal Control Enviro	dit Committee. 1	The İIA will con	sider all impa	acts of such a re	port.
Q2	What is the poter (+) or negative (-)	-	the following	the impacts	s below could b	e positive
	,, ,	High Impact	Medium Impact	Low Impact	Needs further Investigation	No Impact
Older Any of Future Disabi	en/young people (0-18) people (50+) her age group Generations (yet to be lity		x			

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Asylum seekers Gypsies & travellers Religion or (non-)belief

Sexual Orientation Gender reassignment Welsh Language

Poverty/social exclusion Carers (inc. young carers)

Community cohesion

Sex

&

Pregna	ge & civil partnership incy and maternity i Rights		x			
Q3	What involvemen engagement/cons Please provide de undertaking invo	sultation/co-pro etails below – e	ductive appr	oaches?	your reasons	for not
	gement and consult	ation is consider	ed as required	l for all key pr	ojects within tl	ne Place
Q4	Have you conside development of the		eing of Future	Generation:	s Act (Wales)	2015 in the
a)	Overall does the inition together? Yes x	ative support our C No □	Corporate Plan's	Well-being Obj	ectives when co	onsidered
b)	Does the initiative co Yes x☐	nsider maximising No 🗌	contribution to	each of the sev	en national well	-being goals?
c)	Does the initiative ap	ply each of the five	e ways of working	ıg?		
d)	Does the initiative megenerations to meet		e present withou	ıt compromisin	g the ability of f	uture
Q5	What is the poten socio-economic, el perception etc)		•		• .	•
	High risk	Medium	risk	Low risk x⊡		
Q6	Will this initiative	have an impac	t (however m	inor) on any	other Counci	I service?
[Yes x	No If yes,	please provid	le details bel	ow	
Q7	Will this initiative ☐ Yes x	,	nanges neede please provic			nal website?
Q8	What is the cum	ulative impact o	f this propos	al on people	and/or comn	nunities

Integrated Impact Assessment Screening Form – Appendix B

when considering all the impacts identified within the screening and any other key decisions affecting similar groups/ service users made by the organisation? (You may need to discuss this with your Service Head or Cabinet Member to consider more widely if this proposal will affect certain groups/ communities more adversely because of other decisions the organisation is making. For example, financial page (poverty, withdrawal of multiple services and

Integrated Impact Assessment Screening Form – Appendix B

whether this is disadvantaging the same groups, e.g., disabled people, older people, single parents (who are mainly women), etc.)

This particular report demonstrates the commitment by the Directorate of Place to ensure a fair and integrated approach across the 7 service areas, monitoring process and procedure to ensure this is maximised.

Outcome of Screening

- Q9 Please describe the outcome of your screening using the headings below:
 - Summary of impacts identified and mitigation needed (Q2)
 All activities across the Place Directorate follow governance and procedure for approval and delivery. The report demonstrates sound systems are in place to reduce impact and mitigate any challenges.
 - Summary of involvement (Q3)
 Engagement and consultation is considered as required for all key projects within the Place Directorate
 - WFG considerations (Q4)

The Place Directorate senior team develop strong services plans across each area, which include consideration for all projects and business as usual services in relation to the wellbeing goals set out in the Well-being of Future Generations Act.

- Any risks identified (Q5)
- Projects and business as usual activity across the Place Directorate utilises the Corporate/Directorate and Service Risk Register for escalation. Cross cutting projects are also monitored using the RAG process and escalated at DMT as necessary.
- Cumulative impact (Q7)

The report demonstrates by using a combination of monitoring processes and strong governance that the cumulative impact of potential issues is minimised.

(NB: This summary paragraph should be used in the 'Integrated Assessment Implications section of corporate report)
Full IIA to be completed
□ Do not complete IIA – please ensure you have provided the relevant information above to support this outcome

NB: Please email this completed form to the Access to Services Team for agreement before obtaining approval from your Head of Service. Head of Service approval is only required via email.

Agenda Item 6



Audit Wales Work Programme and Timetable – City and County of Swansea Council

Quarterly Update: 31 December 2023

Annual Audit Summary

Description	Timetable	Status
A report summarising completed audit work since the last Annual Audit Summary, which was issued in May 2023	Complete	Published: Annual Audit Summary 2022

Financial Audit work

Description	Scope	Timetable	Status
Audit of the Council's 2022-23 statement of accounts	To provide an opinion on the 'truth and fairness' of the Council's financial statements for the financial year ended 31 March 2024.	November 2023 – March 2024	In progress
Certification of Grant returns for financial year 2022- 23: • Housing Benefit Subsidy • Non-Domestic Rates • Teachers' Pension Contributions	Certification that nothing has come to our attention to indicate that the return is: Not fairly stated Is not in accordance with the relevant terms and conditions	September 2023 -March 2024	Non-Domestic Rates – complete Teachers Pension Contributions – in progress Housing Benefit Subsidy – in progress

Performance Audit work

2021-22 Performance Audit work	Scope	Timetable	Status
Well-being of Future Generations Act (Wales) 2015 (WFG Act) examinations	We will seek to integrate the delivery of our WFG examinations of steps to deliver well-being objectives with our other audit work. We will discuss this with the Council as we scope and deliver the audit projects listed in this plan.	N/A	N/A

2021-22 Performance Audit work	Scope	Timetable	Status
Assurance and Risk Assessment	Project to identify the level of audit assurance and/or where further audit work may be required in future years in relation to risks to the Council putting in place proper arrangements to secure value for money in the use of resources. At the Council the project is likely to focus on: Financial position Self-assessment arrangements Recovery planning Implications of the Local Government and Elections (Wales) Act Carbon reduction plans [Local areas of focus to be added]	Ongoing	Published ARA 2021-22 progress update letter summarising Implications of the Local Government and Elections (Wales) Act, and Self-Assessment arrangements. Published ARA 2021-22 Carbon Reduction plans summary Published ARA 2021-22 Financial Position Update Recovery Planning summary finalised and published in the Transformation Programme progress letter below

2021-22 Performance Audit work	Scope	Timetable	Status
Springing Forward – Examining the building blocks for a sustainable future	As the world moves forward, learning from the global pandemic, this review looks at how effectively councils are strengthening their ability to transform, adapt and maintain the delivery of services, including those delivered in partnership with key stakeholders and communities.	Workforce Management Complete Asset Management Report finalised	Report published Springing Forward – Workforce Report finalised
'Achieving Better Together' Transformation – a local project to 'review' new transformation arrangements	The focus of the work is real time working alongside the Council in taking forward its new transformation arrangements to: • Remobilise the Council • Refocus the Council to be efficient and effective in delivering its Corporate Plan and current priorities • Reshape to look beyond the next two years in setting out its new Corporate Plan building on 'Sustainable Swansea – fit for the future' We have worked alongside the Council as it further develops its recovery plan as a 'critical friend' and in learning from and sharing practice and assurance and insight	Complete	Letter published Transformation Programme progress

2022-23 Performance Audit work	Scope	Timetable	Status
Assurance and Risk Assessment	Project to identify the level of audit assurance and/or where further audit work may be required in future years in relation to risks to the Council putting in place proper arrangements to secure value for money in the use of resources and acting in accordance with the sustainable development principle.		
	Financial position	Ongoing monitoring of financial position	Ongoing
	Capital programme management	September – December 2023	AW will not undertake detailed work at all councils as part of our 2022-23 work programme. We are currently exploring our options for undertaking a detailed piece of work on this topic either in 2023-24 or future years.

2022-23 Performance Audit work	Scope	Timetable	Status
	Use of performance information – with a focus on service user feedback and outcomes	Complete	Report published Performance information: service user perspective and outcomes
	Setting of well-being objectives	Complete	Report published <u>Setting of Well-</u> <u>being</u> <u>Objectives</u>
Thematic Review – Unscheduled Care	A cross-sector review focusing on the flow of patients out of hospital. This review will consider how the Council is working with its partners to address the risks associated with the provision of social care to support hospital discharge, as well as prevent hospital admission. The work will also consider what steps are being taken to provide medium to longer-term solutions.	August 2022 – October 2023	Reporting from February 2024 onward.
Thematic review – Digital	A review of councils' strategic approach to digital, and the extent to which this has been developed in accordance with the sustainable development principle; and that it will help to secure value for money in the use of councils' resources.	Complete	Report published <u>Digital Strategy</u> <u>Review</u>

2023-24 Performance Audit work	Scope	Timetable	Status
Assurance and Risk Assessment	Project to identify the level of audit assurance and/or where further audit work may be required in future years in relation to risks to the Council putting in place proper arrangements to secure value for money in the use of resources and acting in accordance with the sustainable development principle.	April 2023 – December 2023	Ongoing
Thematic review - commissioning	A review focusing on how councils' arrangements for commissioning apply value for money considerations and the sustainable development principle.	January – July 2024	Scoping
Thematic review – Financial Sustainability	A review of councils' financial sustainability including a focus on the actions, plans and arrangements to bridge funding gaps and address financial pressures over the medium term.	March – June 2024	Scoping

Local government national studies planned/in progress

Study	Scope	Timetable	Status	Fieldwork planned at City and County of Swansea Council
Planning for sustainable development – Brownfield regeneration	Review of how local authorities are promoting and enabling better use of vacant non-domestic dwellings and brownfield sites	October 2022 – September 2023	Complete	Report published <u>Sustainable</u> development? – making best use of brownfield land and empty buildings
Governance of special purpose authorities – National Parks	Review of systems and effectiveness of governance	November 2022 – September 2023	Report drafting – publication due February 2024.	No
Governance in Fire and Rescue Authorities	Review of systems and effectiveness of governance	September 2023 – August 2024	Fieldwork underway	No
Homelessness	Examining how services are working together to progress the response to homelessness.	TBC	Scoping	TBC

Estyn

Our link inspectors are continuing to work with Torfaen as part of our follow-up process for an authority causing significant concern. We inspected Conwy local government education service in the week beginning 6 November 2023, and the report will be published early in January 2024. We will be piloting our new inspection arrangements in the Vale of Glamorgan on the week beginning 11 March 2024. We will also be inspecting the Vale of Glamorgan's youth work services on the week beginning 19 February 2024, and the findings of that inspection will contribute to the evidence base for the LGES inspection.

We have published a <u>report outlining the approaches of local authorities and secondary schools in promoting attendance</u>. The report will be published on 18 January 2024.

Care Inspectorate Wales (CIW)

CIW planned work 2023-25	Scope	Timetable	Status
Thematic reviews			
Community Learning Disability Team (CLDT)	Working with HIW we will complete a small sample of joint CLDT inspections in 2024. We will use this approach to evaluate and consider our approach to joint inspection.	2024-25	Planning
Stroke pathway	Working in collaboration with HIW a National Review of Patient Flow: a journey through the stroke pathway (hiw.org.uk) has recently been published.	Complete	Published

CIW planned work 2023-25	Scope	Timetable	Status
National review of Care Planning for children and young people subject to the Public Law Outline pre- proceedings	Purpose of the review To provide external scrutiny, assurance and to promote improvement regarding the quality of practice in relation to the care planning for children and young people subject to the public law outline pre-proceedings. To consider the extent to which practice has progressed since the publication of both the CIW 'National Review of care planning for children and young people subject to public law outline pre-proceedings' and the publication of the PLO working group report 2021 including best practice guidance.	Published	Report published The Public Law Outline in Wales
Child Protection Rapid Review	The review looked at to what extent the current structures and processes in Wales ensure children's names are appropriately placed on, and removed from, the child protection register (CPR) when sufficient evidence indicates it is safe to do. Rapid review of child protection arrangements, Care Inspectorate Wales Rapid review of child protection arrangements - interim findings, Care Inspectorate Wales	Published	Published
Deprivation of Liberty Safeguards Annual Monitoring Report for Health and Social Care 2022-23	The <u>2020-21 report</u> was published on 7 February 2021 The 2021-2022 report is underway	Published To be confirmed	Published Preparing

CIW planned work 2023-25	Scope	Timetable	Status
Joint Inspection Child Protection Arrangements (JICPA)	We will complete a further two multi-agency joint inspections in total. The findings following Denbighshire County Council have been published - Joint Inspectorate Review of Child Protection Arrangements (JICPA): Denbighshire 2023 Care Inspectorate Wales The findings following Bridgend County Borough Council have been published - Joint Inspectorate Review of Child Protection Arrangements (JICPA): Bridgend 2023 Care Inspectorate Wales The findings from Powys County Council are underway We will publish a national report in late spring 2024.	April 2023 – April 2024	Delivery
Performance review of Local Authorities	We continue to inspect Local Authorities in line with our updated Code of Practice for our local authority inspection activity Care Inspectorate Wales How we inspect local authority services and CAFCASS Cymru	Ongoing	Ongoing

Audit Wales national reports and other outputs published since December 2022

Report title	Publication date and link to report
Corporate Joint Committees – commentary on their progress	November 2023
Governance arrangements relating to an employment dispute at Amgueddfa Cymru – National Museum Wales	November 2023
Failures in financial management and governance and losses incurred – Harlech Community Council	November 2023
Putting out the false alarms: Fire and Rescue Authorities' responses to Unwanted Fire Signals	October 2023
Covering teachers' absence – follow-up (letter to the Public Accounts and Public Administration Committee)	October 2023
NHS workforce – data briefing	September 2023
Income Diversification for National Park Authorities in Wales	September 2023
Approaches to achieving net zero across the UK	September 2023
Springing Forward: Lessons learnt from our work on workforce and assets (in local government)	September 2023
Local Government Financial Sustainability Data tool update (further update planned in January 2024)	September 2023
NHS finances data tool – to 31 March 2023	September 2023

Report title	Publication date and link to report
Public interest reports – Ammanford Town Council and Llanferres Community Council	September 2023
Cwm Taf Morgannwg University Health Board - Quality Governance Arrangements Joint Review Follow-up	August 2023
'Cracks in the Foundations' – Building Safety in Wales	August 2023
Maximising EU funding – the Structural Funds Programme and the Rural Development Programme	June 2023
Digital inclusion in Wales (including key questions for public bodies)	March 2023
Orthopaedic Services in Wales – Tackling the Waiting List Backlog	March 2023
Betsi Cadwaladr University Health Board – Review of Board Effectiveness	February 2023
Welsh Government purchase of Gilestone Farm	January 2023
Together we can – Community resilience and self-reliance	January 2023
A Picture of Flood Risk Management	December 2022
'A missed opportunity' – Social Enterprises	December 2022

Audit Wales national reports and other outputs (work in progress / planned)^{1, 2}

Title	Indicative publication date
Ukrainian refugee services	February 2024
Betsi Cadwaladr University Health Board – review of board effectiveness follow up	February 2024
A465 Section 2 – update	February 2024
NHS quality governance	March 2024
Local government digital strategy review – national summary	March 2024
Local government use of performance information, outcomes and service user perspective – national summary	March 2024
Affordable housing	Spring 2024
Active travel	Spring 2024

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¹ We will continue to keep our plans under constant review, taking account of the evolving external environment, our audit priorities, the context of our own resourcing and the capacity of audited bodies to engage with us. Follow up work could also lead to other outputs, as may other local audit work where we consider there is merit in a national summary output of some kind.

² We have also published to our website a paper – <u>Our work programme for 2023-2026</u> – that provides additional detail about our national work (including local thematic reviews). In addition to new work that we will be taking forward in 2023-24, the paper includes details about indicative topics for work to start in 2024-24 or 2025-26.

Title	Indicative publication date
Audit Committees. 'What does good look like?'. R&D work to understand the broad audit committee landscape across all sectors in Wales. Outputs to support Good Practice Exchange events and potential future audit work.	R&D work Sept – Dec 2023 Good Practice Event Spring 2024
NHS Workforce planning (national messages)	Late spring 2024
Cancer services	Late summer 2024
The senior public service	To be confirmed (scoping early 2024)
Challenges for the cultural sector	To be confirmed (starting in 2023-24)
Rebalancing care and support	To be confirmed (starting in 2023-24)
Tackling NHS waiting lists (local audit work at health boards)	To be confirmed (starting in 2023-24)
Access to education for children with Additional Learning Needs	To be confirmed (starting in 2023-24)
Addressing biodiversity decline (pan-public sector and at Natural Resources Wales)	R&D work underway September to December 2023. Data gathering with representative groups. Outputs will inform any further audit work. Pan-public sector review – Autumn 2024
Velindre Cancer Centre	To be confirmed (scoping)
Welsh Government capital and infrastructure investment	To be confirmed (scoping)

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Title	Indicative publication date
Further and higher education funding and oversight – Commission for Tertiary Education and Research	To be confirmed (scoping)

Good Practice Exchange events and resources

Title	Link to resource
The Good Practice Exchange – Our yearly round up of events and resources	December 2023
Integrity in the Public Sector 'Trust is built and maintained through competence, reliability, and honesty, as well as the building of genuine and sound relationships between the public sector and the public it serves. That means the public sector must be accountable for the management and delivery of public services and outcomes, for the direction and control of the work it does, the resources it manages, and for its behaviour and ethics.' This event will look at how public services can promote a culture of integrity.	5 December 2023 10:00 – 12:00 Online
Working in partnership to improve wellbeing This event will bring together the North Wales Insight Partnership, the Public Service Boards and the C4C community to share wellbeing plans across the North Wales region, as well as sharing the innovative work being undertaken by a range of sectors around wellbeing in our communities. The event will provide opportunities to discuss how we can connect all of this work to deliver real change.	24 October 2023 09:30 – 16:30 Cardiff date TBC
Strategy to Action: How digital makes a difference to everyday lives This event will take a practical and honest view at the digital landscape in Wales and will offer practical ideas for public and third sector organisations which will help them achieve the best value for money.	27 September 2023 09:00 – 13:00 – North Wales 5 October 2023 09:00 – 13:00 – Cardiff

Title	Link to resource
Podcast: Auditing Community Resilience In this edition of The Exchange, our Local Government team discuss some of the factors that cause poverty in Wales, as well as the value provided by social enterprises, and the importance of keeping wealth in communities.	<u>To listen</u>

Agenda Item 8



Report of the Chief Auditor

Governance and Audit Committee – 28 February 2024

Internal Audit Annual Plan Methodology Report 2024/25

Purpose: This report provides a briefing to the Governance

and Audit Committee on the methodology used to prepare the Internal Audit Annual Plan in advance of the Draft Internal Audit Annual Plan 2024/25

being reported to the Committee.

Policy Framework: None

Consultation: Legal, Finance, Access to Services

Report Author: Simon Cockings

Finance Officer: Ben Smith

Legal Officer: Stephen Holland

Access to Services

Officer:

Rhian Millar

For Information

1. Introduction

- 1.1 The Public Sector Internal Audit Standards (PSIAS) provide a framework for the delivery of a professional, independent and objective internal audit service and are mandatory for all internal audit providers in the public sector in the UK.
- 1.2 One of the requirements of the PSIAS is that an annual risk-based Internal Audit Plan must be prepared to determine the priorities of Internal Audit and to ensure they are consistent with the Council's goals. The Plan must allow sufficient audit coverage across the whole Council for the Chief Auditor to be able to provide an annual opinion to Council via the Section 151 Officer and the Governance and Audit Committee on the control environment covering corporate governance, risk management and internal control.

- 1.3 The Audit Plan should ensure that resources are targeted at the areas of the Council's work where it can provide most benefit by providing assurance over key risks and controls.
- 1.4 The Standards state that the Internal Audit Annual Plan must be discussed with senior management which in the Internal Audit Charter is defined as the Corporate Management Team before being reported to the Governance and Audit Committee for approval.
- 1.5 The draft version of the annual plan for 2024/25 will be reported to the Corporate Management Team for consultation prior to it being presented to the Governance and Audit Committee.
- 1.6 This report provides a briefing on the methodology used to prepare the Annual Plan in advance of the draft Plan for 2024/25 being reported to the Committee.
- 1.7 As reported in the Internal Audit Quarterly Monitoring reports that have been presented to the Audit Committee throughout 2023/24, the team has seen high levels of sickness absence as well as a period where there have been vacant posts in the team. This has had an impact on the team's ability to deliver some of the audits originally included in the audit plan for 2023/24. As a result, it is anticipated that a number of audits that were originally planned to be completed in 2023/24 may have to be carried forward to 2024/25.

2. Internal Audit Plan Methodology

- 2.1 The requirement to produce an Internal Audit Annual Plan is included in the PSIAS which are mandatory for all internal audit providers in the UK public sector.
- 2.2 An extract of the PSIAS requirements regarding internal audit planning is attached in Appendix 1.
- 2.3 The starting point for a risk-based audit approach is gaining an understanding of the Council's objectives and goals as well as the current key risks faced by the Council as recorded in the Risk Registers.
- 2.4 Information is gathered from a number of sources prior to the preparation of the detailed Audit Plan including:
 - Corporate and Directorate Risk Registers.
 - Areas of concern or request for audit coverage from management, Corporate Management Team, Heads of Service or the Audit Committee.
 - The Assurance Map which details other sources of assurance available both from internal and external sources.
 - Any recent or proposed significant changes to the Council's systems or operations.

- Previous audit results and Internal Audit's cumulative knowledge of systems and procedures across the Council.
- 2.5 A diagram that illustrates the internal audit annual planning process can be found in Appendix 2.
- 2.6 A risk assessment is undertaken for each audit which is used to determine the expected frequency of the review as part of the standard audit rolling programme. The risk assessment takes account of a wide range of factors which are grouped into the following categories:
 - Materiality e.g. income, expenditure.
 - Control Environment/Vulnerability e.g. previous frauds, staff turnover.
 - Management Concerns e.g. direct request for help, potential for embarrassment.
 - Sensitivity e.g. impact on service, effect on Council's welfare.
- 2.7 The outcome of the risk assessment is a risk index which is then used to determine the frequency of audit visits as shown in the following table:

Risk Index	Risk Factor	Frequency of Visit
0 – 19	Low	5 years
20 – 25	Medium/Low	4/5 years
26 – 40	Medium	3 years
41 – 49	Medium/High	2/3 years
50 +	High	1/2 years

- 2.8 In addition to the risk assessment process, a number of systems have traditionally been identified as fundamental e.g. Employee Services, Accounts Receivable, Main Accounting, Council Tax. The fundamental audits are those systems that are considered to be most significant to the achievement of the Council's objectives. From 2014/15, a risk-based approach was taken to determine the required frequency of these audits. Any audits which had received the highest level of assurance for 3 consecutive years were moved to a 2-year cycle with audits receiving a lower assurance rating being completed annually. From 2023/24 we revised the planned timetable for the fundamental audits, as summarised below:
 - i) Fundamental audits that receive a High Assurance rating are moved to a two-year audit cycle, with a full audit being completed every two years.
 - ii) Fundamental audits that receive a Substantial Assurance rating are moved to a two-year audit cycle, with a full audit being completed every two years. In addition to this a follow-up audit will be completed in the first year to re-test all Medium and/or High-Risk recommendations.

- iii) Fundamental audits that receive a Moderate Assurance rating remain on an annual audit cycle, with a full audit being completed every year.
- 2.9 A number of audits are undertaken on an annual basis rather than by the determination of risk e.g. grant certification audits where the work is required under the terms and conditions of the grant, the review of debts due to be written off, services where significant amounts of cash are handled, etc.
- 2.10 The use of the risk assessment process provides every audit in the Council's audit universe with a rolling audit programme which is also considered when developing the Audit Plan.
- 2.11 Each year, a Consultation Exercise is held with all Heads of Service and the Corporate Management Team, giving them the opportunity to comment on the audit coverage in their areas and to ensure that all risks within their services have been identified. Heads of Service may also request specific reviews or pieces of work to be undertaken by the Internal Audit Section which will add value to their service. All requests are considered in light of the total Internal Audit resources available.
- 2.12 The Consultation Exercise for the 2024/25 Audit Plan commenced in November 2023 and has seen a number of updates to the full list of audits across the entire Council, known as the 'Audit Universe'.
- 2.13 In order to demonstrate the linkage between the annual plan for 2024/25 and the Council's Corporate Priorities, the Consultation Exercise also included discussions with Heads of Service to determine which of the Corporate Priorities they felt the services in their areas most closely mapped to. Whilst it is acknowledged that some service areas could map to a number of different Corporate Priorities.
- 2.14 As requested by Committee, the 2024/25 Audit Plan will reflect this mapping so that Members are able to identify the link between the Plan and the Objectives of the Council. The links between the Corporate Priorities, Service Areas, the Audit Plan and the Annual Governance Statement are demonstrated in the illustration in Appendix 3.
- 2.15 Whilst the 2024/25 audit plan is currently being considered, it is envisaged that as in previous years the planned audits will be grouped in the following broad categories:
 - Council Governance & Control Audits cross-cutting reviews.
 - Fundamental Audits aimed at providing Section 151 Officer and Monitoring Officer Assurance.
 - Service Specific Audits aimed at providing other assurance, linked to the Corporate Priorities and as a result of the audit planning and consultation process and in line with the usual audit rolling programme.

- 2.16 Historically, a review of the Corporate and Directorate Risk Registers has also taken place as part of the audit planning process to ensure that where necessary, Internal Audit resources are targeted at the areas considered to be the highest risk. This has also been the case for the 2024/25 Audit Plan.
- 2.17 In addition to this, it was recommended as part of the PSIAS peer review that an assurance mapping exercise should be carried out to inform the audit planning process. This exercise has been completed, with the Assurance Map being updated in consultation with the Risk Owners and the Corporate Management Team.
- 2.18 The updated Assurance Map can be found in Appendix 4, together with a brief narrative explaining the process. The results of this exercise have also be taken into consideration when compiling the 2024/25 Audit Plan.
- 2.19 The ongoing review of the current year's audit plan also informs the planning process e.g. by identifying any emerging risks, new systems, developments or special investigations which may have a wider impact.
- 2.20 The risk assessment process and rolling programme, consultation exercise and review of the risk registers will provide the total number of audit days required in the Audit Plan for 2024/25 which then has to be matched against the audit resources available.
- 2.21 The audit resources available in 2024/25 is 9.1 full time equivalents excluding the Chief Auditor, unchanged from 2023/24.
- 2.22 The audit resources available have to allow for things such as annual leave, public holidays, training, administration, audit planning, sickness and a contingency to allow for unplanned or ad hoc work. This provides the productive audit days available to deliver the audit programme.
- 2.23 Inevitably, the required audit coverage will exceed the available audit resources leading to a further review of the required audit coverage. This review will again be risk based to ensure that the areas of greatest perceived risk are prioritised in consultation with the Director of Finance and the senior staff within the internal audit team.
- 2.24 The Internal Audit Annual Plan is reported to the Corporate Management Team and the Governance and Audit Committee at the start of each year for approval. However, the Annual Plan must remain a flexible document that reacts to changing risks and priorities over the course of the year. Updates are provided to the Governance and Audit Committee throughout the year via the Chief Auditors Monitoring Reports.

3 Integrated Assessment Implications

- 3.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
 - Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - Foster good relations between people who share a protected characteristic and those who do not.
 - Deliver better outcomes for those people who experience socioeconomic disadvantage
 - Consider opportunities for people to use the Welsh language
 - Treat the Welsh language no less favourably than English.
 - Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.
- 3.2 The Well-being of Future Generations (Wales) Act 2015 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.
- 3.3 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.
- 3.4 The completion of the Integrated Impact Assessment Screening revealed that:
 - The Internal Audit Annual Plan Methodology Report has a low positive impact across all groups.
 - It has been subject to consultation with the Director of Finance & S151 Officer, Legal, Access to Services and the Corporate Management Team.
 - All Well-being of Future Generations Act considerations are positive and any risks identified are low.
 - The overall impact of the Internal Audit Annual Plan Methodology Report is positive as it will support the Authority in its requirement to protect public funds.

4. Financial Implications

4.1 There are no financial implications associated with this report.

5. Legal Implications

5.1 There are no legal implications associated with this report.

Background Papers: None.

Appendices: Appendix 1 – Extract from Public Sector Internal Audit Standards

Appendix 2 – Internal Audit Annual Planning Process

Appendix 3 – Audit Plan Mapped Against Corporate Priorities Appendix 4 – City & County of Swansea Assurance Map Appendix 5 – Integrated Impact Assessment Screening Form

Extract from Public Sector Internal Audit Standards

2010 Planning

The chief audit executive must establish risk-based plans to determine the priorities of the internal audit activity, consistent with the organisation's goals.

Interpretation:

To develop the risk-based plan, the chief audit executive consults with senior management and the board and obtains an understanding of the organisation's strategies, key business objectives, associated risks and risk management processes. The chief audit executive must review and adjust the plan, as necessary, in response to changes in the organisation's business, risks, operations, programmes, systems, and controls.

Public sector requirement

The risk-based plan must take into account the requirement to produce an annual internal audit opinion and the assurance framework. It must incorporate or be linked to a strategic or high-level statement of how the internal audit service will be delivered and developed in accordance with the internal audit charter and how it links to the organisational objectives and priorities.

2010.A1

The internal audit activity's plan of engagements must be based on a documented risk assessment, undertaken at least annually. The input of senior management and the board must be considered in this process.

2010.A2

The chief audit executive must identify and consider the expectations of senior management, the board and other stakeholders for internal audit opinions and other conclusions.

2010.C1

The chief audit executive should consider accepting proposed consulting engagements based on the engagement's potential to improve management of risks, add value and improve the organisation's operations. Accepted engagements must be included in the plan.

2020 Communication and Approval

The chief audit executive must communicate the internal audit activity's plans and resource requirements, including significant interim changes, to senior management and the board for review and approval. The chief audit executive must also communicate the impact of resource limitations.

2030 Resource Management

The chief audit executive must ensure that internal audit resources are appropriate, sufficient and effectively deployed to achieve the approved plan.

Interpretation:

Appropriate refers to the mix of knowledge, skills and other competencies needed to perform the plan. Sufficient refers to the quantity of resources needed to accomplish the plan. Resources are effectively deployed when they are used in a way that optimises the achievement of the approved plan.

Public sector requirement

The risk-based plan must explain how internal audit's resource requirements have been assessed.

Where the chief audit executive believes that the level of agreed resources will impact adversely on the provision of the annual internal audit opinion, the consequences must be brought to the attention of the board.

Internal Audit Annual Planning Process

Inputs

- Consultation
 Exercise
- Corporate Risk Register
- Directorate Risk Register
- Requests from Audit Committee
- Senior
 Management
 Assurance
 Statements
- Audit rolling programme & risk scores
- Council Plans
- Deferred audits
- CMT Requests

Considerations

- Assurance Map
- Corporate Priorities
- Risk Assessments
- Period since last audit
- Input from HoS and Directors
- Internal Audit Resources
- Specific requests from HoS/Directors
- Timing of reviews
- Consultation
 Exercise

Internal Audit Plan

- Risk Based
- PSIAS Compliance
- Fundamental Systems for S151 Assurance
- Service Specific Audits
- Cross Cutting Audits
- Adequate audit coverage
- Inform the Chief Auditors Annual Opinion
- CMT review / approval
- Audit Committee review / approval

Ongoing Plan Review

- New Systems
- New Processes
- Additional requests for ad-hoc reviews
- Unplanned work
- Client availability
- Audit resource availability
- Emerging risks
- Requests from Audit Committee
- Investigations
- Ad-hoc added value work

Amendments

- Changes made if required
- Informs future audit plans
- Quarterly progress update to Audit
 Committee
- Contingency for any ad hoc or unplanned audit requests
- Mid-year changes within the council
- External factors

Organisation

Objectives

Annual

Governance

Statement

Audit Areas Child & Family Services Corporate Priorities Adult Services Safeguarding People Social Services Directorate Services from Harm **Social Services Finance Audits Education Planning & Resources Improving Education** and Skills **Achievement & Partnership Service Vulnerable Learner Service Transforming our Economy and Education Grants Audit Reviews** Infrastructure **Governance Framework Building Services Tackling Poverty and Property Services Enabling Communities Highways & Transportation** Internal Audit Assurance **Cultural Services Delivering on Nature Planning & City Regeneration Recovery and Climate Annual Internal** Change **Audit Opinion Commissioning & Tackling Poverty Transformation and Financial Resilience Housing & Public Health** Planning & City Regeneration Waste Management & Parks **Other Assurance Communications & Marketing Section 151 Officer Digital & Customer Services** Assurance Service Centre, HR & OD **Commercial Services Monitoring Officer Assurance Fundamental Systems**

Financial Services

Legal, Dem Services & Business Intel.

Cross Cutting & Contract Audits

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Assurance Map Guidance Note

Source & Level of Assurance - Three Lines of Defence

Assurance can come from many sources within an organisation. A concept for helping to identify and understand the different contributions the various sources can provide is the Three Lines of Defence model. By defining the sources of assurance in three broad categories, it helps to understand how each contributes to the overall level of assurance provided and how best they can be integrated and mutually supportive. For example, management assurances could be harnessed to provide coverage of routine operations, with internal audit activity targeted at riskier or more complex areas.

First Line of Defence – Level 1 – Management Assurance

Within the 'front-line' or business operational areas, there will be many arrangements established that can be used to derive assurance on how well objectives are being met and risks managed; for example, good policy and performance data, monitoring statistics, risk registers, reports on the routine system controls and other management information.

Nature of assurance: This comes direct from those responsible for delivering specific objectives or operation; it provides assurance that performance is monitored, risks are identified and addressed and objectives are being achieved. This type of assurance may lack independence and objectivity, but its value is that it comes from those who know the business, culture and day-to-day challenges.

Second Line of Defence – Level 2 – Other Internal Assurance

This work is associated with oversight of management activity. It is separate from those responsible for delivery, but not independent of the organisation's management chain. This could typically include compliance assessments or reviews carried out to determine that policy or quality arrangements are being met in line with expectations for specific areas of risk across the organisation.

Nature of assurance: The assurance provides valuable management insight into how well work is being carried out in line with set expectations and policy or regulatory considerations. It will be distinct from and more objective than first line assurance.

Third Line of Defence – Level 3 – Other Independent Assurance & External Assurance

This relates to independent and more objective assurance and focuses on the role of internal audit, which carries out a programme of work specifically designed to provide the Section 151 Officer with an independent and objective opinion on the framework of governance, risk management and control. Internal audit will place reliance upon assurance mechanisms in the first and second lines of defence, where possible, to enable it to direct its resources most effectively, on areas of highest risk or where there are gaps or weaknesses in other assurance arrangements. It may also take assurance from other independent assurance providers operating in the third line, such as those provided by independent regulators, for example.

As an additional line of assurance, sitting outside of the internal assurance framework and the Three Lines of Defence model, are external auditors, who are external to the organisation with a statutory responsibility for certification audit of the financial statements.

Nature of assurance: Independent of the first and second lines of defence. Internal audit operates to professional and ethical standards in carrying out its work, independent of the management line and associated responsibilities. External audit operates similarly.

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Risk ID 153 Risk Title Safeguarding Risk Level Corporate Page 77	If our safeguarding arrangements are not sufficiently robust (particularly with regards being able to fund, recruit and retain sufficient qualified social workers; ensure placement sufficiency for looked after children and be able to provide or commission sufficient social care for adults with assessed care and support needs), then we will not be doing everything we possibly can to prevent the death, injury or neglect of a child or vulnerable adult and consequential reputational damage.	High	High	Red	David Howes / Angela Morgan	>Work with the Health Board to review the current level of partner financial contributions to the funding of integrated intermediate care services (inc maximising regional and national income opportunities) to ensure an effective service offer that reduces or delays recourse to long term managed care (within the Council¿s overall available financial resources) > Monitor the effectiveness of safeguarding arrangements bimonthly at the childrens and adults performance scrutiny panels, the corporate safeguarding board and the regional safeguarding board, quarterly at CMT and monthly at PFM and take appropriate remedial action > Invest in the Council's direct care provision services to maximise capacity and reduce reliance on independently commissioned care services for adults (within the Council's	>Directors annual report to Council >Fortnightly meetings with Cabinet Members	>Two dedicated Scrutiny Panels in place to scrutinise Social Services Work and Performance >Safeguarding and tackling poverty corporate development committee >Bi monthly performance reporting to CMT >Monthly p&fm	> Corporate transformation board oversight > Corporate Safeguarding Board > Local authority designated officers for safeguarding within Social Services. > Mandatory Corporate Safeguarding Training in place for Staff and Members. > Corporate Priority > Corporate Plan > Corporate Safeguarding Troiling in place for Staff and Members. > Corporate Priority > Corporate Plan > Corporate Safeguarding Policy	> Internal Audit of Safeguar- ding >Internal audit of DBS	>Regional safeguardi ng board > CIW inspection regime >Regional partnershi p board	>Audit Wales	>Currently included as part of standard rolling audit schedule, repeated based on audit risk score.	>Safeguar ding cross cutting audit	Cross Cutting – Council Governance and Control – Safeguarding People from Harm

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						Government as to how									
						they can safely									
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						policy commitment									
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Page 78						children									
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78						avoid inadvertently									
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						models for the									
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						independent									
						domiciliary care									
						provision to build									
						capacity inc. by supporting providers									
						to provide a fair and									
						competitive wage to									
						their staff (within the									
						Council's									
						overall available									
						financial resources)									
						>Invest in increasing									
						the number of Foster Wales Swansea foster									
						carers and the number									
						of in-house									
						residential care beds									
						for children (both									
						locally and regionally)									

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Page 79						corporate centre									
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Φ.						a sufficient workforce									
79						infrastructure) to									
						ensure that there are									
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						>Implement a weekly									
						Directorate workforce									
						planning meeting to									
						consider and prioritise									
						all new recruitment									
						requests to ensure									
						that new recruitment is									
						focussed on the									
						maintenance of a safe									
						and effective service									
						and complies with									
						current spending									
						restrictions and									
						supports delivery of									
						the Council's MTFP									
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						Level 1	T	Level and Source Level 2	ce of Assurance		Level 3		Internal Audit	Planned Internal	
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			٦	Overall RAG Status	Risk Owner / Updater		Oth	er <u>Internal</u> Assura	ance	Other II	ndependent A	ssurance	110000	Work	Audit Plan Area
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						>Prioritise and target									
						resources at									
						maintaining care and									
						support for those									
						individuals in most critical need or									
						at risk of suffering									
						harm as part of the									
						emergency planning infrastructure and re-									
						prioritisation of the									
						Councils COVID-19									
						Recovery Plan									
						>Remodel the									
Page 80						workforce									
ge						infrastructure for social									
CD CD						services including									
õ						investment in capacity									
						of alternatively									
						qualified staff (both									
						frontline and back-									
						office staff) to take on									
						functions that can be									
						safely delivered by a									
						non-registrant									
						workforce (within the									
						Council's overall									
						financial resources)									
						>Recruit agency social									
						workers to cover									
						critical gaps in social									
						work capacity									
						>Prioritise maintaining									
						investment in and									
						maximising income for									
						the funding of									
			1			prevention and									
						wellbeing services that									
						reduce or delay									
			1			recourse to statutory									
			1			services and managed									
			1			care and support for									
						children and									

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		Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan
						adults who would otherwise develop care and support needs (within the Council's overall available financial resources) >Implement a `grow your own' strategy to support an increase in the number of internal staff to pursue the social work qualification >Prioritise a sufficient budget allocation (within the Council's overall available financial resources) to maintain the Council meeting at least the minimum level of statutory service across children's and adults services >Implement a social work academy in children services to support newly qualified staff to gain the skills and experience to become competent child protection practitioners >Work with NPT Council and the Swansea Bay Health Board to implement a recruitment strategy for overseas staff to fill critical workforce shortages across health and social care									

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		Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
Risk ID	If we fail to					>As part of the	>Quarterly	>Dedicated	>Quarterly	>Audit		>WAO		>Saving	
Risk Title Financial Control - Budgetary Control, Annual Budget and MTFP Delivery Risk Level Corporate Page 0 0 22	deliver the Council's MTFP, budget and maintain sufficient in year budgetary financial control, and in particular do not ensure we contain service overspending, especially now inflation is embedded at levels far above the expectation of around 2%, then we will not be able to respond appropriately to continuing austerity, demographic pressures, increasing demand and pay and price pressures, potentially reopened equal pay risks across local government, and changing public expectations in both	Very High	Very High	Red	Ben Smith / Jeff Dong	quarterly Revenue and Capital Budget Monitoring Reports to Cabinet, continue to monitor and report on slippage in Capital schemes and the effects on Capital schemes of price inflation affecting supplies and materials, including mitigating actions such as agreeing cost increases through FPR7 procedures Identify uncontainable inflation pressures as variances in the monthly PFM budget reporting cycles and quarterly through to Cabinet. Compliance within Financial Procedure rules so that spend remains within budget, including permitted Virements Services to ensure that inflation pressures are managed and contained within cash limits agreed at the time the budget and MFTP are set. Extant spending restrictions published to all staff and reviewed and many	monitoring reports to Council and Cabinet >Collaborative Officer/ Member budget setting process in place. >Overspend and under delivery of savings openly and transparently escalated and reported to Cabinet and Council by S151 Officer.	Scrutiny Service Improvement and Finance Performance Panel consider and scrutinise the budget on a quarterly basis. > Corporate Services & Financial Resilience Service Transformatio n Committee established with remit to develop and link all transformation co productions and medium term planning work together	monitoring reports to Audit Committee > Monthly PFM monitoring in place. Transform & Future Council PDC. > Many controls continue to be exercised by CMT in relation to filling vacant posts, restructures, regrades and committing contract sums. > Budget holders required to monitor and report any budget variances to monthly P&FM for review. > Reshaping Board launched to challenge delivery/ non-delivery and accelerate timescales.	Committee provide challenge, oversight and assurance >Periodic budget monitoring reports go to Audit Committee >Budget reports included in the 2022/23 workplan for Audit Committee		review currently underway in relation to the MTFP aspects of Sustain. Swansea. >AW recently published financial resilience national report and showed clearly Swansea position had strengthened considerably boosted by the £17m addition to reserves in 19-20 outturn. >Risks in current year managed temporarily by drawing down from those increased reserves. > AW about to update financial resilience scores in January		and other budget mgt to be included as part of the Transform ation Plans >Fundame ntal audits included in the plan	Service Specific / Fundamental Audits - Section 151 Officer Assurance

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	current and					controls continue to be						2024 for 22-			
	future years	-				directly exercised by CMT in						23 accounts data and			
						relation to filling						will doing			
						vacant posts,						refreshed			
						restructures, regrades						inspection			
						and committing						work on			
						contract sums						financial			
						>Agreed and well						resilience			
						established quarterly						locally in			
						reporting plan in place						2024			
						to document and record at Cabinet all									
_						actions									
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J.	3					services to contain									
raye oo	Ď.					spending									
U	9					>PFM (Performance									
						and Financial									
						Management/Monitori									
						understood by all									
						mechanism to S151									
						compliance									
						S151 Officer and						1			
						report more sizeable						1			
						issues for decision									
						through Cabinet on									
						contingency (£3 5m) in									
						Management/Monitoring) process monthly is well established and understood by all officers with appropriate escalation mechanism to S151 Officer, Chief Executive and Cabinet if non compliance > Agree modest virements in conjunction with the S151 Officer and report more sizeable									

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									ce of Assurance				Internal	Planned	
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						>The S151 Officer to							1	I	
						issue forthright and formal advice on the									
						adequacy of budgets as part of budget									
						setting, including the central									
						inflation provision and contingency over the									
						medium term taking into account all known pressures including									
_						prices. >Further development									
Page 84						work to progress on transformation agenda									
84						over medium term through Achieving									
						Better Together reshaping programme.									

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		Current Impact	<u>ke</u>	AG	er/	Management Assurance	Council/	Scrutiny	Other	Internal	Other	External			E P
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Risk ID	If the council		1			>Communication to			>Member of	>Various	>Public	>WAO	>Range of	>IT audits	
222	does not have					users to keep up			the Cyber	IT /	Services	review	IT audits	included in	
	robust cyber,					awareness			Security	System	Network	undertake	in the plan	the	_
Risk Title	data and					>Constant monitoring			Information	audits in	(PSN)	an IT audit	to be	2024/25	ınci
Digital, data and	digital security					and surveillance of			Sharing	Audit Plan.	complianc	each year as	completed	plan as	્રિ
digital security	measures and					cyber risks by Security			Partnership	>GDPR	e	part of	as part of	per the	e.
Risk Level	systems and behaviours in					Office using system and tools in place.			which is a joint industry and	audits.	certificate – tested	reviewing financial	the rolling audit	rolling programm	ıtı
Corporate	place,					Situation reported			government		annually.	accounts	schedule.	e and	됴
Corporato	embedded					monthly to Digital			initiative to		armaany.	>WAO	concadio.	additional	anc
	and working					Services Board and			exchange			undertook		ICT	uc
	as best as					Information			cyber threat			an all Wales		reviews as	atio
	they can be					Governance Board			information			review last		a result of	Jrm
Pa	then it will not be protected					chaired by SIRO >DR test training			>Part of Wales Warning			year and the findings		the annual consultatio	ısfc
Page 85	from cyber					completed for Digital			Advice and			were shared		n exercise	ra.
8	threats,					Services team.			Reporting			in closed		and review	
Q	disruption to					>Simulated test of a			Point to share			sessions		of risk	its
	service					cyber attack. Training			cyber threats			with G&AC		registers.	ρη
	delivery,					to be			and defences			and Cabinet			_
	possible loss of information					provided to HoS and CMT			with other public bodies			/ CMT			pu
	including					>Simulated cyber-			>New regional						s a
	confidential					attacks on staff carried			multi-agency						<u>6</u>
	information					out periodically to			cyber cell						e S
	and					measure their actions,			meetings						rS
	associated fines and					identify weaknesses			being attended to share						me
	reputational					and improve knowledge			intelligence						sto
	damage.					>Cyber security			and actions						C
	g					guidance and cyber			>PSN						∞
					e	scams staffnet page			Certification						jita
					arl	>Cyber security			Achieved						Dic
					O I	strategy in place			>Cyber						1
					ر .	>Digital services continually working			essential accreditation						Service Specific – Digital & Customer Services and IT Audits – Transformation and Future Council
					by	with internal audit and			achieved						be
					ćen	emergency planning to			>Member of						ÇQ ÇQ
		도			ack	further improve the			Wales WARP						Zi Zi
		Η̈́	돌		μΓ	ICT disaster recovery			& CISP						Sei
		Very High	Medium	Red	Sarah Lackenby / Jo Harley	plan >LRF Cyber exercise			sharing knowledge of						
		×	Ž	ď	Š	>SIRO training			threats.						
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			7	Overall RAG	Risk										
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Г			1			>Comms. Issued to		1	>Discussed at			1	I		1 1
						staff and members			IG Board –						
						detailing impact of			standing						
						cyber attack at other			agenda item						
						councils.									
						>Software purchased									
						to protect against									
						malware attacks									
						>More use of secure									
						cloud storage.									

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Diale ID	If we do not	ı	1		1	l As a Catamania	LEMO	> FMC have	> NA. (14) = 21 = 11	LEMO	LEMO		\ C4===d==d	. Adika :	
Risk ID 235 Risk Title Emergency Planning, Resilience and Business Continuity Risk Level Corporate Page 87	If we do not have sufficient emergency planning, resilience and business continuity arrangements in place, then we will not be able to respond effectively in an emergency, provide the necessary civic leadership or continue to run vital services and ensure compliance with the legal requirements of the Civic Contingencies Act 2004 as a Category 1 Responder, which may lead to reputational damage, a loss of political and community confidence, increased potential for loss of life, prolonged	Medium	Medium	Amber	Ness Young / Craig Gimblett	As a Category 1 responder under the Civil Contingencies Act, Swansea Council has a legal requirement to plan for and respond to emergencies, to do this the following will be maintained and monitored by the CHSEMWS manager, with any gap or area of concern escalated to the CX. > The authorities Major Incident Plan will be reviewed annually, and tested on a 3 yearly basis unless activated, after which a review of the response will be provided to CMT, including any areas for improvement or additional resources needed to ensure we meet all legal obligations and can effectively respond to an emergency. > An annual delivery plan which clearly identifies priorities to address any gaps, or coming statutory needs, will be developed and delivered by the Emergency Management Service,	>EMS Manager briefs leader/cabinet as required>CMT receives regular updates on key planning and agreement as required from EMS manager. >EMS manager meets monthly with the portfolio holder for political oversight and visibility. EMS Manager represents Swansea Council at Strategic level within SWLRF and Pan Wales Forums.	>EMS have been called to several Scrutiny panels, with none currently in the calendar.	>Multi agency exercising and training >Internal development/ training of new officers including newly created assistants post. >Joint work programs and information sharing with Welsh Civil Contingencies managers and South Wales Resilience Team. >Service Manager part of the National and Regional PSPG group and CONTEST Group with local PSPG arrangements in-place. >EMS is embedded within the SWLRF at Executive, Strategic and Tactical levels BC plans in-place with each HoS.	>EMS were audited in Nov 22 with an outcome of High assurance rating.	>EMS have been part of the consultatio n group for Welsh Governme nts Civil Contingen cies review this will lead to independe nt external audit of Civil Contingen cies when final structures are establishe d in 2023. > The Protect Act, which places responsibil ity for CT planning based on organisati onal risk, as part of this a new Regulator will be appointed to enforce complianc e/breache s and audit	>Independe nt external Audits will by conducted through Welsh Government and the new regulator appointed to enforce the Protect Duty in 2023/24 to establish maturity and mitigation.	>Standard audits in the plan cover this area on rolling basis.	>Audits in the plan to be completed in as part of the rolling programm e include disaster recovery & Business Continuity, Emergenc y Planning & Business Continuity	Service Specific Audits – Communications / ICT / Council wide assurance

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Business Risk	npact kelihood					Oth	er <u>Internal</u> Assur	ance	Other <u>II</u>	ndependent A	ssurance	110000	Work	n Area
	Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
recovery		<u> </u>			to ensure compliance			>Plans and		arrangeme				
following a major/busines s continuity incident which will deny service to the public and increase operating costs. Page 88	1				and maintenance of our ability to effectively respond and protect the organisation and communities. >Maintain and review on an annual basis all subordinate plans, including Mass Fatalities, Flood, Offsite COMAH Plan, Rest Centre Plan. with exercising as appropriate >Deliver a duty officer rota to effectively respond to emergencies available 24 hours per day, 365 days per year, this will be shared with all key external and internal partners including CMT to ensure a timely response can be acheived. >Annually review all identified risks, with relevant partner agencies that are present within the borders of Swansea Council to ensure control measures remain relevant and proportionate. >Ensure that all HoS review their business			Action cards reviewed annually and EMS audited in 2022. >Collaborative working with SWP on call out protocols in-place and reviewed. >ACT App and free training promoted across Authority. Local Partner CT comms strategy and alerts system established.		nts.				

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	Business Risk	+ + + + + + + + + + + + + + + + + + +	00	Status	Opc		Otti	er <u>internar</u> Assure		Other <u>II</u>	<u>raependent</u> F	Surance			n A
		Current Impact	Current Likelihood	Overall RAG	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
L dife oa						continuity Plans on an annual basis, with a confirmation provided to ensure governance is in-place via reporting to CMT for compliance > Review each year for all significant risks the Emergency Management Service (EMS) guidance, procedures and action cards. > Arrange for appropriate Strategic & Tactical Officer to be delivered by SWLRF, to ensure ongoing competence within key officers, this will be									
						augmented by internal training and exercise participation to protect the organisation, and maintain our ability to respond									

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						Level 1	I	Level and Sour	ce of Assurance		Level 3		Internal Audit	Planned Internal	
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		Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
Risk ID	If the		1			To ensure the	>H&S	>H&S	>Member of	>H&S	> H&S		>Standard	>Health,	
Risk ID 236 Risk Title Health & Safety Risk Level Corporate Page 900	Authority does not have a robust framework of Health & Safety Policies and procedures that are reviewed regularly, or in the event of significant change, it may lead to legal non-compliance, the realisation of adverse events including reputational damage, injury, financial loss and litigation by regulators.	High	Low	Amber	Ness Young / Craig Gimblett	Authority meets it's legal responsibilities the following will be implemented and monitored. >Review the statutory Corporate H&S Policy and arrangements under full consultation with the organisation and TU's on a 3 yearly cycle, or when there is significant statute change or on the appointment of a new CX or Leader. Communicate changes to the Corporate H&S Policy to the organisation via H&S Alert and published on Staffnet. >HR to provide a copy of the Corporate H&S Policy to all new starters prior to commencement of employment, and be covered during induction, and completion of Mandatory H&S training to meet legal compliance, clarify roles and responsibilities and avoid accidents, ill health, reputational damage and the potential for legal/financial penalties.	Manager provides regular updates, reports, presentations, and statistics. to CMT. >H&S Manager meets monthly with portfolio holder to provide briefing and political oversight and awareness. >Accident Statistics and investigations finding provided to all H&S Committees' and sub groups.	Manager has provided updates to numerous scrutiny panels, none currently in diary. > Service has been fully audited internally in 2019.	British Association of Counsellors and Psychotherapi sts (Bacp). >Directors H&S Committees & Sub Safety Groups >Increased accessibility to H&S training via teams and online. >Policy development and review plan in-place under full consultation. >Officer representation at trade union meetings. >Additional resources placed in Occupational Health (31/03/230 & Stress Management and Counselling, with extension of Psychological Support project until 31/03/23	Audit Plan	Manager represents Swansea on a Pan Wales/regi onal basis as part of the Managers forum to share best practise and coproduce where appropriat e.		audits in the plan already cover this area.	Safey & Wellbeing audit on the rolling programm e	Service Specific Audits – Communications / ICT / Council wide assurance

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>Each Director or their > New			
ensure a minimum of management			
a Bi-annual H&S software			
Committee, which will management			
receive all minutes of package due			
lower level H&S			
Groups, statistics and implementatio			
information from the n March 2023.			
CHSEMWS, including > SEQOHS			
any regulatory activity accreditation submission			
HSE/M&WWFRS and and			
resolve any unaddressed risks, due March 2023.			
with an agreed 2023.			
timeframe for For evaluation			
completion.			
>Review all H&S Government			
policies and guidance Gold			
under full consultation Corporate			
every 3 years, in the Health			
case of significant Standard			
change through October 2023.			
legislation or if an			
adverse incident			
identifies the need for			
review. Monitor and			
report as part of the			
Corporate HSW action			
plan, which will be			
updated on-line			
quarterly, with reports			
on progress			
submitted to each			
Directors H&S			
committee with a			
formal update on an			
annual basis to CMT.			
>Publish a Health,			
Safety & Wellbeing			
Action plan on a rolling			

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	Business	Risk	ب	Current Likelihood	Overall RAG Status	Risk Owner / Updater			or <u>mitornar</u> ricoard			, a openaent	004141100			Audit Plan Area
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				1			2 year basis which	I						1	1	1
							2-year basis, which will be ratified by the									
							CX. This will set out its									
							priorities, setting clear									
							targets for actions									
							such as training and									
							development to									
							maintain competence,									
							improvements and									
							KPI's. This will be									
							monitored by the									
							CHSEMWS Manager									
							with non-compliance									
т							or areas of concern									
a							escalated to CMT who									
Page 92							will receive an annual									
9							update.									
2							A planned schedule									
							of H&S Audits and									
							Inspections, including									
							Fire Safety will be									
							carried out across the									
							authority based on									
							Risk. This will result in									
							a report submitted to									
							the manager/HoS									
							identifying best									
							practise									
							and any areas for									
							improvement,									
							including action plans									
							where required. This									
							will be monitored by									
							the CHSEMWS									
							Manager and fed into									
							the Departmental H&S									
							& Directors H&S									
							Committees to ensure									
							action.									
							>An annual									
							programme of H&S									
							training will be									
				1			delivered to ensure									

1								Level and Source	e of Assurance				Internal	Planned	
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	Business Risk		poor	Statu	npda		Oth	er <u>Internal</u> Assura	ince	Other <u>II</u>	<u>ndependent</u> A	ssurance		Work	n Area
		Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan
	Page 93					staff are trained, and to maintain competence as a legal requirement all Health, Safety & Wellbeing Training delivered by the service will be corporately. All HoS are required to annually review mandatory, statutory and role specific training for their 23/11/2023 Tolerate 31/03/2024 Current Control Measures Last Update Projected Risk Response Completion areas, and ensure all locally arranged and delivered training is recorded. >All accidents/near misses will be reported to the CHSEMWS, with initial investigation by the									
						service area. All RIDDOR reportable incidents will be reported to HSE, investigated, with a formal accident report and action plan as required. This information will be provided to H&S committees to prevent reoccurrence which could lead to injury, loss and legal penalties. An annual									

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							accident report complete with trend									
							analysis will be									
							submitted to CMT,									
							with any identified									
							gaps (i.e. Training									
							agreed as priority									
							areas for development									
							in the following year,									
							or sooner if required).									
							>The Authority is									
							required by law to									
١.	_						Have a Corporate H&S Policy and									
9	Page 94						arrangements in-									
3	Qe						place, signed by									
ì	9						the Chief Executive &									
-	4						Leader. This will be									
							reviewed under full									
							consultation with the									
							organisation and TU's									
							on a 3 yearly cycle,									
							significant statute									
							change or on the									
							appointment of a new CX or Leader, this will									
							be communicated to									
							the organisation via									
							H&S Alert, and									
							published on Staffnet.									
							> A copy of the									
							Corporate H&S Policy									
							will be provided by HR									
							to all new starters prior									
							to commencement of									
							employment, and be									
							covered during induction, and									
							completion of									
							Mandatory H&S									
							training to meet legal									
							compliance, clarify									
							roles and									
							responsibilities and									

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	Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			
					avoid accidents, ill									Τ
					health, reputational damage and the									
					potential for legal/financial									
					penalties.									
					> Each Director or their delegated HoS is									
					responsible for									
					ensuring a minimum of a Bi-annual H&S									
					Committee, this will									
					receive all minutes of lower level H&S									
					Groups, statistics and									l
					information from the CHSEMWS, including									
					any regulatory activity									
					from the HSE/M&			1	I	I	1	1	1	П

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		Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
Risk ID	If the local		1			>Work with partners to	> Cahinet	> Regular	> Regional	Γ	>Collabor	>Independe	>Number	> Regen	
Risk ID 269 Risk Title Delivering th Regeneratio Programme Risk Level Corporate Page 906		Medium	Medium	Amber	Mark Wade / Phillip Holmes	>Work with partners to deliver the Swansea Bay City Deal to attract investment across the region to deliver highly skilled and well-paid jobs, with outcomes and programme achieved in line with the City Deal Funding Agreement. >Continue dialogue with Welsh Government on viability funding to support Urban Splash investment >Preparations required to ensure completion of Copr Bay project following contractor entering administration >Urban Splash now appointed as long-term investment partner to deliver future phases of investment and to capitalise on the progress made via city deal projects. Initial design phases underway.	> Cabinet considered economic recovery plan > Cabinet considered FPR7 where appropriate > Quarterly PI reporting via DART.	> Regular scrutiny undertaken on post Covid economic recovery and specifically on phase 1 arena/digital district project > Regeneration Dashboard regularly reported to Scrutiny	> Regional directors and regional transport forum improved regional and joint working as a precursor to the formation of the CJC > Deliver Covid Economic Recovery Plan in collaboration with Regeneration Swansea partners.		>Collabor ate With Welsh Governme nt On Regional Economic Framewor k >Gateway Review for City Deal projects undertake n by independe ent evaluation undertake n of Kingsway project. >City Deal Regional Scrutiny Panel overview of progress on Swansea Waterfront City project >Reportin g of programm e outputs to funding bodies, WG,	>Independe nt external Audits will by conducted through Welsh Government's Transfrming Towns funding, and UK Government's SPF programme as per their grant funding audit requirement s	>Number of Regen and Planning audits included on the audit plan to be completed on a rolling basis.	> Regen and Planning audits included on the 24/25 audit plan	Service Specific Audits - Planning & City Regeneration /Transformation & Infrastructure

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	Current Impact	Current Likelihood	Overall RAG	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan
the well-being										WEFO				
of Swansea										HLF etc.				
citizens.														

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Busine	ss Risk	*	poor	Status	Upda		Oth	er <u>Internal</u> Assur	ance	Other <u>I</u>	<u>ndependent</u> A	Assurance		Work	n Are
		Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
Risk ID	If there is		1			>Provide targeted	>Cabinet	>Part of	>Reports to		>Part of	>WAO	>Standard	>Audits	
Risk Title Impact of Poverty Risk Level Corporate Page 90	in there is increased demand on Council services due to an increased number of residents experiencing the impact of poverty due to the pandemic and cost of living pressures. Then the impact includes increased debt, reduction in household income and negative impact on health and well-being.	Medium	Medium	Amber	Amy Hawkins / Diane Rowden	advice on financial inclusion to people who are struggling with accessing the support to manage their debts, to address their needs in a timely, effective manner. > Provide weekly access to Welfare Rights Advice helpline for frontline social care staff to improve their knowledge on benefit entitlements and directly apply this to the people they support in order to increase take-up of benefits. > Support people to gain employment through referrals into mentoring and development of employability skills as part of an agreed personal development plan, to improve the number of people increasing their household income through employment. > Directly support people through employment. > Directly support people through employment. > Directly support they require in a place and time that meets their needs, to address the impacts of poverty and	Member briefings, Cabinet reports where applicable	annual scrutiny programme looking at the corporate priority of Tackling Poverty >Part of Adult Services Performance Scrutiny quarterly performance reports	>Reports to CMT on progress and actions required, >Reports to Audit Committee following WAO report on Tackling Poverty and associated action plan. >Included in the corporate Transformatio n Plan projects focused on Tackling Poverty and Enabling Communities, reports via Transformatio n Board >Internal cross directorate Poverty Forum		Part of Poverty Partnershi p Forum, multi- agency forum.	reviews (x3) on the challenges of alleviating and tackling poverty.	rolling audit schedule, repeated based on audit risk score.	>Audits included in the 'Poverty' area of the audit plan as a result of consultatio n to be compelete d in rotation.	Service Specific Audits – Commissioning & Tackling Poverty Safeguarding & Poverty

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		Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
	Page 99					its effects on their health and well-being >Increased demand on council services due to an increased number of residents experiencing the impact of poverty due to the cost of living crisis and the ongoing impact of the pandemic. The impact includes increased debt, reduction in household income and negative impact on health and well-being. The cost of living payments have been automatically been paid to those who we have details for other's the online application is open. Additional funding has been allocated for energy									
						crisis payments which residents are accessing. Further funding has been allocated to community and voluntary organisations for addressing food poverty and addressing period poverty, along with new 'holiday food' schemes for Summer 2023.									

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								ce of Assurance				Internal	Planned	
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Business Risk	;	hood	Statu	Updg		Oth	er <u>Internal</u> Assura	ance	Other <u>II</u>	<u>ndependent</u> A	ssurance		VVOIK	an Ar
	Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
Page 100					>The provision of Employability support, Debt and Benefit advice and guidance commissioned and in- house, increase take up of benefit entitlements, skills support and administration of Covid Self isolation payments. Work across the Authority through the Poverty Forum and with external partners through the Poverty Partnership Forum to identify risk management strategies to mitigate the impact >Co-ordinate targeted and time-bound grant schemes for helping people with Cost of									
					Living challenges (e.g. fuel poverty) to reduce the impact of poverty on people and businesses.									

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	Business Risk		#			Updat		Other <u>Internal</u> Assurance Other <u>Independent</u> Assurance			ssurance		Work	ın Area		
						Management Assurance			Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area	
	Risk ID 334 Risk Title Cost of Living Crisis Risk Level Corporate	If the cost of living crisis continues or gets worse, then it will lead to greater pressure on housing supply, increased housing costs, higher levels of homelessnes s and increased demand on housing, tenancy support, homelessnes s and other Council services.	Very High	Very High	Red	Carol Morgan / Peter Williams	>increase supply of social housing via the More Homes Programme, Planning policy and indirectly through the allocation of social Housing Grant to Registered Social Landlords. >Lobby Welsh Government to supply more financial resources to Local Authorities to tackle the cost of living crisis. >Provide individuals with help and advice regarding homelessness issues, housing benefit and rent arrears	>Homelessne ss and Housing Support Programme Strategy approved by Cabinet. Revised Allocation Policy will require Council approval.	>Scrutiny Programme Committee examination of the development and implementatio n of Homelessness and Housing Support Programme Strategy. > Service Improvement & Finance Improvement Panel has regularly examined progress towards improving and increasing housing stock	Briefing to Cabinet and Chairs meeting on homelessness pressures Report on More Homes delivery programme to Economy and Infrastructure Service Transformatio n Committee STC in Feb 2024.	>Housing Options service and assessme nt features on internal Audit Programm e. Recent audit completedi n Jan 2024. Assurance level was high.	>Homeles sness services subject to scrutiny and challenge by 3rd Sector orgs e.g. Shelter. >Welsh governme nt data returns submitted quarterly >Weekly monitoring meetings with WG homelessn ess relationshi p		Currently included in standard rolling audit schedule. Last audit completed Jan 2024.	TBC	TBC

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Risk ID 335 Risk Title Workforce recruitment and retention Risk Level Corporate Page 102	If the Council is not able to recruit and retain the right staff, then there may be reduced workforce capacity and capability, leading to lower staff morale and productivity, poor work quality, increased staff costs and reduced staff wellbeing / higher	Medium	Low	Amber	Rachael Davies / Rachael Davies	>Review the existing recruitment policy and assess weaknesses in application processes and selection processes for improvement by April 2023, to ensure the most appropriate application and selection techniques are being used to hire talent into the organisation. >Quarterly reporting provided to Directorates for PFM to highlight areas of concern and consider targeted approaches accordingly	>Cabinet Member briefings, Cabinet reports where applicable	>Regular reporting to Scrutiny Working Group - Regular reporting to Organisational Development CDC	>Quarterly reporting provided to Directorates for PFM to highlight areas of concern and consider targeted approaches accordingly. Quarterly reporting to Workforce Transformatio n Programme Board	>Internal audit of recruitment procedures			>Standard rolling audit schedule, repeated based on audit risk score.	>Audits included on rolling programm e in HR & OD / Service Centre. Includes Recruitme nt and Staff Contracts	Service Specific Audits – HR & OD, Service Centre /

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Risk ID	If the Council					>Regular Quarterly	>Cabinet	>Scrutiny	>Mandatory	>Internal	>HSE		>Standard	>Safeguar	
336	does not implement,					and annual reports to CMT on compliance	Member briefings,	Panels in place to	Corporate Training	Audit of mandatory	where applicable		rolling audit	ding cross cutting	e e
Risk Title	monitor and					levels by Directorate.	Cabinet	scrutinise	available for	training	CIW/EWC		schedule,	audit is	& OD, Service Centre
Mandatory	ensure the					levels by Birectorate.	reports where	Social	all Staff and	complianc	where		repeated	included in	ပ္
Training	completion of						applicable	Services Work	Members.	е	applicable		based on	rolling	ice .
_	mandatory							and	Reports to	Governan			audit risk	programm	er
Risk Level	training, then							Performance,	CMT on	ce and			score.	е	ο, i
Corporate	the Council							of which	progress and	Audit				>Corporat	Θ.
	may not fulfil							safeguarding	actions	Committee				e Learning	∞ J
	its statutory and				ies			training is included;	required	reporting				& Davidonm	H .
	regulatory				av			Scrutiny						Developm ent team	Τ,
77	obligations or							Working						audit due	tς
Page	ensure the				Jae			Group –						for	ib۷
ge	safe and				act			Workforce in						2024/25	< . :
103	effective				8			place						following	cific
$\ddot{\omega}$	operation and) g									Fusion	be
	delivery of				Jin C									implement	e S
	services.			er	×									ation	ίς
		≥	≥	Amber	Ness Young / Rachael Davies									linked to training	Service Specific Audits
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Risk ID	If we do not					>Engagement and	>Cabinet	>Scrutiny	>Reports to		>Part of		>Standard	>Partners					
337	manage to					involvement with	Member	Panel in place	CMT on		Safer		rolling	hip cross					
	continue to					minority communities	briefings,	to scrutinise	progress and		Swansea		audit	cutting					
Risk Title	improve					to understand what	Cabinet	Councils	actions		Communit		schedule,	audit					
Social Cohesion	community					matters and promote	reports where	response to	required		y Safety		repeated	carried out					
Dieleland	involvement					community cohesion	applicable	ASB, which a			Partnershi		based on	in 21/22					
Risk Level Corporate	and break down barriers					and mitigate tensions, through the		lack of social cohesion can			p, which is multi-		audit risk score.	audit schedule					
Corporate	amongst					Partnership &		lead to an			agency		30016.	>Further	_				
	people in					Involvement Team.		increase			and			audits to	ıtro				
	terms of					Project initiated and		>Part of			reports			be added	S				
	economic					ongoing - update		annual			into Public			following	8				
	disparities,					expected in new year		scrutiny			Service			consulatio	ce				
P	encourage					>Whole Council		programme to			Board			n as	lan				
age	tolerance to avoid social					training and capacity		review						required >Commun	err				
Page 104	discord and					building to implement the Public Sector		progress of Swansea's						ity Safety	Š				
6	strengthen					Equality Duty and the		Community						standard	<u>.</u>				
_	community					Human		Safety						audit on	our				
	development					Rights Approach,		Partnership						the rolling	Sol				
	throughout all					through Strategic		·						programm) /				
	ages, then we					Equalities and Future								е	ing				
	could see					Generations Board									ard				
	increasing					Update meeting									ng				
	community					planned Nov 23									afe				
	tensions, disorder and					>Ensure effective partnership working									် ဂ				
	civic unrest					arrangements to									lits				
	exacerbated					develop supportive									on				
	by the cost of					networks together									g ∤				
	living crisis				S.	through PSB									ttin				
	and perceived				Ĕ	and other key									J.				
	differences				Ā	partnership									Cross Cutting Audits –Safeguarding / Council Governance & Control				
	and people not feeling				>	arrangements transpiring out of the									S				
	heard or				ane	new newly developed													
	listened to.				١,	Wellbeing Plan													
					es	>Utilise opportunities													
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		₹		_	Ĭ	Prosperity fund to join													
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		Me	Low	Am	David Howes / Jane Whitmore	community													
						engagement and		<u> </u>											

Business Risk Total Head Part Head Head Part Head Part Head													ndix 4		
Business Risk Description Page								ce of Assurance				Internal	Planned		
involvement with all ages and all communities to develop shared values and empowered communities, Fund now launched and activity underway. Project and grant scheme developed and being launched in Nov 23 >Commission a research project to ensure complimentary and inclusive policy and decision-making to ensure social cohesion issues are considered in the development of plans and strategies across the council. Joint working with Swansea Unit project					7	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	
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likely to start in the next month - will be	Page 105					ages and all communities to develop shared values and empowered communities, Fund now launched and activity underway. Project and grant scheme developed and being launched in Nov 23 > Commission a research project to ensure complimentary and inclusive policy and decision-making to ensure social cohesion issues are considered in the development of plans and strategies across the council. Joint working with Swansea Unit project has been initiated and likely to start in the									

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Busine	ss Risk	5	hood	Status	Updat		Updat	Oth	er <u>Internal</u> Assur	ance	Other <u>I</u>	ndependent A	Assurance		Work	ın Area
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Risk ID 338 Risk Title Net Zero 2030 target Risk Level Corporate Page 106	If we do not transform the Council to meet the collective net zero commitments asked of public bodies by Welsh Government at sufficient pace and scale, then there is a possibility that the net zero target will not be met by 2030.				Mark Wade / Rachel Lewis	>Implement the Councils 2030 Net Zero delivery plan, with specific focus on carbon reductions in the Buildings and Energy and Fleet & Mobile Equipment categories. Measure success annually through WG emissions reporting figures. >Develop a suite of actions to offset the emissions balance as unlikely to deliver zero emissions by 2030. Actions to be monitored and reported annually as part of overall WG reporting. >Source external funding to deliver sizable reductions in emissions. Monitor funding received through annual reporting of delivery plan and respective emission reductions to be reported in annual welsh government	>Two Cabinet members on CC&NR steering group, running bi monthly with key officers as part of the CC&NR governance. >CC&NR CDC established – running monthly to support the development of action plan and respective policy in regard of the 2030 target.	>CC&NR scrutiny establish to challenge SC activity on the 2030 activity.	>Programme Board and Emissions reporting groups established, the latter to collate the required data for annual reporting of data to Welsh Government.		>CCS reports emissions data for review annually to Welsh Governme nt.	>WAO recently conducted interviews with staff and set out five proposals for improvemen ts on this agenda across Wales. CCS has responded to all, being the first welsh authority to meet one specific ask and produce a costed delivery plan. (Dec 15th 2022 Cabinet Report)		>Net Zero 2030 audit added for 2023/24 plan following Risk Register review and consultaito n	Cross Cutting Audits/Miscellaneous - Council Governance & Controll	
		High	High	Red	Mark	submission.										

							Level and Source of Assurance							nuix 4	
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Risk ID	If the council		1		I	> Transformation		<u> </u>	<u> </u>			T	1		
350	does not					Delivery Board to									
330	successfully					receive quarterly									=
Risk Title	deliver the					progress reports on all									nc
Successful and	Successful					programmes within the									Council
Sustainable	and					CTP to monitor									
Swansea	Sustainable					progress and address									<u> </u>
Corporate	Swansea					any performance									900
Transformation	Corporate					issues should they									an a
Plan	Transformatio					arise.									₩ 6
	n Plan it will				_	> Ensure effective									.8.
Risk Level	struggle to				Ĕ	governance									ΙŞ
Corporate	deliver its				Young	arrangements are in									l is
ָּט	wellbeing				S	place and maintained									ηn
Page	objectives				es	to oversee									g d
Φ	and to				Z	implementation of the									∰ `
107	respond				Ðι	CTP and undertake									75
7	effectively to				Young / Ness	annual review of									Cross Cutting Audits/Miscellaneous
	the external			-	×	arrangements in									ĕ
	challenges it	노	>	Amber	Ness	March each year to									
	is facing up to	High	Low	A	ş	ensure ongoing									
	2028.					suitability.									

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		Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area								
Risk ID	If the					> Develop Action Plan	> Weekly	> Regular	>Presentation														
360	development of a new					and programme > Transformation	meetings with Cabinet	involvement of Climate	s to CMT awat days on						_								
Risk Title Development of New Waste	Waste Strategy is not					Delivery Board to receive quarterly progress reports on all	Members at which any relevany	Change & Nature Recovery	progress and actions required						& Contro								
Strategy Risk Level	adequately resourced, with timely					programmes within the CTP to monitor progress and address	issues are discussed >Finalised	Service Transformatio n Committee							rnance (
Corporate	decision making, then there is a risk of the new					any performance issues should they arise.	draft Policy to be approved by Cabinet and Council	in considering relevant issues							ncil Gove								
Page 108	strategy being ineffective and its														s – Cour								
108	implementatio n being delayed. This may mean the				su										Cross Cutting Audits/Miscellaneous - Council Governance & Controll								
	Council not meeting future				Chris Howell / Matthew Perkins										udits/Misc								
	increased statutory recycling				/ Matthe										utting Au								
	targets or benefitting from financial and		un		s Howell										Cross C								
	environmental benefits.	High	Medium	Red	Chris																		

								Level and Source	re of Assurance				Internal	Planned	
						Level 1		Level 2	ce of Assurance		Level 3		Audit	Internal	
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Busi	ness Risk	#	poor	Statu	Upda		Oth	er <u>Internal</u> Assura	ance	Other <u>II</u>	<u>ndependent</u> A	ssurance		Work	n Ar
		Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
Risk ID	If children do				<u> </u>	>Develop and build	T	<u> </u>		1	ΣΛεεμταρικα	1		>School	1
Risk Title Education Offe Risk Level Corporate Page 109	not receive a suitable education	Medium	Medium	Amber	Rhodri Jones / Rhodri Jones	>Develop and build upon collaborative partnerships between employers and schools as well as widening vocational and curriculum opportunities for learners across Swansea schools via delivery of the Swansea Skills Partnership key work stream action plans. >Develop and deliver the Welsh Language Skills Strategy to ensure that schools are supported to develop learners skills, so they can speak Welsh with confidence when they leave school and access employment opportunities. >Deliver against the Literacy, Numeracy and Digital strategies to ensure that learners can fully access the curriculum and the world of employment >Assurance regarding the quality of the education offer via the following methods: - School Improvement Visits (between 1 and 3 visits per school per year) and areas for improvement					>Assurance regarding the quality of the education offer via the following methods: - Estyn reports providing assurance around the educational offer in all our schools with support being put in place as and when required.			and other Education / thematic audits due in 2024/25 and beyond	Service Specific - Education - Improving Education and Skills

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								Level and Source	e of Assurance				Internal	Planned	
						Level 1		Level 2			Level 3		Audit	Internal	
				(0	ter								Needs	Audit	g
			8	atris	oda		Oth	er <u>Internal</u> Assura	ince	Other <u>II</u>	<u>ndependent</u> A	ssurance		Work	Area
	Business Risk	ct	9	Sts	Γ										
		Impact	Current Likelihood	RAG Status	Risk Owner / Updater	Management		9 11	0.0		0.11				Audit Plan
		<u>=</u>	=	≥	Nne	Assurance	Council/	Scrutiny	Other	Internal	Other	External			dit
		ent	ent	<u>a</u>	Ó		Cabinet			Audit	Bodies	Audit			Α
		Current	i i	Overall	isk										
		0	0	0	8										
-															
F						identified and									
						supported									
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Last Updated: 07/02/24

Integrated Impact Assessment Screening Form

Please ensure that you refer to the Screening Form Guidance while completing this form.

Servi	h service area and ce Area: Internal Au torate: Resources		re you from?			
Q1 (a) What are you scr	eening for re	levance?			
	New and revised policing Service review, re-orgusers and/or staff Efficiency or saving proposals construction work or a Large Scale Public Evocal implementation Strategic directive and Board, which impact of Medium to long term provement plans) Setting objectives (for Major procurement and Decisions that affect the services	anisation or service oposals ons for new finant affecting staff, condended to exist ents of National Strate intent, including on a public bodies olans (for example example, well-bed commissioning	cial year and strate ommunities or accesting buildings, movey/Plans/Legislation those developed at functions e, corporate plans, coing objectives, equal decisions	gic financial pla ssibility to the b ing to on-line se n Regional Partn development pla ality objectives,	nning uilt environment, e.g., ervices, changing locat ership Boards and Pul ans, service delivery ar Welsh language strate	new ion blic Services and egy)
	Please name and al report to the Government in the Internal Au What is the poter (+) or negative (-)	ernance and A dit Annual Pla ntial impact o	udit Committee n.	outlining the		
	n/a – no impact	High Impact	Medium Impact	Low Impact	Needs further investigation	
Older Any oti Future Disabil Race (Asylun Gypsie Religio Sex Sexual Gende Welsh Povert Carers Comm Marria	en/young people (0-18) people (50+) her age group Generations (yet to be ity including refugees) n seekers es & travellers en or (non-)belief Orientation or reassignment Language y/social exclusion (inc. young carers) unity cohesion ge & civil partnership ancy and maternity	born)	+ -			

Integrated Impact Assessment Screening Form

Q3	engagement/consu			
	Consultation underta Services and CMT.	ken with the Director of F	Finance & S151 Officer, Legal, Access to	
Q4	Have you consider development of this		ture Generations Act (Wales) 2015 in the	
a)	Overall does the initiation together? Yes	ve support our Corporate Pla	an's Well-being Objectives when considered	
b)	Does the initiative cons Yes ⊠	sider maximising contribution No	n to each of the seven national well-being goals?	
c)	Does the initiative appl Yes ⊠	y each of the five ways of wo No	rking?	
d)	Does the initiative mee generations to meet the Yes ⊠		thout compromising the ability of future	
Q5			(Consider the following impacts – equality, I, financial, political, media, public	
	High risk	Medium risk	Low risk	
Q6	Will this initiative h	ave an impact (howeve	r minor) on any other Council service?	
	⊠ Yes □ N	o If yes, please pro	ovide details below	
be su impro	bject to internal audit ve compliance with C	reviews which may result	lanned programme of work for 2022/23 will in recommendations being made to dures and consequentially may result in as if required.	
decis (You r propos organi	considering all the ions affecting simila may need to discuss this sal will affect certain grossation is making. For expension	impacts identified withing ar groups/ service users with your Service Head or bups/ communities more advicemble, financial impact/pov	cosal on people and/or communities in the screening and any other key is made by the organisation? Cabinet Member to consider more widely if this versely because of other decisions the verty, withdrawal of multiple services and abled people, older people, single parents (who	

To update committee on the methodology used to compile the Internal Audit Annual Plan for 2024/25.

Page 112

are mainly women), etc.)

Integrated Impact Assessment Screening Form

Outcome of Screening

Q8 Please describe the outcome of your screening below:

The completion of the Integrated Impact Assessment Screening revealed that:

- The Internal Audit Annual Plan Methodology Report has a potentially low positive impact across a number of identified groups.
- It has been subject to consultation with the Director of Finance & S151 Officer, Legal, Access to Services and CMT.
- All WFG considerations are positive and any risks identified are low.
- The overall impact of the Internal Audit Annual Plan Methodology Report is positive as it will support the Authority in its requirement to protect public funds.

(NB: This summary paragraph should be used in the relevant section of corporate report)

☐ Full IIA to be completed	
Do not complete IIA – please ensure you have provided the relevant information above to support outcome	ort this

NB: Please email this completed form to the Access to Services Team for agreement before obtaining approval from your Head of Service. Head of Service approval is only required via email.

Screening completed by:
Name: Simon Cockings
Job title: Chief Auditor
Date: 29/12/23
Approval by Head of Service:
Name: Ben Smith
Position: Director of Finance & S151 Officer

Please return the completed form to <u>accesstoservices@swansea.gov.uk</u>

Agenda Item 9



Report of the Head of Digital & Customer Services

Governance & Audit Committee - 28 February 2024

Annual Complaints & Compliments Reports 2022-23

Purpose: To provide assurance on the complaints handling

process for 2022-23 and highlight compliments

received from the public.

Policy Framework: Corporate Complaints Policy

Social Services Complaints Policy

Transformation & Financial Resilience Well-being

Objective of the Corporate Plan

Successful and Sustainable Swansea

Consultation: Finance and Legal.

Report Author: Sarah Lackenby

Finance Officer: Ben Smith

Legal Officer: Stephen Holland

For Information

1. Background and Context

- 1.1 These two reports at appendices A and B detail performance on the operation of the Corporate Complaints Policy and Social Services Complaints Policy between 1st April 2022 and 31st March 2023.
- 1.2 This year the Complaints reports have a new format in response to a request from the Governance & Audit Committee.
- 1.3 The Council recognises that complaints are a valuable resource, helping us to understand the needs and concerns of members of the public and to improve services. All complaints are taken very seriously and provide valuable customer insight.
- 1.4 An internal audit of Complaints began at the end of 2022-23 and concluded in 2023-24 with the overall assurance level of substantial.

2. Integrated Assessment Implications

- 2.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
 - Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - Foster good relations between people who share a protected characteristic and those who do not.
 - Deliver better outcomes for those people who experience socioeconomic disadvantage.
 - Consider opportunities for people to use the Welsh language.
 - Treat the Welsh language no less favourably than English.
 - Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.
- 2.2 The Well-being of Future Generations (Wales) Act 2015 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.
- 2.3 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.
 - This report is for information only. Any activities following this report will be subject to the IIA process as required.

3. Financial Implications

- 3.1 The additional cost of running the service in 2022-23 includes:
 - £11,013 in financial redress for Adult Services, compared with the £12,016 in 2021-22.
 - £250 in financial re-dress for Child & Family Services, which was the first payment made in the past four years.

4. Legal Implications

4.1 S.81 of the Local Government (Wales) Measure 2011 (as amended by the Local Government and Elections (Wales)) Act 2021 provides that:

'(1)A local authority must appoint a committee (a "governance and audit committee") to—

.

- (da) review and assess the authority's ability to handle complaints effectively,
- (db) make reports and recommendations in relation to the authority's ability to handle complaints effectively,

4.2 Part 5 of The Social Services Complaints Procedure (Wales) Regulations 2014, prescribes the records required to be kept in relation to social service specific complaints, and the publication of information relating to the same.

'PART 5 LEARNING FROM COMPLAINTS

Monitoring

- 20. Each local authority must keep a record of—
 - (a) each complaint it receives;
 - (b) the outcome of each complaint;
 - (c) whether the local authority has complied with the time limits specified in regulations 16 to 19;

with the intention of monitoring its compliance with these Regulations.

Annual Report

- 21.—(1) Each local authority must prepare an annual report, which must include details of the records kept in accordance with regulation 20, on its performance in the handling and investigation of complaints for the purposes of—
 - (a) monitoring compliance with these Regulations; and
 - (b) improving the handling and consideration of complaints.'

Background Papers: None

Appendices:

Appendix A Corporate Complaints Annual Report 2022-23
Appendix B Social Services Complaints Annual Report 2022-23



Annual Corporate Complaints & Compliments Report

2022-23

1. Purpose of this Report

- 1.1 This report details performance on the operation of the corporate complaints procedure between 1st April 2022 and 31st March 2023. The report highlights complaints, comments and compliments received from the public and provides the latest position of the key performance indicators.
- 1.2 The Council recognises that complaints are a valuable resource, helping us to understand the needs and concerns of members of the public and to improve services.

2. Our Complaints Procedure

2.1 Stage 1 Complaints

- 2.1.1 To begin with, complaints will be dealt with by the Service Department concerned and hopefully resolved.
- 2.1.2 The Service Department will aim to provide a response to the complaint within 10 working days.

2.2 Stage 2 Complaints

- 2.2.1 If the Service Department has not responded within 10 working days without good reason, or a complainant remains dissatisfied, then the complaint will be referred to the Corporate Complaints Team.
- 2.2.2 The Complaints Team will investigate the complaint on behalf of the Chief Executive.
- 2.2.3 The complaint will be logged and the complainant will receive a response within 20 working days. Sometimes it may take longer, but the complainant will be kept informed if this is likely to be the case.

2.3 Public Services Ombudsman (Wales)

2.3.1 If the complainant remains dissatisfied with the outcome of the complaint having pursued it through the various stages with the Council, the complainant may wish to refer the matter to the Public Services Ombudsman (Wales).

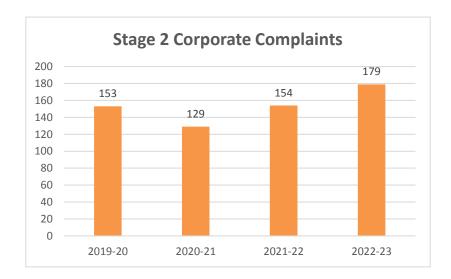
2.4 Requests for Service

2.4.1 A request for service is not a complaint (e.g., a request for service could be a request to repair an unlit lamp post, or missed bin collection). A complaint would only arise should the request for service not be properly dealt with.

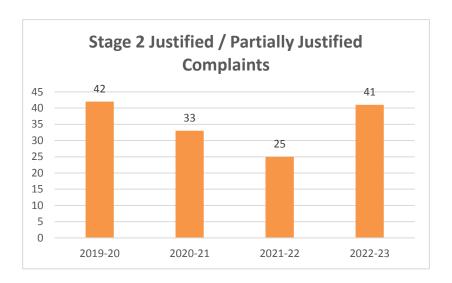
- 3. Corporate Complaints to Swansea Council 2022-23
- 3.1 A total of **1,540** Stage 1 corporate complaints were recorded for 2022-23. This is a 20.9% increase on the previous year when 1,274 were recorded.



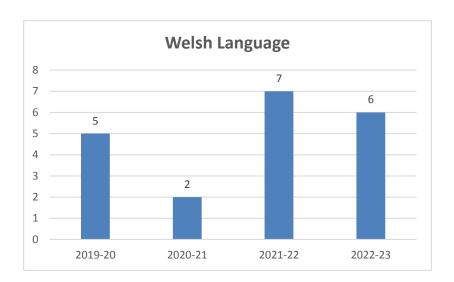
- 3.2 A total of **467 (30.3%)** Stage 1 complaints were justified, which is a 15.3% increase on the 405 justified the previous year.
- 3.3 A total of **179** Stage 2 corporate complaints were recorded for 2022-23. This is a 16% increase on the previous year when 154 were recorded.



3.4 Of all the stage 2 complaints received, **41** were justified or partially justified compared with 25 for the previous year.



3.5 There were 6 Welsh Language complaints received in 2022-23 compared with 7 received in 2021-22.



4. Complaints Breakdown by Service for Swansea Council 2022-23

4.1 The table below shows the stage 1 and stage 2 corporate complaints by service area. Corporate Building & Property Services, Highways & Transportation, Housing & Public Protection, and Waste Management & Parks are the Council's main frontline service areas and further detail around these services is provided at section 8 later in the report.

Service Area	Stage 1 Complaints 2022/23	Stage 2 Complaints 2022/23	Request for Service 2022/23
Commercial Services	0	0	0
Communications & Cust. Engagement	29	1	3
Corporate Building & Property Serv.	336	44	64
Cultural Services	78	6	24
Economic Regeneration & Planning	49	21	19
Education	33	3	18
Financial Services	61	8	79
Highways & Transportation	322	38	226
Housing & Public Protection	278	47	162
HR & Organisational Development	3	0	11
Digital & Customer Services	2	0	0
Legal & Democratic Services	15	1	20
Poverty, Wellbeing & Communities	0	0	0
Waste Management & Parks	334	10	222
Totals	1,540	179	848

4.2 This can be compared with stage 1 and stage 2 complaints for the previous year 2021-22:

Service Area	Stage 1 Complaints 2021/22	Stage 2 Complaints 2021/22	Request for Service 2021/22
Commercial Services	0	0	0
Communications & Cust. Engagement	45	2	19
Corporate Building & Property Serv.	170	16	47
Cultural Services	44	6	18
Economic Regeneration & Planning	54	19	25
Education	21	3	21
Financial Services	43	6	54
Highways & Transportation	277	55	279
Housing & Public Protection	260	32	153
HR & Organisational Development	3	0	5
Digital & Customer Services	1	0	1
Legal & Democratic Services	11	2	18
Poverty, Wellbeing & Communities	0	0	0
Waste Management & Parks	345	13	211
Totals	1,274	154	851

5. Compliments Breakdown by Service for Swansea Council 2022-23

- 5.1 When positive comments and compliments are received from the public they are acknowledged and forwarded to the Head of Service for the relevant service area. A selection of those compliments are then highlighted for the staff newsletter. This has a positive impact on staff morale and allows departments to recognise good practices.
- 5.2 In 2022-23 the Council received **200** compliments compared with 31 the previous year. This increase is largely down to reporting changes as not all compliments were logged.

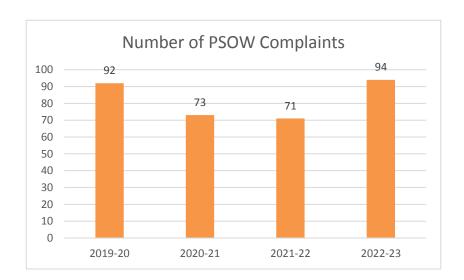


5.3 The breakdown of compliments by service area is shown in the table below with Cultural Services, Highways & Transportation, Housing and Public Protection and Waste Management & Parks receiving the most positive comments and compliments.

Service Area	Comments / Compliments 2021/22	Comments / Compliments 2022/23
Commercial Services	0	0
Communications & Customer Engagement	3	3
Corporate Building & Property Services	2	35
Cultural Services	5	26
Economic Regeneration & Planning	0	1
Education	0	2
Financial Services	1	4
Highways & Transportation	4	20
Housing & Public Protection	4	19
HR & Organisational Development	0	1
Digital & Customer Services	0	0
Legal & Democratic Services	1	1
Poverty, Wellbeing & Communities	0	0
Waste Management & Parks	11	88
Totals	31	200

6. Complaints Closed by the Public Services Ombudsman for Wales 2022-23

- 6.1 The Public Services Ombudsman for Wales (PSOW) publishes the annual letters to all Councils on its website. The letter highlights activities undertaken by the Ombudsman's office during the year and the Council's performance.
- 6.2 In 2022-23 the Ombudsman received **94** complaints and closed **99** cases relating to Swansea Council (71 in 2021-22), which represents 6% of Swansea Council's overall complaints and 9% of all complaints received across Wales. The table below shows complaints over the past four years.



6.3 The table below highlights the reasons for closing the 99 complaints:

Considered by the Ombudsman to be 'out of jurisdiction'	29
Considered to be premature because the Council's Complaints	28
procedures had not been exhausted	
Cases closed where the Ombudsman was satisfied by the	32
actions the Council had taken	
Cases closed by Voluntary Settlement. These are redress	10
proposals which enable a case to be closed without a full	
investigation, e.g. providing and apology, changing ways of	
working, and/or financial redress	
TOTAL	99

6.4 Of the 99 complaints received and closed, 24% (23) complaints related to Housing. These were across a range of issues with no particular trend. Housing has seen an increase in complaints due to clearing the Covid backlog of internal repairs, and the transition period to the new Oracle Field Services system.

- 6.5 Of the 99 complaints received and closed, only ten complaints required intervention. All of these reached an early resolution / voluntary settlement and these related to:
 - Eight Corporate Complaints including: the Contact Centre (1), Housing Repairs (4), Rats (1), Council tax (1), and Housing (1)
 - Two Social Services including: Child and Family (1), Adult Services (1).

7. Learning from Complaints

- 7.1 Swansea Council uses complaints, comments, and compliments from the public to continuously improve processes and services.
- 7.2 Complaints via the Ombudsman are discussed with Heads of Service and the relevant Principal Officer. The Complaints Officer responds to the PSOW on the actions undertaken by Swansea Council and any lessons learned. Once actions were completed, the complaint is closed on the system, recording the outcome and any lessons learned.
- 7.3 The Complaints Service receives an Internal Audit every three years to ensure it is undertaking its functions correctly. The internal audit of Complaints began at the end of 2022-23 and concluded in 2023-24 with the overall assurance level of substantial.

8. Complaints by Service Area

8.1 The charts included for each area compares performance across the last four years.

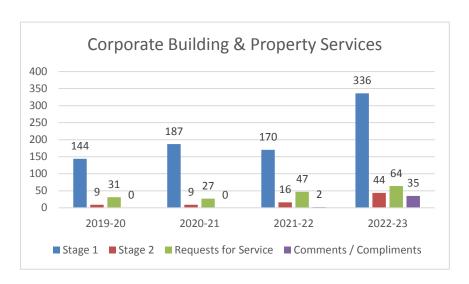
8.2 Corporate Building & Property Services

- 8.2.1 The chart below shows that Corporate Building & Property Services complaints across the board compared with the previous year. Requests for service relate to first time requests that were not complaints.
- 8.2.2 The general reason for the rise in Corporate Building & Property Services complaints during 2022-23 is mostly due to increased demand, clearing the Covid backlog of internal housing repairs, and the transition period from the old Orchard repairs system to the new Oracle Field Services.
- 8.2.3 Timescales on complaints handling has significantly improved since the new complaints system was introduced.
- 8.2.4 Building Services complete in excess of 70,000 repairs annually, so the number of complaints received 380 (stage 1 and 2) equates to 0.54%.
- 8.2.5 Examples of the compliments received:

"I just wanted to compliment the boys who were sent to my property at X to do some painting work. The boys did a brilliant job I'm really impressed.

Think their names were A and B and also their boss D who was such a nice guy, great to talk to and very helpful with questions I had. I would highly recommend them."

"I have just had a young lad out to fix my outside door. He worked nonstop and was so polite and well mannered. It gives you faith in the Council workers, but to be honest I can't remember getting a bad worker. He asked me if I needed more help or if there was anything he could do for me. It is nice to have our young this nice and hard working".



	Stage 1 Complaints Closed Within Timescales				Complaints Outcome	
	10 Working Days	After 10 Working Days but within 3 Months	After 3 Months but within 6 Months	After 6 Months	Upheld	Not Upheld
2021-22	89	24	3	0	51	56
2022-23	136	69	20	5	137	85

8.3 Waste Management, Parks & Cleansing

- 8.3.1 The chart below shows that Waste Management, Parks & Cleansing stage 1 and stage 2 complaints reduced compared with the previous year. Stage 2 complaints have reduced each year for the past four years. Requests for service relate to first time requests that were not complaints.
- 8.3.2 Generally, the complaints mostly relate to missed collections.
- 8.3.3 Timescales on complaints handling has significantly improved since the new complaints system was introduced.

8.3.4 Examples of the compliments received:

"We are all too fond of complaining when things go wrong but I want to give praise to the person responsible for the maintenance of Tir Canol playing fields. I have used them for 40 years and they are looking the best they ever have. He obviously takes pride in his work and is a credit to you."

"Thank you for my beautiful hanging basket delivered today, it is fabulous".



	Stage 1 Complaints Closed Within Timescales				Complaints Outcome	
	10 Working Days	After 10 Working Days but within 3 Months	After 3 Months but within 6 Months	After 6 Months	Upheld	Not Upheld
2021-22	263	23	1	0	179	99
2022-23	248	30	0	0	167	100

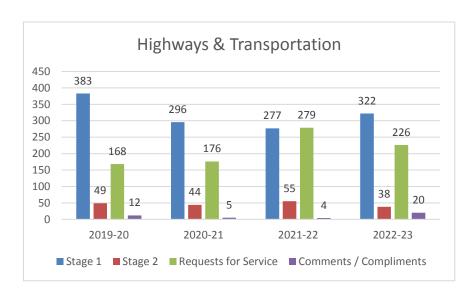
8.4 **<u>Highways & Transportation</u>**

- 8.4.1 The chart below shows Highways & Transportation stage 1 complaints increased compared with the previous year. However, stage 2 complaints were the lowest for the past four years. Requests for service relate to first time requests that were not complaints.
- 8.4.2 There are no overall trends, several complaints were received relating to parking tickets.
- 8.4.3 Timescales on complaints handling has significantly improved since the new complaints system was introduced.

8.4.4 Examples of the compliments received:

"Hi there, I'd like to thank your pothole team for your prompt service, well done to all involved many thanks X."

"I reported a streetlight not working in Killay and within a couple of days it has been repaired. I am very impressed with this speed and efficiency."



	Stage 1 Complaints Closed Within Timescales				Complaints Outcome	
	10 Working Days	After 10 Working Days but within 3 Months	After 3 Months but within 6 Months	After 6 Months	Upheld	Not Upheld
2021-22	206	51	4	0	69	174
2022-23	242	25	0	0	61	176

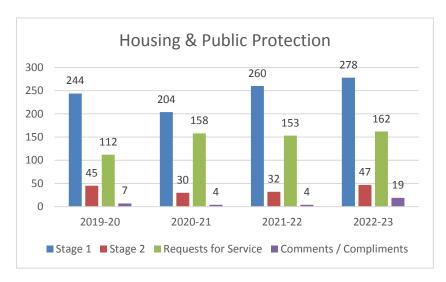
8.5 **Housing & Public Protection**

- 8.5.1 The chart below shows Housing & Public Protection stage 1 and stage 2 complaints increased during 2022-23 compared with the previous year.
- 8.5.2 Requests for service and positive comments and compliments also increased.
- 8.5.3 There are no overall trends across the complaints.
- 8.5.4 Timescales on complaints handling has significantly improved since the new complaints system was introduced

8.5.5 Examples of the compliments received:

"The Environmental Health Team, Specifically Empty Property Officer and Pest Control, exceptionally high level of service and care which impacted on my property and my wellbeing."

"Town Centre AHO – Mr X underwent lifesaving surgery over the weekend. His sister called to thank us for the care we displayed towards her brother".



	Stage 1 Complaints Closed Within Timescales				Complaints Outcome	
	10 Working Days	After 10 Working Days but within 3 Months	After 3 Months but within 6 Months	After 6 Months	Upheld	Not Upheld
2021-22	180	29	2	0	48	113
2022-23	203	22	0	0	55	151

9. Key Performance Indicators

- 9.1 The table below shows overall performance on responding to complaints within the timescales stipulated in the Council's Corporate Complaints Policy.
- 9.2 The response times, particularly on Stage 1 corporate complaints, has significantly improved since the new complaints system went live in July 2023.

Key Performance Indicator	Comment / Management Actions	
, ·	Building Services responded to 37.2% (125) complaints within 10 working days. These delays are due to many repairs involving complex elements and	

responded to within 10 clear working days take more than 10 days to resolve i.e. Disrepair claims where tenants will not allow repairs to be completed as instructed by their claims lawyer. Access issues where appointments being made to complete the work are either not being kept or are arranged beyond the 10 days as requested by the tenant.

22/23 Stage 1 justified 467 (30.3%)

21/22 Stage 1 justified 405 (31.8%)

77.6% (139 of 179) of stage two corporate complaints responded to within 20 clear working days, or within any extension agreed with the customer.

One case relates to a request to move a pelican crossing in a Ward and was delayed due to a byelection.

One case was not responded to as the tenant was waiting to decant so that work could be carried out on property.

One case picked up by Social Services complaints officer was not responded to.

Between July and December, several delayed due to workload and sickness within the Complaints team.

22/23 Stage 2 justified 41 (22.9%) 21/22 Stage 2 justified 25 (16.23%)



Annual Social Services Complaints & Compliments Report

2022-23

1. Background and Context

- 1.1 Social Services aims to provide quality services to the public of the City and County of Swansea. There may be, however, times when things go wrong and a service user or someone sufficiently concerned with their welfare, may wish to complain.
- 1.2 Swansea Council's Social Service Complaints Policy has been established in accordance with The Social Services Complaints Procedure (Wales) Regulations 2014 and The Representations Procedure (Wales) Regulations 2014.
- 1.3 The above regulations are made under the Social Services and Well-being (Wales) Act 2014. They bring the complaints handling process for Social Services in line with the Welsh Government Model Concerns and Complaints Policy and Guidance, and the NHS Complaints Procedure Putting Things Right.
- 1.4 This policy also encompasses the requirements of the Children Act 1989, the Adoption of Children Act 2002, the Community Care Act 2014 and is in accordance with guidance issued under Section 7 of the Local Authority Social Services Act 1970.
- 1.5 Each Local Authority is required to produce and publish an annual report regarding the operation of their Social Services Complaints Procedures. This report contains statistical information and analysis relating to complaints, comments and compliments dealt with during the period 1st April 2022 to 31st March 2023.

2. Our Complaints Procedure

- 2.1 The law says that you have a right to get your views heard about Social Services.
- 2.2 The following people can use the procedure:
 - People using social care services provided by the Council.
 - People using social care services purchased or contracted by the council.
 - A representative, relative or friend, properly nominated by a service user or acknowledged as appropriate to act in a service user's best interest when they lack capacity or have died.
- 2.3 Firstly, you should tell the staff member who provides support about what you feel is wrong so they can try to put things right for you.

2.4 Stage 1 – Local Resolution

2.4.1 When we receive your complaint, you will get an acknowledgement within 2 working days. We will contact you to discuss your complaint within 10 working days. This could be via phone or if you prefer we can have a

- face-to-face meeting. Once we have discussed your complaint and the matter has been resolved, we will write to you within 5 working days of the resolution date, confirming the outcome.
- 2.4.2 Most complaints are resolved at this stage, and it is usually the quickest and most straightforward way to deal with issues.

2.5 Stage 2 – Formal Consideration

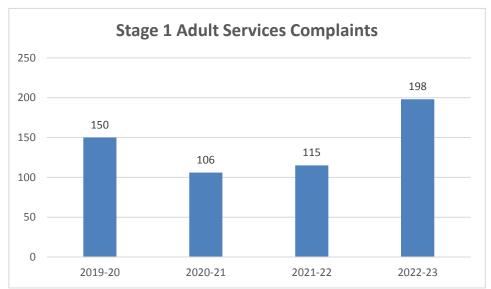
- 2.5.1 If the complaint cannot be resolved at the informal stage, your complaint will progress to stage 2. This stage will be carried out by someone not directly involved with the service you are complaining about. During the investigation the Complaints Officer will keep you advised and informed of developments.
- 2.5.2 You are not obliged to take up the offer of a discussion at local resolution stage; you have the right to request a formal investigation from the very beginning if you wish. However, as this is a longer process than local resolution, we recommend trying to resolve matters through local resolution first.
- 2.5.3 When your complaint is investigated at stage 2, we will write to you within 5 working days of receiving your request for a formal investigation, to make sure we understand all the details of your complaint and the outcome you would like to achieve. We will ask you to confirm that this is accurate and will also give you details of the Independent Investigator.
- 2.5.4 The date on which you confirm the detail of your complaint is called the 'start date' and we have 25 working days from this date to complete the investigation and send you a written response.
- 2.5.5 If we are unable to achieve this deadline, we will write to you and tell you why there is a delay and when you will receive the response. This will be as soon as possible after the 25 working day deadline and no later than 6 months from the date we received your complaint.
- 2.6 Public Services Ombudsman for Wales
- 2.6.1 If you are still unhappy after the conclusion of the Council process you can complain to the Ombudsman.

2.7 Advocates

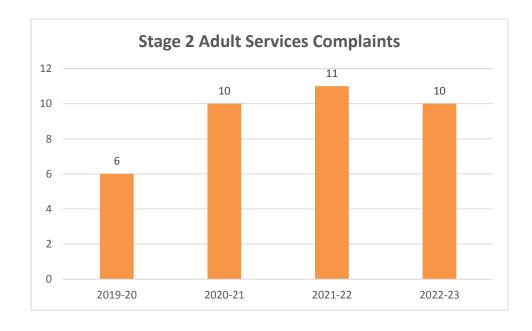
2.7.1 Our staff will aim to help you to make your concerns known to us. If extra assistance is needed, we will try to put you in touch with someone who can help.

3. Adult Services Complaints to Swansea Council 2022-23

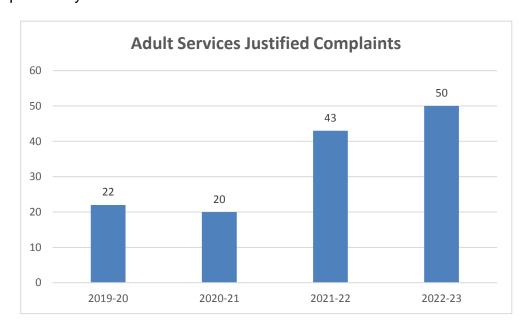
3.1 A total of **198** Stage 1 Adult Services complaints were recorded for 2022-23. This is a 72% increase on the previous year when 115 were recorded and a 32% increase on pre-pandemic levels. 27% (54) complaints were all from the same complainant. The level of stage 1 complaints is mainly due to the increasing demand and the pressure on services, leading to delays in the provision of care. This increase is also being seen across other Councils in Wales.



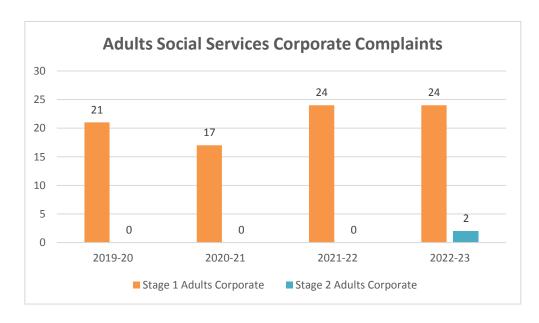
3.2 A total of **10** Stage 2 complaints were recorded for 2022-23. This is one fewer than last year and the same number received in 2020-21.



3.3 Of all complaints received, **50** were justified compared with 43 for the previous year.



3.4 Corporate complaints relate to the business administration within Adult Services as opposed to Social Care Services. **24** stage 1 Corporate Complaints relating to Adult Services were received, which is the same number as last year. Two further stage 2 complaints were Corporate Complaints.

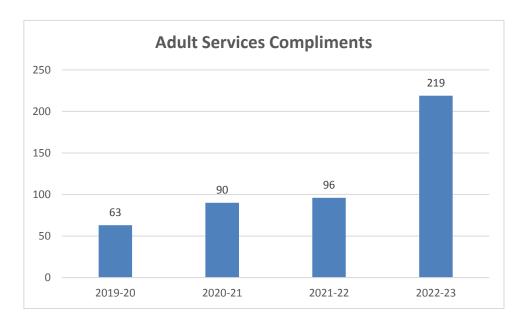


- 4. Outcomes of Stage 2 Complaints for Adults Services 2022-23
- 4.1 The table below provides the outcomes for the ten stage 2 complaints and two stage 2 Corporate Complaints:

Complaint	Outcome
Adult Services	
Contracting: Unhappy with care costs levied due to care of Dad in home	Justified
Community Initial Assessment Team (CIAT): Social worker not advising of care costs in relation to third party fees	Not Justified
Contracting: Poor practice and failings in the duty of care by care home	Not Justified
Direct Payments Team: Complainant not informed that contribution to care had increased and allowed a huge debt to accrue	Not Justified
Contracting: Joint complaint with Carmarthenshire – neglectful care of wife at care home.	Not Justified
Maes Glas Residential Services: Various complaints regarding son's care management at placement	Partially Justified
Maes Glas Residential Services: Various complaints regarding son's care management at placement	Partially Justified
Transition Team: requested respite facility not able to provide medical care for son	Partially Justified
Financial Assessments/Safeguarding: Financial matters regarding capital, income and house sale. Discontinued as the investigating Officer was unable to confirm the specific detail of this complaint	Discontinued / out of remit
Learning Disability Team / Contracting / Safeguarding: Numerous complaints regarding safeguarding, supported living management and the social work team care management	Ongoing
Adult Services Corporate Complaints	
Community Long Term Social Work Team: Breach of confidentiality	Not Upheld
Common Access Point: Poor communication from CAP	Partially
with concerns of a neighbour	Upheld

5. Compliments Adult Services 2022-23

5.1 Adult Services saw a significant **128**% increase in compliments in 2022-23.



5.2 These are some examples of compliments received by the Adult Services teams:

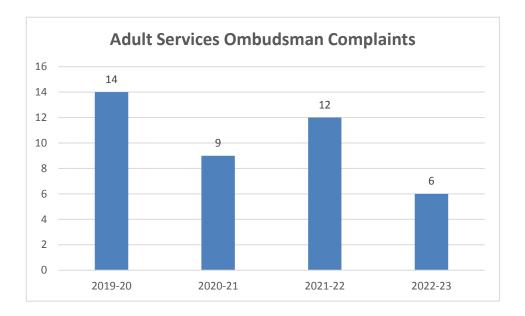
Common Access Point Social Workers:
received special thanks from the partner of a
service user eager to show their gratitude.
The partner said: "Over the last six months, I
have had a lot of contact with Social Services
over the care of my partner. I want to thank
all those involved, especially the workers I
cannot praise highly enough - They could see
I was at the end of my mental and physical
strength and did all they could to help me.
So, thank you once again."

Social worker from the Community Initial Assessment team: The daughter said: "We have read your Assessment and have nothing to add other than what an extremely insightful synopsis of our family. I humbly thank you again for all your help and kindness in this difficult time for my mother and me."

A Social Worker received terrific feedback from the daughter of a service user going through a difficult transition to a care home. The daughter said: "I want to let you know how well my family and I have been supported by my mum's Social Worker, X. Mum is now settled happily in Hengoed Park. The stress of mum's situation was extremely difficult to cope with, but X calmly and efficiently supported us through it. Also, care home staff said they had great confidence in X to bring the situation to a positive conclusion. We can't thank her enough."

6. Complaints Closed by the Public Services Ombudsman for Wales for Adult Services 2022-23

- 6.1 The Public Services Ombudsman for Wales (PSOW) publishes the annual letters to all Councils on its website. The letter highlights activities undertaken by the Ombudsman's office during the year and the Council's performance.
- 6.2 In 2022-23 the Ombudsman annual letter showed the PSOW received and closed six Adult Services complaints, which is a 50% reduction on last year and the lowest figure for the past four years.



6.3 Not all the Ombudsman figures in the annual letter relate to the year in which they were received, as investigations can take time to complete. In 2022-23 the Council received 14 enquiries about Adult Services complaints from the Ombudsman's office. Eleven were not investigated, one was referred to Health, one was able to be resolved quickly and one was withdrawn.

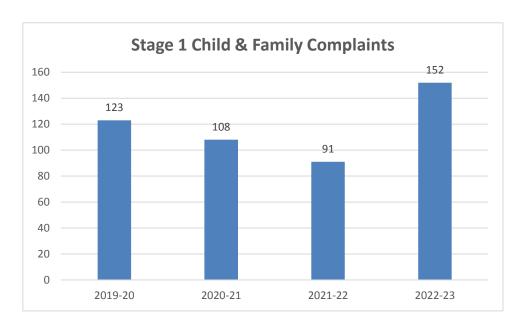
7. Adult Services Complaints Key Performance Indicators 2022-23

- 7.1 The table below shows overall performance by Adult Services on responding to complaints within the timescales stipulated in the Council's Corporate Complaints Policy.
- 7.2 Despite the pressure of increasing demand on both Adult Services and the Complaints Team, delays are kept to a minimum wherever possible and within the Council's control.

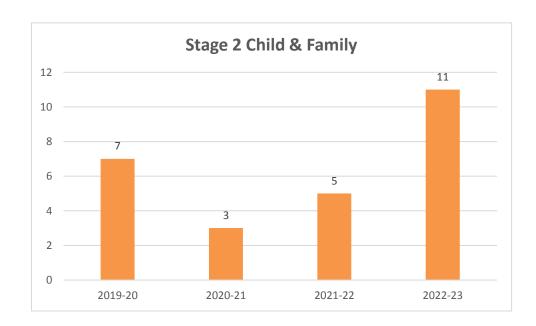
Key Performance Indicator	Comment / Management Actions
96% (189) of stage one social services complaints acknowledged within 2 working days	9 complaints not acknowledged within 2 working days
77.27% (153) of stage one social services complaints discussed with complainants, i.e. appointments with a Social Services Officer or Complaints Officer within 10 working days of acknowledgement	Delays due to capacity within the teams
88% (158) of stage one responded to within 5 working days of discussion	Delays due to capacity within the team. Some delays also due to being unable to reach complainants
100% (10) of stage two complainants receiving a written summary of the complaint within 5 working days	No delays – or within agreed timeframe with complainant
80% (8) of stage two complaints responded to within 25 working days, or within any extension approved by the Director of Social Services.	All extensions agreed with Director of Social Services One is still ongoing and has exceeded the timeframe the Director can agree to.
95.8% (23) stage 1 corporate complaints responded to within 10 clear working days (no requirement for a discussion)	Delay due to capacity within service department
50% (1) stage two corporate complaints responded to within 20 clear working days, or within any extension agreed with the customer.	Delay due to staff capacity in Complaints Team

8. Child & Family Services Complaints to Swansea Council 2022-23

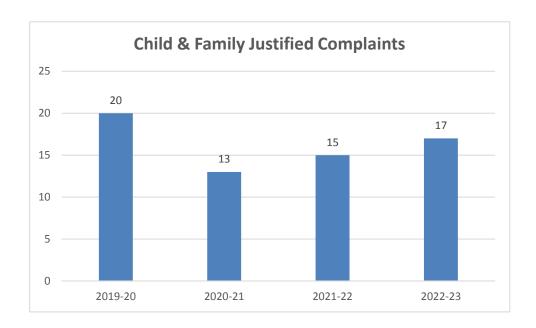
8.1 A total of **152** Stage 1 Child & Family Services complaints were recorded for 2022-23. This is a 67% increase on the previous year when 91 were recorded and a 23% increase on pre-pandemic levels. This is the highest number of stage 1 complaints in the past four years mainly due to the increasing demand and the pressure on services. This increase is also being seen across other Councils in Wales. There were ten complaints from the same complainant.



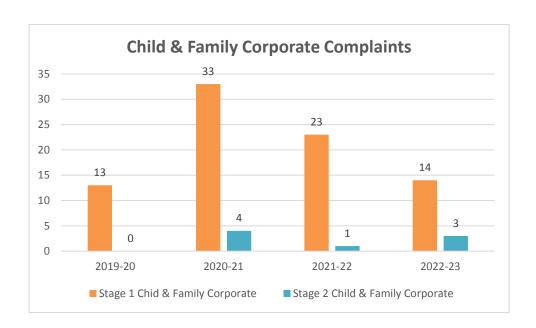
8.2 A total of **11** Stage 2 complaints were recorded for 2022-23. This is six more than last year and the highest number over the past four years.



8.3 Of all complaints received, **17** were justified compared with 15 for the previous year.



8.4 Corporate complaints relate to the business administration within Child & Family Services as opposed to Social Care Services. **14** stage 1 Corporate Complaints relating to Child & Family Services were received, which is a 39% reduction compared with last year and the lowest number in the last three years. Three further stage 2 complaints were Corporate Complaints.



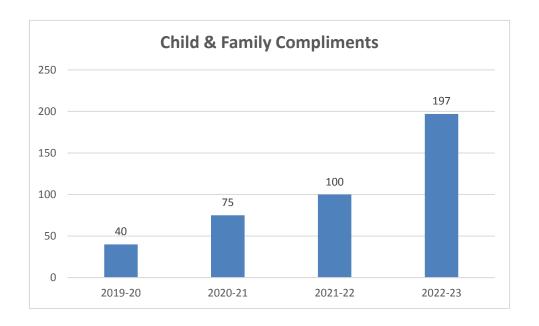
9. Outcomes of Stage 2 Complaints for Child & Family Services 2022-23

9.1 The table below provides the outcomes for the eleven stage 2 complaints and three stage 2 Corporate Complaints:

Complaint	Outcome
Child & Family Services	
Looked After Children Team: IRO notes being incorrect and stage 1 response did not address concerns.	Justified
BAYS: Request to move not granted, unhappy with social work assessment.	Not Justified
Child and Family general: Historical complaint - Social Services did not act to safeguard her when in LA care	Not Justified
Independent Review Officer Team: Poor communication from the team and not invited to reviews.	Not Justified
Friends and Family: Disagreed with the lack of financial support	Not Justified
BAYS: Via an advocate - young person unhappy with the actions taken by Social Services	Not Justified
IAA: Disagreement with Social Services decision not to allow family contact.	Not Justified
Child Disability Team: Via an advocate - Delay in receiving passport.	Not Justified
Looked After Children Team: Unhappy with accusations and contact not promoted.	Partially Justified
Friends and Family: Unhappy with contact/ placement breakdown and factually incorrect minutes.	Partially Justified
Child and family general: Historical complaint regarding parent returning to family home. Discontinued as legal action taken.	Discontinued
Child & Family Services Corporate Complaints	
Penderry Team: Concerns not being listened to and poor communication.	Partially Justified
Penderry Team: Checks carried out without consent	Justified
Penderry Team: Inappropriate comments made by social worker.	Not Justified

10. Compliments Child & Family Services 2022-23

10.1 Child & Family Services saw a significant **97%** increase in compliments in 2022-23.



10.2 These are some examples of compliments received by the Child & Family Services teams:

The Supervised Contact

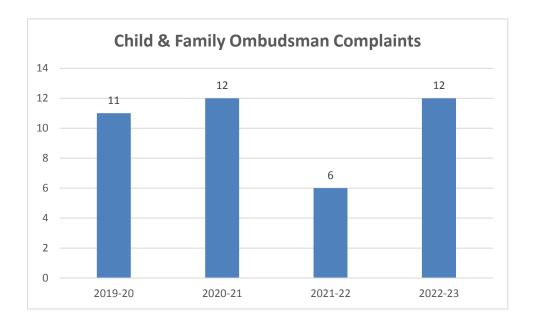
team received a lovely poem in a
Christmas card and a box of
chocolates from a grateful family.
The card read: "I don't know how to
thank you enough. For me, this time
has been so tough. But you listen to
me, and you understand, and are
always there with a helping hand.
So, thanking you is a must. The
depth of gratitude you must trust.
Thank you all so very much."
Another family member added:
"Thank you all for being the best."

An Independent Domestic Violence
Advocate received positive feedback
from South Wales Police regarding
their great working relationship in
response to domestic abuse incidents.
The South Wales Police
representative said: "Thank you for
your massive support and all the
knowledge from listening to you speak
to the victim about the situations she
has been put into. I can now better
understand the sheer number of
domestic abuse cases I attend."

Newly Qualified Social Worker X has received praise from the solicitor of a mother she is working with to support her son. The solicitor complimented X on her patience and hard work, resulting in a positive outcome.

11. Complaints Closed by the Public Services Ombudsman for Wales for Child & Family Services 2022-23

- 11.1 The Public Services Ombudsman for Wales (PSOW) publishes the annual letters to all Councils on its website. The letter highlights activities undertaken by the Ombudsman's office during the year and the Council's performance.
- 11.2 In 2022-23 the Ombudsman received and closed twelve Child & Family Services complaints, which is double last year's figure of 6 and the same number closed in 2020-21.



11.3 Not all the Ombudsman figures in the annual letter relate to the year in which they were received, as investigations can take time to complete. In 2022-23 the Council received 15 enquiries about Child & Family Services complaints from the Ombudsman's office, none of which were investigated.

12. Child & Family Services Complaints Key Performance Indicators 2022-23

- 12.1 The table below shows overall performance by Child & Family Services on responding to complaints within the timescales stipulated in the Council's Corporate Complaints Policy.
- 12.2 Despite the pressure of increasing demand on both Child & Family Services and the Complaints Team, delays are kept to a minimum wherever possible and within the Council's control.

Key Performance Indicator	Comment / Management Actions
93% (141) stage 1 social services complaints acknowledged within 2 working days.	A small number of delays due to the volume of workload and capacity within the team
76% (118) of stage one social services complaints discussed with complainants, i.e. appointments with a Social Services Officer or Complaints Officer within 10 working days of acknowledgement.	Delays due to capacity within the team. Some delay also due to being unable to reach complainants
75% (115) of stage 1 Social Services complaints responded to within 5 working days of discussion.	A small number of delays due to the volume of workload and capacity within the teams
100% (10) of stage two complainants receiving a written summary of the complaint within 5 working days	No delays – or within agreed timeframe with complainant
100% (10) of stage two complaints responded to within 25 working days, or within any extension approved by the Director of Social Services.	All extensions agreed with the Director
79% (11) stage 1 corporate complaints responded to within 10 clear working days (no requirement for a discussion)	Delay due to responding officer
100% (4) of stage two corporate complaints responded to within 20 clear working days, or within any extension agreed with the customer.	

13. Learning from Complaints across Social Services

- 13.1 Adult Services and Child & Family Services both use complaints, comments, and compliments from the public to continuously improve processes and services.
- 13.2 Complaints via the Ombudsman are discussed with Heads of Service and the relevant Principal Officer. The Complaints Officer responds to the PSOW on the actions undertaken by Swansea Council and any lessons learned. Once actions were completed, the complaint is closed on the system, recording the outcome and any lessons learned.
- 13.3 Adult Services undertake quality reviews through a Quality Improvement Group and Continuous Improvement Group to understand where learning and changes can be made as a result of complaints.
- 13.4 The Child & Family Services Learning and Innovation Team routinely takes the learning from complaints to inform the content of briefings, peer

- learning sessions, and content of training; as well as regularly sharing themes in the Child & family newsletters.
- 13.5 The Complaints Service receives an Internal Audit every three years to ensure it is undertaking its functions correctly. The internal audit of Complaints began at the end of 2022-23 and concluded in 2023-24 with the overall assurance level of substantial.

Agenda Item 10



Report of the Director of Corporate Services

Governance and Audit Committee – 28 February 2024

Corporate Risk Overview - Quarter 3 2023/24

Purpose: The report presents an overview of the status of council's

corporate risks to provide assurance to the Committee that they are being managed in accordance with the council's

risk management policy and framework.

Report Author: Richard Rowlands

Finance Officer: Paul Roach

Legal Officer: Debbie Smith

Access to Services Officers: Rhian Millar / Catherine Window

For Information

1. Background

1.1 This report provides an overview of the status of corporate risks in the Council to give assurance that key risks are being managed and risk management process is being followed.

2. Corporate Risks as at the end of Quarter 3 2023/24

- 2.1 The following summarises the status of risks recorded in the Corporate Risk Register as at the end of Quarter 3 2023/24.
- 2.2 There were 7 red status risks in the Corporate Risk Register as at the end of Q3 2023/24:
 - Risk ID 153: Safeguarding.
 - Risk ID 159: Financial Control: Medium Term Financial Plan delivery.
 - Risk ID 175: Freedom of Information and Subject Access Requests.
 - Risk ID 222: Digital, Data and Cybersecurity.
 - Risk ID 334: Cost of living crisis.

- Risk ID 338. Net Zero 2030 target.
- Risk ID 360. Development of New Waste Strategy -Transformation Programme.

2.3 During Quarter 3 2023/24:

- All of the corporate risks were recorded as having been reviewed at least once.
- Two risks were added to the Corporate Risk Register:
 - Risk ID 360. Development of New Waste Strategy -Transformation Programme.
 - Risk ID 371. Education Offer (to replace previous corporate risk Risk ID 94: Pupil attainment and achievement).
- One corporate risk was deactivated:
 - Risk ID 94: Pupil attainment and achievement (replaced by Risk ID 371. Education Offer).
- One risk was escalated to the Corporate Risk Register:
 - Risk ID 175: Freedom of Information and Subject Access Requests.
- No corporate risks were de-escalated from the Corporate Risk Register.
- No corporate risks changed their RAG status:
- One corporate risk changed its residual risk score:
 - Risk ID 334: Cost of living crisis. Increase in residual risk score from 15 to 25.
- 2.4 Appendix A presents the risks recorded on the council's Corporate Risk Register as at 31 December 2023. The reports for each risk include the following information:
 - Risk title and description...to summarize and describe the risk.
 - Risk Identification (ID) number...to identify and search for the risk in the register.
 - Risk level...Corporate level risks.
 - Responsible Officer...the officer responsible for managing the risk.
 - Councillor...the Councillor whose portfolio the risk relates to.
 - Last update...when the risk was last updated in the risk register.
 - Inherent Risk... the level of risk before Control Measures are applied.
 - Historical RAG...the level of residual risk assigned historically each month over a 12-month period (Red – High; Amber – Medium; Green – Low). The scores will range from 1-very low to 25-very high (calculated as the likelihood score times by the impact score).
 - Current Control Measures...live actions assigned to control or mitigate the level of risk. Last update...the date of the last time the Control Measure was updated in the risk register. Risk response...how the risk is controlled. Projected Completion...the date the Control Measure is expected to be implemented.

- Current impact...monthly assessment on the level of impact (1 = low; 5 = very high) should the risk come into effect. The graph shows the historical level of impact assigned each month over a 12-month period.
- Current likelihood...monthly assessment on how likely the risk is to come into effect (1 = low; 5 = very high). The graph shows the historical level of likelihood assigned each month over a 12-month period.

3. Review of Corporate Risk Management Framework.

3.1 The review of the Council's risk management arrangements has been completed. The review entailed an assessment of good practice and study of risk management practices from local authorities across Wales. The Chair of the Governance & Audit Committee, Leadership Team and Cabinet were all consulted during the review. Improvements have been identified and changes will be made to the Councils risk management framework and policy by the beginning of the new financial year, which will then be built into risk management practice and systems.

4. Internal Control Environment and Risk Reporting

4.1 The Governance & Audit Committee Chair had requested that Directors attend each quarter on a rotational basis and provide the Committee with presentations regarding the internal control environment, including risk management; this report providing a Corporate Risk overview will coincide with Director's attendance each quarter.

5. Integrated Assessment Implications

- 5.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
 - Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - Foster good relations between people who share a protected characteristic and those who do not.
 - Deliver better outcomes for those people who experience socioeconomic disadvantage.
 - Consider opportunities for people to use the Welsh language.
 - Treat the Welsh language no less favourably than English.
 - Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.

- 5.1.1 The Well-being of Future Generations (Wales) Act 2015 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.
- 5.1.2 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.
- 5.1.3 A Screening form was completed. This report is a 'for information' report and so is not relevant for an IIA.
- 6. Legal Implications
- 6.1 There are no legal implications.
- 7. Financial Implications
- 7.1 There are no financial implications.

Background papers: None.

Appendices: Appendix A – Corporate Risks as of 31 December 2023.

Appendix B – IIA Screening Form.

Risk Level: Corporate

Risk on a Page

Risk Title: Safeguarding Risk ID: 153

Description: If our safeguarding arrangements are not sufficiently robust (particularly with regards being able to fund, recruit

and retain sufficient qualified social workers; ensure placement sufficiency for looked after children and be able to provide or commission sufficient social care for adults with assessed care and support needs), then we will not be doing everything we possibly can to prevent the death, injury or neglect of a child or vulnerable adult and

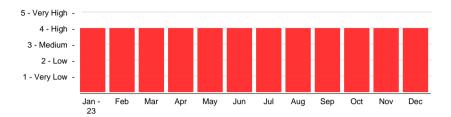
consequential reputational damage.

Responsible Officer :	David.Howes	Councillor:	Louise	Gibbard						Inhei	ent Risk	: 2	25	
Last Update :	05/12/2023	Historical RAG :	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23

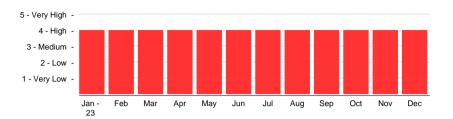
	Last Update : 05/12/2023	Historical RAG :	16	16	16	16	16	16	16	16	16	16	16	16		
Page 150	Work with the Health Board to review the curre	k with the Health Board to review the current level of partner financial contributions to the funding of grated intermediate care services (inc maximising regional and national income opportunities) to ensure effective service offer that reduces or delays recourse to long term managed care (within the Council; s								Last Update Risk Response 16/06/2023 Treat						
		effectiveness of safeguarding arrangements bi-monthly at the childrens and adults performanc nels, the corporate safeguarding board and the regional safeguarding board, quarterly at CMT y at PFM and take appropriate remedial action							Tr	eat		0	1			
	Invest in the Council¿s direct care provision se independently commissioned care services for resources)				07/0	3/2023	Tr	eat		0	01/03/2024					
	Provide specific advice to Welsh Government a children services policy commitment (including care provision) to avoid inadvertently exacerba children	supporting the growth of	not for pi	rofit look	ed after	children		3/2023	Tr	eat		0	1/03/2024	1		
	Implement new models for the commissioning linc. by supporting providers to provide a fair an overall available financial resources)						ty 07/0	3/2023	Tr	eat		0	1/03/2024	1		
	Invest in increasing the number of Foster Wale residential care beds for children (both locally a commissioned foster and residential care place resources)	and regionally) whilst decr	easing re	eliance o	n indep	endently		3/2023	Tr	eat		0	1/03/2024	1		

	Current Control Measures	Last Update	Risk Response	AppendixeAted Completion
	Implement effective recruitment processes both within the Directorate and the corporate centre (including maintaining a sufficient workforce infrastructure) to ensure that there are no avoidable delays in recruiting to essential posts determined as necessary to maintain a safe and effective social services function (within the Council¿s overall available financial resources)	07/03/2023	Treat	01/03/2024
	Implement a weekly Directorate workforce planning meeting to consider and prioritise all new recruitment requests to ensure that new recruitment is focussed on the maintenance of a safe and effective service and complies with current spending restrictions and supports delivery of the Council¿s MTFP	07/03/2023	Treat	01/03/2024
	Prioritise and target resources at maintaining care and support for those individuals in most critical need or at risk of suffering harm as part of the emergency planning infrastructure and re-prioritisation of the Councils COVID-19 Recovery Plan.	07/03/2023	Treat	01/03/2024
	Remodel the workforce infrastructure for social services including investment in capacity of alternatively qualified staff (both frontline and back-office staff) to take on functions that can be safely delivered by a non-registrant workforce (within the Council¿s overall financial resources)	07/03/2023	Treat	01/03/2024
	Recruit agency social workers to cover critical gaps in social work capacity	07/03/2023	Treat	01/03/2024
Page 151	Prioritise maintaining investment in and maximising income for the funding of prevention and wellbeing services that reduce or delay recourse to statutory services and managed care and support for children and adults who would otherwise develop care and support needs (within the Council¿s overall available financial resources)	07/03/2023	Treat	01/03/2024
	Implement a `grow your own¿ strategy to support an increase in the number of internal staff to pursue the social work qualification	07/03/2023	Treat	01/03/2025
	Prioritise a sufficient budget allocation (within the Council¿s overall available financial resources) to maintain the Council meeting at least the minimum level of statutory service across childrens and adults services	07/03/2023	Treat	01/03/2024
	Implement a social work academy in children services to support newly qualified staff to gain the skills and experience to become competent child protection practitioners	07/03/2023	Treat	01/03/2024
	Work with NPT Council and the Swansea Bay Health Board to implement a recruitment strategy for overseas staff to fill critical workforce shortages across health and social care	07/03/2023	Treat	01/03/2024

Current Impact: 4 - High



Current Likelihood: 4 - High



Risk on a Page

Risk Title: Financial Control - Budgetary Control, Annual Budget and MTFP Delivery

Description: If we fail to deliver the Council's MTFP, budget and maintain sufficient in year budgetary financial control, and in

particular do not ensure we contain service overspending, especially now inflation is embedded at levels far above the expectation of around 2%, then we will not be able to respond appropriately to continuing austerity, demographic pressures, increasing demand and pay and price pressures, potentially reopened equal pay risks

across local government, and changing public expectations in both current and future years.

Risk Level: Corporate

Risk ID: 159

Responsible Officer :	Ben.Smith	Councillor:	Robert Stewart Inherent Risk : 25											
Last Update:	4.4/4.0/2022	Library and DAO	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23
	14/12/2023 H	Historical RAG:	25	25	20	25	25	25	25	25	25	25	25	25

Page 153	Current Control Measures As part of the quarterly Revenue and Capital Budget Monitoring Reports to Cabinet, continue to monitor and report on slippage in Capital schemes and the effects on Capital schemes of price inflation affecting supplies and materials, including mitigating actions such as agreeing cost increases through FPR7 procedures.	Last Update 10/07/2023	Risk Response Tolerate	Projected Completion 31/03/2024
	Identify uncontainable inflation pressures as variances in the monthly PFM budget reporting cycles and quarterly through to Cabinet.	10/07/2023	Tolerate	31/03/2024
	Compliance within Financial Procedure rules so that spend remains within budget, including permitted virements.	10/07/2023	Treat	31/03/2024
	Services to ensure that inflation pressures are managed and contained within cash limits agreed at the time the budget and MFTP are set.	10/07/2023	Treat	31/03/2024
	Extant spending restrictions published to all staff and reviewed and many controls continue to be directly exercised by CMT in relation to filling vacant posts, restructures, regrades and committing contract sums	10/07/2023	Treat	31/03/2024
	Agreed and well established quarterly reporting plan in place to document and record at Cabinet all actions or non actions in services to contain spending	10/07/2023	Treat	31/03/2024
	PFM (Performance and Financial Management/Monitoring) process monthly is well established and understood by all officers with appropriate escalation mechanism to S151 Officer, Chief Executive and Cabinet if non compliance	10/07/2023	Treat	31/03/2024
	Agree modest virements in conjunction with the S151 Officer and report more sizeable issues for decision through Cabinet on S151 Officer advice around releases from central inflation provision (£4m) and	10/07/2023	Treat	31/03/2024

Current Control Measures

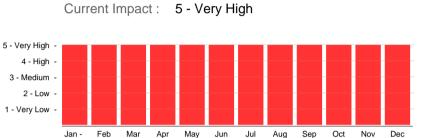
AppendixeAted
Last Update Risk Response Completion

contingency (£3.5m) in year.

Page 154

The S151 Officer to issue forthright and formal advice on the adequacy of budgets as part of budget setting, including the central inflation provision and contingency over the medium term taking into account all known pressures including prices.

Further development work to progress on transformation agenda over medium term through Achieving 10/07/2023 Treat 31/03/2024 Better Together reshaping programme.





Treat

31/03/2024

10/07/2023

Risk Title: Freedom of Information and Subject Access Requests

Description: IF we repeatedly fail to respond to FOIs and SARs and requests for erasure of personal data within the statutory

timescales THEN we risk the number of overdue requests leading to an Enforcement Notice from the ICO

requiring us to deal with the backlog and improve performance.

Risk Level: Corporate

Risk ID: 175

Responsible Officer :	Tracey.Meredith	Councillor:	David Hopkins						Inhe	rent Risk				
LastHadata	0.4.4.0.40.000		Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23
Last Update :	21/12/2023	Historical RAG:	6	6	6	6	6		6	6	6	6	12	12

Current Control Measures

Page 155

FOI and other information requests are all logged centrally and dispersed to a network of FOI officers embedded in different service units across the authority. Every service unit has an FOI officer. The workflow process for information requests is manual but will be automated. GOSS software has been purchased. Further improvements to the process are listed in 'Progress to Date'

Purchase and implement new workflow process software

Last Update Risk Response

05/12/2023 Treat

Projected Completion 31/03/2025

16/08/2023

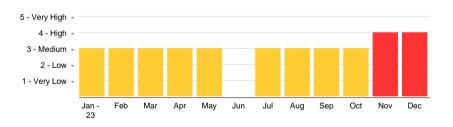
Terminate / Close

31/12/2023

Current Impact: 3 - Medium



Current Likelihood: 4 - High



Risk Level: Corporate

Risk on a Page

Risk Title : Cyber, data and digital security Risk ID : 222

Description: If the council does not have robust cyber, data and digital security measures and systems and behaviours in

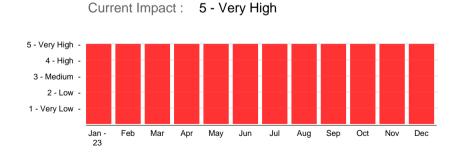
place, embedded and working as best as they can be then it will not be protected from cyber threats, disruption to service delivery, possible loss of information including confidential information and associated fines and

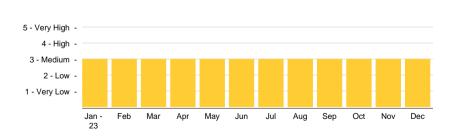
reputational damage.

Page 156

Responsible Officer :	Sarah.Lackenby	Councillor:	Andrea	Lewis						Inhei	rent Risk	: 2	25	
l oot l Indoto	11/12/2022	Historical DAC .	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23
Last Update: 1	11/12/2023	Historical RAG:	15	15	15	15	15	15	15	15	15	15	15	15

	Current Control Measures	Last Update	Risk Response	Projected Completion
Pac	Communication to users to keep up awareness	08/12/2023	Treat	31/03/2024
	Constant monitoring and surveillance of cyber risks by Security Office using system and tools in place. Situation reported monthly to Digital Services Board and Information Governance Board chaired by SIRO.	13/11/2023	Treat	31/03/2024
	DR test training completed for Digital Services team. Simulated test of a cyber attack. Training to be provided to HoS and CMT	13/11/2023	Treat	31/01/2024





3 - Medium

Current Likelihood:

Risk on a Page

Risk Title: Emergency Planning, Resilience and Business Continuity

Description: If we do not have sufficient emergency planning, resilience and business continuity arrangements in place, then

we will not be able to respond effectively in an emergency, provide the necessary civic leadership or continue to run vital services and ensure compliance with the legal requirements of the Civic Contingencies Act 2004 as a Category 1 Responder, which may lead to reputational damage, a loss of political and community confidence, increased potential for loss of life, prolonged recovery following a major/business continuity incident which will

deny service to the public and increase operating costs.

Risk Level: Corporate

Risk ID: 235

Responsible Officer :	Ness.Young	Councillor:	David Hopkins Inherent Risk : 16							16				
Last Update : 2	04/40/0000	Historical DAC	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23
	21/12/2023	Historical RAG:	9	9	9	9	9	9	9	9	9	9	9	9

Current Control Measures

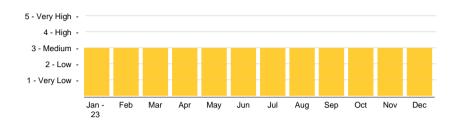
Projected Last Update Risk Response Completion As a Category 1 responder under the Civil Contingencies Act, Swansea Council has a legal requirement to 21/12/2023 31/03/2024 Treat

plan for and respond to emergencies, to do this the following will be maintained and monitored by the CHSEMWS manager, with any gap or area of concern escalated to the CX. 1. The authorities Major Incident Plan will be reviewed annually, and tested on a 3 yearly basis unless

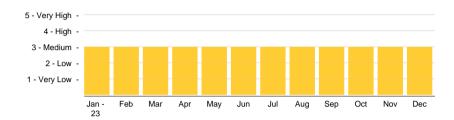
- activated, after which a review of the response will be provided to CMT, including any areas for improvement or additional resources needed to ensure we meet all legal obligations and can effectively respond to an emergency.
- 2. An annual delivery plan which clearly identifies priorities to address any gaps, or coming statutory needs, will be developed and delivered by the Emergency Management Service, to ensure compliance and maintenance of our ability to effectively respond and protect the organisation and communities.
- 3. Maintain and review on an annual basis all subordinate plans, including Mass Fatalities, Flood, Offsite COMAH Plan. Rest Centre Plan, with exercising as appropriate
- 4. Deliver a duty officer rota to effectively respond to emergencies available 24 hours per day, 365 days per year, this will be shared with all key external and internal partners including CMT to ensure a timely response can be acheived.
- 5. Annually review all identified risks, with relevant partner agencies that are present within the borders of Swansea Council to ensure control measures remain relevant and proportionate.
- Ensure that all HoS review their business continuity Plans on an annual basis, with a confirmation provided to ensure governance is in-place via reporting to CMT for compliance...
- 7. Review each year for all significant risks the Emergency Management Service (EMS) guidance, procedures and action cards.
- 8. Arrange for appropriate Strategic & Tactical Officer to be delivered by SWLRF, to ensure ongoing competence within key officers, this will be augmented by internal training and exercise participation to protect the organisation, and maintain our ability to respond.

31/03/2024

Current Impact: 3 - Medium



Current Likelihood: 3 - Medium



Risk Level: Corporate

Risk on a Page

Risk Title: Health & Safety Risk ID: 236

Description: If the Authority does not have a robust framework of Health & Safety Policies and procedures that are reviewed

regularly, or in the event of significant change, it may lead to legal non-compliance, the realisation of adverse

events including reputational damage, injury, financial loss and litigation by regulators.

Responsible Officer :	Ness.Young	Councillor:	David Hopkins							Inhe	erent Risk: 25					
Last Update:	21/12/2023	Historical BAO	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23		
		Historical RAG:	8	8	8	8	8	8	8	8	8	8	8	8		

Current Control Measures

To ensure the Authority meets it's legal responsibilities the following will be implemented and monitored.

1. Review the statutory Corporate H&S Policy and arrangements under full consultation with the organisation and TU's on a 3 yearly cycle, or when there is significant statute change or on the appointment of a new CX or Leader. Communicate changes to the Corporate H&S Policy to the organisation via H&S Alert and published on Staffnet.

- 2. HR to provide a copy of the Corporate H&S Policy to all new starters prior to commencement of employment, and be covered during induction, and completion of Mandatory H&S training to meet legal compliance, clarify roles and responsibilities and avoid accidents, ill health, reputational damage and the potential for legal/financial penalties.
- 3. Each Director or their delegated HoS to ensure a minimum of a Bi-annual H&S Committee, which will receive all minutes of lower level H&S Groups, statistics and information from the CHSEMWS, including any regulatory activity from the HSE/M&WWFRS and agree actions to resolve any unaddressed risks, with an agreed timeframe for completion.
- 4. Review all H&S policies and guidance under full consultation every 3 years, in the case of significant change through legislation or if an adverse incident identifies the need for review. Monitor and report as part of the Corporate HSW action plan, which will be updated on-line quarterly, with reports on progress submitted to each Directors H&S committee with a formal update on an annual basis to CMT.
- 5. Publish a Health, Safety & Wellbeing Action plan on a rolling 2-year basis, which will be ratified by the CX. This will set out its priorities, setting clear targets for actions such as training and development to maintain competence, improvements and KPI's. This will be monitored by the CHSEMWS Manager with non-compliance or areas of concern escalated to CMT who will receive an annual update.
- 6. A planned schedule of H&S Audits and Inspections, including Fire Safety will be carried out across the authority based on Risk. This will result in a report submitted to the manager/HoS identifying best practise and any areas for improvement, including action plans where required. This will be monitored by the CHSEMWS Manager and fed into the Departmental H&S & Directors H&S Committees to ensure action.
- 7. An annual programme of H&S training will be delivered to ensure staff are trained, and to maintain competence as a legal requirement all Health, Safety & Wellbeing Training delivered by the service will be

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Last Update Risk Response Completion

21/12/2023 Tolerate 31/03

31/03/2024

Last Update

Risk Response

AppendixeAted Completion

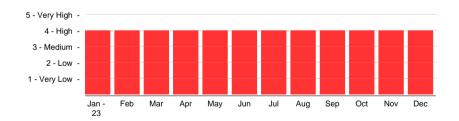
corporately. All HoS are required to annually review mandatory, statutory and role specific training for their areas, and ensure all locally arranged and delivered training is recorded.

- 8. All accidents/near misses will be reported to the CHSEMWS, with initial investigation by the service area. All RIDDOR reportable incidents will be reported to HSE, investigated, with a formal accident report and action plan as required. This information will be provided to H&S committees to prevent reoccurrence which could lead to injury, loss and legal penalties. An annual accident report complete with trend analysis will be submitted to CMT, with any identified gaps (i.e. Training agreed as priority areas for development in the following year, or sooner if required).
- 1. The Authority is required by law to Have a Corporate H&S Policy and arrangements in-place, signed by the Chief Executive & Leader. This will be reviewed under full consultation with the organisation and TU's on a 3 yearly cycle, significant statute change or on the appointment of a new CX or Leader, this will be communicated to the organisation via H&S Alert, and published on Staffnet.
- 2. A copy of the Corporate H&S Policy will be provided by HR to all new starters prior to commencement of employment, and be covered during induction, and completion of Mandatory H&S training to meet legal compliance, clarify roles and responsibilities and avoid accidents, ill health, reputational damage and the potential for legal/financial penalties.
- 3. Each Director or their delegated HoS is responsible for ensuring a minimum of a Bi-annual H&S Committee, this will receive all minutes of lower level H&S Groups, statistics and information from the CHSEMWS, including any regulatory activity from the HSE/M&WWFRS and agree action to resolve any unaddressed risks, with an agreed timeframe for completion.

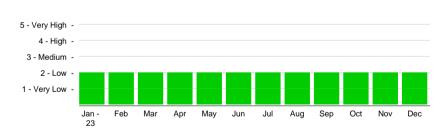
21/12/2023 Treat 31/03/2024

Page 160

Current Impact: 4 - High



Current Likelihood: 2 - Low



Risk Level: Corporate

Risk on a Page

Risk Title: Delivering the Regeneration Programme

Risk ID: 269

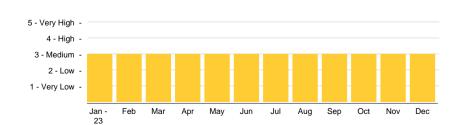
Description: If the local economy and infrastructure is not transformed and supported to be resilient to economic challenges

and changes to government policy on climate change, including flood risk and associated regulatory restrictions, and does not take advantage of opportunities to attract new development and investment, then it will not fulfil its potential as a regional centre to raise aspirations, improve services, lift skills, improve connectivity, create

well-paid employment opportunities and improve the well-being of Swansea citizens.

Responsible Officer: Robert Stewart Inherent Risk: Mark.Wade Councillor: 25 Jan-23 Feb Sep Oct Dec-23 Mar Apr May Jun Jul Aug Nov Last Update: 04/12/2023 Historical RAG: 9 9 9 9 9 9 9 9 9 9 9

_	Current Control Measures	Last Update	Risk Response	Projected Completion	
² age 161	Work with partners to deliver the Swansea Bay City Deal to attract investment across the region to deliver highly skilled and well-paid jobs, with outcomes and programme achieved in line with the City Deal Funding Agreement.	04/12/2023	Treat	31/12/2023	
	Continue dialogue with Welsh Government on viability funding to support Urban Splash investment	04/12/2023	Treat	31/12/2023	
	Preparations required to ensure completion of Copr Bay project following contractor entering administration	01/11/2023	Treat	31/03/2024	
	Urban Splash now appointed as long-term investment partner to deliver future phases of investment and to capitalise on the progress made via city deal projects. Initial design phases underway.	26/04/2023	Treat	31/12/2023	



3 - Medium

Current Impact:



3 - Medium

Current Likelihood:

Risk Level: Corporate

Risk on a Page

Risk Title: Impact of Poverty Risk ID: 290

Description: If there is increased demand on Council services due to an increased number of residents experiencing the

impact of poverty due to the pandemic and cost of living pressures. Then the impact includes increased debt,

reduction in household income and negative impact on health and well-being.

Responsible Officer :	Amy.Hawkins	Councillor:	Alyson	Pugh						Inhei	rent Risk	: 1	16	
Last Update :	13/12/2023	Historical RAG:	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23
	13/12/2023	HISTORICAL RAG.	9	9	9	9		9	9	6	9	9		9

	Last Update: 13/	40/40/0000	Lists is al DAC	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-2
	Last Update :	13/12/2023	Historical RAG:	9	9	9	9		9	9	6	9	9		9
F		dvice on financial inclusior	n to people who are struggli		ccessin	g the sup	port to		t Update 08/2023		Risk Resp reat	onse	С	Projected ompletion 1/03/202	on
'age 162	Provide weekly acc	cess to Welfare Rights Advertile	n a timely, effective manner vice helpline for frontline so lly apply this to the people t	cial care				31/0	08/2023	Т	reat		3	1/03/202	4
а	Support people to gain employment through referrals into mentoring and development of employability skills 31/08/2023 Treat as part of an agreed personal development plan, to improve the number of people increasing their household income through employment.											3	1/03/202	4	
			Co-ordination to access the mpacts of poverty and its ef)8/2023	Т	reat		3	1/03/202	4
p ir T c r F	Increased demand on council services due to an increased number of residents experiencing the impact of poverty due to the cost of living crisis and the ongoing impact of the pandemic. The impact includes increased debt, reduction in household income and negative impact on health and well-being. The cost of living payments have been automatically been paid to those who we have details for other's the online application is open. Additional funding has been allocated for energy crisis payments which residents are accessing. Further funding has been allocated to community and voluntary organisations for addressing food poverty and addressing period poverty, along with new 'holiday food' schemes for Summer 2023.							е	08/2023	Т	reat		3	1/03/202	4
	•		and Benefit advice and gui s support and administratio					-	08/2023	Т	reat		3	1/03/202	4

Work across the Authority through the Poverty Forum and with external partners through the Poverty Partnership Forum to identify risk management strategies to mitigate the impact.

Last Update

Risk Response

AppendixeAted Completion

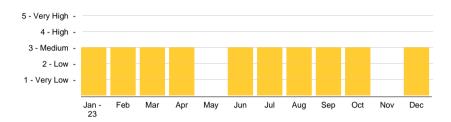
Co-ordinate targeted and time-bound grant schemes for helping people with Cost of Living challenges (e.g. fuel poverty) to reduce the impact of poverty on people and businesses.

31/10/2022

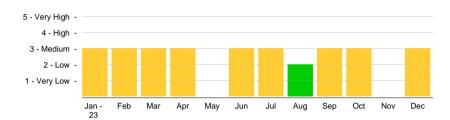
Treat

31/12/2023

Current Impact: 3 - Medium



Current Likelihood: 3 - Medium



Risk on a Page

Appendix A

Risk Level: Corporate

Risk Title: Cost of living crisis Risk ID: 334

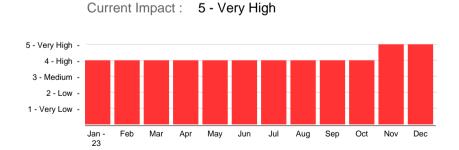
Description: If the cost of living crisis continues or gets worse, then it will lead to greater pressure on housing supply,

increased housing costs, higher levels of homelessness and increased demand on housing, tenancy support,

homelessness and other Council services.

Inherent Risk: Responsible Officer: Carol.Morgan Councillor: Andrea Lewis 25 Jan-23 Feb Jul Sep Oct Mar Apr May Jun Aug Nov Dec-23 18/12/2023 Historical RAG: Last Update: 25 25

Projected **Risk Response Current Control Measures Last Update** Completion increase supply of social housing via the More Homes Programme, Planning policy and indirectly through 16/12/2024 18/12/2023 Treat the allocation of social Housing Grant to Registered Social Landlords. Lobby Welsh Government to supply more financial resources to Local Authorities to tackle the cost of living 28/11/2023 Treat 16/12/2024 crisis. Provide individuals with help and advice regarding homelessness issues, housing benefit and rent arrears. 28/11/2023 16/12/2024 Treat



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Risk on a Page

Appendix A

Risk Level: Corporate

6

Risk Title: Workforce recruitment and retention Risk ID: 335

Description: If the Council is not able to recruit and retain the right staff, then there may be reduced workforce capacity and

capability, leading to lower staff morale and productivity, poor work quality, increased staff costs and reduced

staff well-being / higher sickness rates.

Responsible Officer :	Rachael.Davies	Councillor:	David Hopkins						Inhei	rent Risk	:	12		
Last Update :	22/12/2023	Historical RAG:	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23

6

6

6

Current Control Measures

Review the existing recruitment policy and assess weaknesses in application processes and selection processes for improvement by April 2023, to ensure the most appropriate application and selection techniques are being used to hire talent into the organisation.

Quarterly reporting provided to Directorates for PFM to highlight areas of concern and consider targeted approaches accordingly.

Last Update Risk Response Projected Completion

6

6

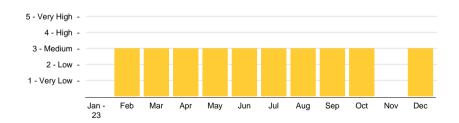
01/12/2023 Treat

6

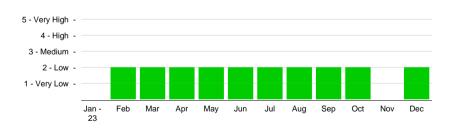
31/03/2024

13/07/2023 Tolerate 30/09/2023

Current Impact: 3 - Medium



Current Likelihood: 2 - Low



Risk Title: Mandatory training Risk ID: 336

Description: If the Council does not implement, monitor and ensure the completion of mandatory training, then the Council

may not fulfil its statutory and regulatory obligations or ensure the safe and effective operation and delivery of

services.

Risk Level: Corporate

Responsible Officer:	Ness.Young	Councillor:	David Hopkins							Inher	rent Risk	1	12		
Last Update :	00/40/0000	Historiaal DAC	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23	
	22/12/2023	Historical RAG:		6	6	6	6	6	6	4	4	4		4	

Current Control Measures

Regular Quarterly and annual reports to CMT on compliance levels by Directorate.

Last Update

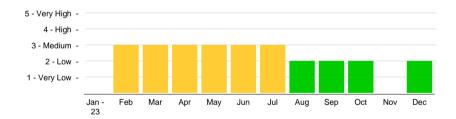
Risk Response

Projected Completion 31/01/2024

22/12/2023 Treat

Page 166

Current Impact: 2 - Low



Current Likelihood: 2 - Low



Risk on a Page

Risk Title: Social Cohesion Risk ID: 337

Description: If we do not manage to continue to improve community involvement and break down barriers amongst people in

terms of economic disparities, encourage tolerance to avoid social discord and strengthen community

development throughout all ages, then we could see increasing community tensions, disorder and civic unrest exacerbated by the cost of living crisis and perceived differences and people not feeling heard or listened to.

Risk Level: Corporate

Responsible Officer :	David.Howes	Councillor :	Alyson Pugh Inherent Risk : 16									16		
Last Update :	05/12/2023	Historical RAG :	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23
	00,12,2020	Thotorioa TV to :		9	9	9	9		9	9	6	6	6	6
Current Control Measures								t Update	R	isk Resp	onse		Projecte ompleti	
Engagement and in	ragement and involvement with minority communities to understand what matters and prom								T,	oat		0	1/02/201	24

	Current Control Measures	Last Update	Risk Response	Completion
ag	Engagement and involvement with minority communities to understand what matters and promote community cohesion and mitigate tensions, through the Partnership & Involvement Team. Project initiated and ongoing - update expected in new year	06/11/2023	Treat	01/02/2024
37	Whole Council training and capacity building to implement the Public Sector Equality Duty and the Human Rights Approach, through Strategic Equalities and Future Generations Board Update meeting planned Nov 23	06/11/2023	Treat	01/01/2024
	Ensure effective partnership working arrangements to develop supportive networks together through PSB and other key partnership arrangements transpiring out of the new newly developed Wellbeing Plan	06/11/2023	Treat	01/04/2024
	Utilise opportunities through the Shared Prosperity fund to join up and embed community engagement and involvement with all ages and all communities to develop shared values and empowered communities, Fund now launched and activity underway. Project and grant scheme developed and being launched in Nov 23	06/11/2023	Treat	01/03/2024
	Commission a research project to ensure complimentary and inclusive policy and decision-making to	06/11/2023	Treat	01/03/2024

Commission a research project to ensure complimentary and inclusive policy and decision-making to ensure social cohesion issues are considered in the development of plans and strategies across the council.

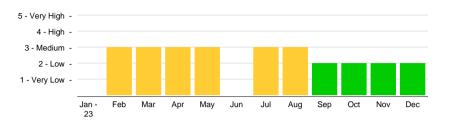
Joint working with Swansea Unit project has been initiated and likely to start in the next month - will be reviewed again in 3 months

Appendix A

Current Impact: 3 - Medium



Current Likelihood: 2 - Low



Risk Title: Net Zero 2030 target Risk ID: 338

Description: If we do not transform the Council to meet the collective net zero commitments asked of public bodies by Welsh

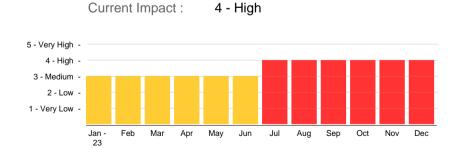
Government at sufficient pace and scale, then there is a possibility that the net zero target will not be met by

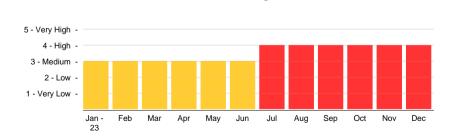
2030.

Velsh Risk Level: Corporate

Responsible Officer :	Mark.Wade	Councillor:	Andrea	Lewis						Inhei	rent Risk	:: 2	25	
Last Update :	0.4/4.0/0.000	Historiaal DAC	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23
	04/12/2023	Historical RAG:	9	9	9	9	9	9	16	16	16	16	16	16

Projected Risk Response **Current Control Measures Last Update** Completion Implement the Councils 2030 Net Zero delivery plan, with specific focus on carbon reductions in the 31/03/2024 04/12/2023 Treat Buildings and Energy and Fleet & Mobile Equipment categories. Measure success annually through WG emissions reporting figures. Develop a suite of actions to offset the emissions balance as unlikely to deliver zero emissions by 2030. 04/12/2023 Treat 31/03/2024 Actions to be monitored and reported annually as part of overall WG reporting. Source external funding to deliver sizable reductions in emissions. Monitor funding received through annual 04/12/2023 Treat 31/03/2024 reporting of delivery plan and respective emission reductions to be reported in annual welsh government submission.





4 - High

Current Likelihood:

Risk on a Page

Risk Title: Successful and Sustainable Swansea Corporate Transformation Plan

Description: If the council does not successfully deliver the Successful and Sustainable Swansea Corporate Transformation

Plan it will struggle to deliver its wellbeing objectives and to respond effectively to the external challenges it is

facing up to 2028.

Risk Level: Corporate

Risk ID: 350

Responsible Officer :	Ness.Young	Councillor:	Andrea Lewis Inh						Inhei	rent Risk	: 1	2			
Last Update :	20/42/2022	Historical DAC .	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23	
	29/12/2023	Historical RAG:					8	8	8	8	8	8		8	

Current Control Measures

Transformation Delivery Board to receive quarterly progress reports on all programmes within the CTP to monitor progress and address any performance issues should they arise.

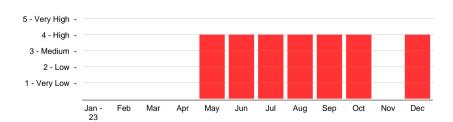
Ensure effective governance arrangements are in place and maintained to oversee implementation of the CTP and undertake annual review of arrangements in March each year to ensure ongoing suitability.

Last Update Risk Response Projected Completion

Treat 31/03/2024

18/05/2023 Treat 31/03/2024

Current Impact: 4 - High



Current Likelihood: 2 - Low

18/05/2023



Risk Title: Development of New Waste Strategy - Transformation Programme

Description : If the development of a new Waste Strategy is not adequately resourced, with timely decision making, then there

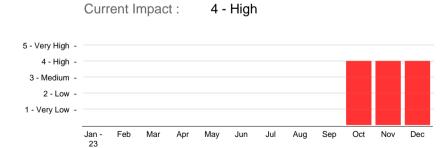
is a risk of the new strategy being ineffective and its implementation being delayed. This may mean the Council not meeting future increased statutory recycling targets or benefitting from financial and environmental benefits.

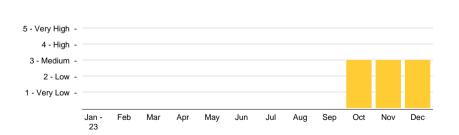
Risk Level: Corporate

Risk ID: 360

Responsible Officer:	Chris.Howell	Councillor:	Andrew Stevens							Inhe	rent Risk	: 1	12	
Localitadata	04/40/0000	l listariaal DAO	Jan-23	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec-23
Last Update :	21/12/2023	Historical RAG:										12	12	12

	Current Control Measures Combine cans with plastic for kerbside collection	Last Update 21/12/2023	Risk Response Treat	Projected Completion 30/04/2026
Page 17	Roll out reusable recycling containers county wide	21/12/2023	Treat	30/11/2024
7	Trial collection of additional recycling streams	21/12/2023	Treat	31/07/2024
	Obtain Corporate approval of new Strategy	21/12/2023	Treat	30/09/2024





3 - Medium

Current Likelihood:

Risk Title: Education offer Risk ID: 371

Description: If children do not receive a suitable education offer that provides them with the right employment skills and

qualifications (including digital and vocational), then they will not be able to access the opportunities that arise

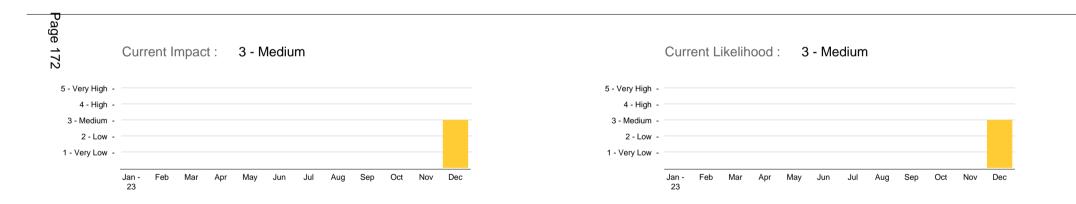
from the City Deal and other development opportunities that come to Swansea.

Risk Level: Corporate

Responsible Officer: Rhodri.Jones Councillor: Robert Smith Inherent Risk: 15

Jan-23 Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec-23

Last Update: 08/12/2023 Historical RAG:



Integrated Impact Assessment Screening Form – Appendix B

Please ensure that you refer to the Screening Form Guidance while completing this form.

Serv	ch service area and di rice Area: SDU ctorate: Corporate Servi		re you from?			
Q1 (a) What are you screer	ning for re	levance?			
	New and revised policies, Service review, re-organis users and/or staff	ation or servi		ons, which affec	t the wider communi	ty, service
	Efficiency or saving propositions Setting budget allocations New project proposals affections construction work or adaptions	for new finan ecting staff, co	ommunities or acce	ssibility to the b	uilt environment, e.g	
	Large Scale Public Events Local implementation of N Strategic directive and inte	: ational Strate	gy/Plans/Legislatio	n		
	Board, which impact on a Medium to long term plans	public bodies	functions		·	
	improvement plans) Setting objectives (for exa Major procurement and co Decisions that affect the a services	mmissioning	decisions			
	Other					
	er 3 2023/24 Corporate rate Risk in the Council What is the potentia (+) or negative (-)	during Q3.		: the impact		
	п	igii iiiipact	Medium impact	LOW IIIIPact	Investigation	Impact
Older Any of Future Disab Race Asylu Gypsi Sex Sexua Gend Welsh Pover Carer Comr	(including refugees) Im seekers ies & travellers ion or (non-)belief al Orientation er reassignment th Language rty/social exclusion rs (inc. young carers) munity cohesion					
Marria	age & civil partnership					\square

Integrated Impact Assessment Screening Form – Appendix B Human Rights \square Q3 What involvement has taken place/will you undertake e.g. engagement/consultation/co-productive approaches? Please provide details below - either of your activities or your reasons for not undertaking involvement Not applicable - Quarter 3 2023/24 Corporate Risk Overview. High level summary of the overall status of Corporate Risk in the Council during Q3. Have you considered the Well-being of Future Generations Act (Wales) 2015 in the Q4 development of this initiative: a) Overall does the initiative support our Corporate Plan's Well-being Objectives when considered together? Yes 🖂 No 🗌 b) Does the initiative consider maximising contribution to each of the seven national well-being goals? Yes 🖂 No c) Does the initiative apply each of the five ways of working? No d) Does the initiative meet the needs of the present without compromising the ability of future generations to meet their own needs? Yes 🖂 No 🗌 Q5 What is the potential risk of the initiative? (Consider the following impacts – equality, socio-economic, environmental, cultural, legal, financial, political, media, public perception etc...) Medium risk High risk Low risk \boxtimes Q6 Will this initiative have an impact (however minor) on any other Council service? Yes ⊠ No If yes, please provide details below **Q7** Will this initiative result in any changes needed to the external or internal website? Yes ⊠ No If yes, please provide details below

Q8 What is the cumulative impact of this proposal on people and/or communities when considering all the impacts identified within the screening and any other key decisions affecting similar groups/ service users made by the organisation?

(You may need to discuss this with your Service Head or Cabinet Member to consider more widely if this proposal will affect certain groups/ communities ago repeat versely because of other decisions the

Integrated Impact Assessment Screening Form – Appendix B

organisation is making. For example, financial impact/poverty, withdrawal of multiple services and whether this is disadvantaging the same groups, e.g., disabled people, older people, single parents (who are mainly women), etc.)

Outcome of Screening – Quarter 3 2023/24 Corporate Risk Overview. High level summary of the overall status of Corporate Risk in the Council during Q3.

- Q9 Please describe the outcome of your screening using the headings below:
 - Summary of impacts identified and mitigation needed (Q2)
 - Summary of involvement (Q3)
 - WFG considerations (Q4)
 - Any risks identified (Q5)
 - Cumulative impact (Q7)

(NB:	This summary paragraph	should	be us	sed in	the	'Integrated	Assessment	Implications'
	section of corporate repor	t)						

☐ Full IIA to be completed	
□ Do not complete IIA – please ensure you have provided the relevant information above to support the outcome	his

NB: Please email this completed form to the Access to Services Team for agreement before obtaining approval from your Head of Service. Head of Service approval is only required via email.

Screening completed by:
Name: R Rowlands
Job title: Strategic Delivery & Performance Manager
Date: 08/02/24
Approval by Head of Service:
Name: Lee Wenham
Position: Head of Communications & marketing
Date: 08/02/24

Please return the completed form to accesstoservices@swansea.gov.uk

Agenda Item 11



Report of the Director of Corporate Services

Governance and Audit Committee - 28 February 2024

Audit Wales Recommendations Tracker

Purpose: The report presents a tracker providing progress updates

meeting Audit Wales recommendations.

Report Author: Richard Rowlands

Finance Officer: Paul Roach

Legal Officer: Debbie Smith

Access to Services Officers: Rhian Millar / Catherine Window

For Information

1. Background

- 1.1 All relevant recommendations from Audit Wales national and local reports are recorded in a tracker and are monitored for progress.
- 1.2 The tracker is attached at Appendix A for information.
- 1.3 The tracker lists the relevant Audit Wales report, the recommendations, the actions that the Council intends to undertake to implement the recommendations, progress to date and target dates for completion.

2. Summary

- 2.1 The first sheet in the tracker lists all the Audit Wales recommendations that are considered closed and complete as at January 2024. The second sheet in the tracker lists all the Audit Wales recommendations that are considered open, as at January 2024:
- 2.1.2 'A missed opportunity' Social Enterprises. This national report looked at how local authorities are working to grow and make the most of Social Enterprises. Recommendations regarding self-evaluation and leadership on the poverty agenda have been implemented. Recommendations regarding self-evaluation and leadership on the

- poverty agenda have been implemented. A number of initiatives are underway and a Missed Opportunities Action Plan has been baselined.
- 2.1.3 'Together we can' Community resilience and self-reliance. This national report looked at how local authorities are creating the conditions needed to help communities thrive as independently as possible. The Council has implemented recommendations on self-evaluation. A Together We Can Action Plan has been drafted but is subject to further review to finalise priorities and timescales. Actions to address the gaps have been identified and progress is recorded in Appendix A with completion dates identified during 2024/25.
- 2.1.4 'Time for change' Poverty in Wales. This national report looked at the challenge of poverty in Wales and how government is responding. Recommendations regarding leadership on the poverty agenda, experience mapping to create inclusive services for people in poverty, a single web landing page for people seeking help, streamlining and improving application and information services for people in poverty and complying with the socio-economic duty are in place. The refresh of the Swansea Tackling Poverty Strategy has been progressing and a draft refreshed strategy is going through review and will soon be issued for public consultation.
- 2.1.5 Direct Payments for Adult Social Care. This national reported looked at how local authorities manage and encourage take up of Direct Payments and whether these services present value for money. The Council has implemented several recommendations from the report. Further work is required to review how advocacy services are considered at first point of contact to provide independent advice for Direct Payments to service users and Carers; work is in progress and ongoing.
- 2.1.6 'Cracks in the Foundations' Building Safety in Wales. This national report looked at how Welsh Government, local authorities and their key partners are implementing the requirements of the Building Safety Act 2022. The Council intends to expand on existing action plans taking account of the requirements of the new building safety act and work is in progress. LABC (Local Authority Building Control National membership organisation) is extending the support already provided to Welsh local authorities to assist them to implement the recommendations.
- 2.1.7 Digital Strategy Review. This study reviewed the Council's strategic approach to digital, and specifically the extent to which this has been developed in accordance with the sustainable development principle; and that it will help to secure value for money in the use of the Council's resources. The study found that the Council has a clear vision for its approach to digital and is developing comprehensive arrangements to support the delivery and monitoring of its digital

- strategy. The Council will undertake a review from 2027 onwards as a new revised Digital Strategy will be underway.
- 2.1.8 Setting of well-being objectives. This report set out to answer the question 'to what extent has the Council acted in accordance with the sustainable development principle when setting its new well-being objectives'. The report concluded that the Council had applied the Sustainable Development Principle in setting its Well-being Objectives and that embedding its approach to engagement and performance monitoring would further strengthen this. Recommendations on improving consultation and engagement and considering the impact of future financial savings and risks have been implemented. Work to revise service planning to help measure progress implementing the Councils Well-being Objectives has been completed in preparation for the 2024/25 planning cycle.
- 2.1.9 Update on the progress the Council is making around its
 Transformation Programme. This report describes if the Council is
 effectively planning and monitoring its approach to its organisational
 transformation programme and the delivery of associated savings. The
 overall view in the report is that whilst many aspects of the Council's
 strategic approach to planning, monitoring, and delivering its new
 Transformation Programme are well defined, some key arrangements
 could be strengthened to enable the Transformation Programme to
 adapt to the ongoing financial pressures and achieve its ambitions. The
 Council has outlined a number of actions to address the
 recommendations to be implemented during 2023/24.
- 2.1.10 Use of Performance information. This report considered the service user perspective and outcome information provided to senior officers and senior members (senior leaders), and how this information is used. The report found that, in common with most of other local authorities in Wales, performance information provided to senior leaders to enable them to understand the service user perspective and the outcomes of the Council's activities is limited. The Council has addressed the recommendations by undertaking a residents survey and introducing a new and integrated performance monitoring report. Corporate performance indicators and success measures will be reviewed each year as part of the annual service planning process.
- 2.1.11 Springing Forward Workforce. This report examined the Council's arrangements for managing its workforce. It looked at how the Council strategically plans for its workforce, how it monitors the use of its workforce and how it reviews and evaluates the effectiveness of its arrangements. The report found that the Council has a clear vision for its workforce, strengthened by its work with partners, but has not identified the resources required to deliver its strategy. The transformation delivery board has approved temporary funding to create additional capacity within the HR&OD service to deliver the

- workforce strategy; consideration will need to be given to the long-term delivery arrangements.
- 2.1.12 Sustainable development? making best use of brownfield land and empty buildings. This all-Wales report examines how Welsh councils are supporting and encouraging repurposing and regeneration of vacant properties and brownfield sites into homes or for other uses. The Council will undertake a systematic assessment all land within the settlement boundaries of Swansea, with a particular focus on brownfield land as part of efforts to safeguard and enhance greenfield infrastructure assets.

3. Integrated Assessment Implications

- 3.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
 - Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - Foster good relations between people who share a protected characteristic and those who do not.
 - Deliver better outcomes for those people who experience socioeconomic disadvantage.
 - Consider opportunities for people to use the Welsh language.
 - Treat the Welsh language no less favourably than English.
 - Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.
- 3.1.1 The Well-being of Future Generations (Wales) Act 2015 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.
- 3.1.2 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.
- 3.1.3 A Screening form was completed. This report is a 'for information' report and so is not relevant for an IIA.

4. **Legal Implications**

There are no legal implications. 4.1

Financial Implications 5.

There are no financial implications. 5.1

For Information

Background papers: None

Appendices: Appendix A – Audit Wales recommendations tracker. Appendix B – IIA Screening Form.

Audit Wales Report	Recommendation Reference	All Wales Recommendations	Swansea Specific Recommendations	Actions to Achieve Recommendation	Progress to date	Target date for completion	Responsible Officer	Status - In progress / complete
'A missed opportunity' – Social Enterprises. Publication Date: December 2022 https://www.audit.wales/ publication/missed- opportunity-social- enterprises	Recommendation 2	Deliver Action Plan To drive improvement we recommend that the local authority: ☐ formally approve the completed Action Plan; ☐ regularly report, monitor and evaluate performance at relevant scrutiny committees; and ☐ revise actions and targets in light of the authority's evaluation and assessment of its performance.	N/a	We will co-produce, approve, publish and promote our regional vision for Social Enterprises.	Engagement with key regional stakeholders on a future vision for Social Enterprises in Swansea has commenced. A Missed Opportunities Action Plan has been baselined.	2024/25	Lee Cambule	In progres
Adult Services Panel - 5th September 2023				We will create an engagement plan for continuous communication and interaction with Social Enterprise providers across Swansea.	Work plan to develop an engagement plan concerning Social Enterprises is under development. A Missed Opportunities Action Plan has been baselined.	2024/25	Lee Cambule	In progres
				We will complete mapping and analysis of existing Social Enterprises across Swansea.	Work plan to map and analyse Social Enterprises in Swansea is under development. A Missed Opportunities Action Plan has been baselined.	2024/25	Lee Cambule	In progres
				We will support and deliver the Regional Social and Micro Enterprise Project Plan in line with key milestones, resources and constraints.	We are members of the regional planning group and a project plan is under development with external partners. A Missed Opportunities Action Plan has been baselined.	2024/25	Lee Cambule	In progres
				We will implement a framework for developing and promoting Social Enterprises in Swansea.	We have identified resource requirements to take a lead in developing a Social Enterprise framework. A Missed Opportunities Action Plan has been baselined.	2024/25	Lee Cambule	In progres
				We will implement a framework for performance and financial monitoring and reporting relating to the work of Local Authorities in developing and promoting Social Enterprises in Swansea.	Work on a performance framework alilgned to the Corporate Priorirty 'Tackling Poverty and Enabling Communities' is progressing. A Missed Opportunities Action Plan has been baselined.	2024/25	Lee Cambule	In progres
				We will work with our partners to promote Social Enterprises in Swansea and the value of social enterprise.	We have identified resource requirements to take a lead in engagement activities for this area. A Missed Opportunities Action Plan has been baselined.	2024/25	Lee Cambule	In progres
				We will develop the Council's relationships with local people and communities to increase awareness and understanding of social enterprise and help them to get more involved in developing new initiatives in their areas.	We have identified resource requirements to take a lead in engagement activities for this area. A Missed Opportunities Action Plan has been baselined.	2024/25	Lee Cambule	In progres
				We will work with our partners to improve the skills and capabilities relevant to Social Enterprises in Swansea.	We have identified resource requirements to take a lead in engagement activities for this area. A Missed Opportunities Action Plan has been baselined.	2024/25	Lee Cambule	In progres
				We will explore and recommend how information on and access to social and micro enterprises is best held and share that link with people with care and support needs to the people providing that support.	We have identified resource requirements to take a lead in engagement activities for this area. A Missed Opportunities Action Plan has been baselined.	2024/25	Lee Cambule	In progres
				We will advise on available quality standards for social and micro enterprise.	Further discissions on quality standards and a sutiable approach to implementing and evaluating them will be scheduled in 2024. A Missed Opportunities Action Plan has been baselined.	2024/25	Lee Cambule	In progres
'Together we can' – Community resilience and self-reliance Publication Date: January 2023 https://www.audit.wales/ publication/together-we- can-community- resilience-and-self- reliance Adult Services Scrutiny		To help local authorities address the gaps they identify following their self-evaluation, we recommend that they: formally approve the completed Action Plan arising from the evaluation exercise; regularly report, monitor and evaluate performance at relevant scrutiny committees; and revise actions and targets in light of the authority's evaluation and assessment of its performance.	N/a	The two cross-directorate oversight groups that coordinate the delivery of the Corporate Priority 'Tackling Poverty and Enabling Communities' – the Swansea Council Poverty Forum and Enabling Communities Group – have undertaken an initial internal review of the evaluation tool. Based on the initial evaluation completed as part of the first recommendation (see closed actions), we have identified the following next steps to take this work forward.				

Ref	Audit Wales Report	Recommendation Reference	All Wales Recommendations	Swansea Specific Recommendations	Actions to Achieve Recommendation	Progress to date	Target date for completion	Responsible Officer	Status - In progress / complete
	D 1 70 A 1005					Jan-24	A 04		
	Panel - 7th August 2023				Across Services and Cabinet Members consideration of the self-evaluation assessment and identification of associated actions.	A Together We Can Action Plan has been drafted but is subject to further review to finalise priorities and timescales.	Aug-24	Lee Cambule	In progress
					Finalising action plan including timescales	A Together We Can Action Plan has been drafted but is subject to further review to finalise priorities and timescales.	Apr-24	Lee Cambule	In progress
					We will explore what community resilience and self-reliance means with our partners and with the people we support to develop a co-produced set of terms and definitions.	Definitions for communities, community resilience and community self-reliance have been incorporated into the draft refreshed Tackling Poverty Strategy which will be issued for public consultation in Spring 2024.	Apr-24	Lee Cambule	In progress
					We will develop a clear approach that embeds principles such as co-production, social value and strengths-based approaches to ensure that communities play a key role in developing community resilience and self-reliance.	Findings of the Tackling Poverty Survey (August 2023) have informed key principles of our approach to community resilience and self-reliance. We have identified resource requirements to take a lead in engagement activities for this area.	Jun-24	Lee Cambule	In progress
					_ ·	We have conducted a review of governance arrangements aligned with our Corporate Priority 'Tackling Poverty and Enabling Communities' and are developing new Terms of Reference documents.	Jun-24	Lee Cambule	In progress
					We will develop the tools and infrastructure to conduct and sustainably maintain a mapping of community assets.	We have identified resource requirements to take a lead in delivery activities for this area as part of the Enabling Communities Transformation Programme.	Jan-24	Lee Cambule	In progress
					We will conduct and sustainably maintain knowledge of local individuals and organisations supporting community resilience and self-reliance across Swansea.	We have identified resource requirements to take a lead in delivery activities for this area as part of the Enabling Communities Transformation Programme.	Apr-24	Lee Cambule	In progress
					to planning and delivering programmes and	We have identified resource requirements to take a lead in engagement activities for this area as part of the Enabling Communities Transformation Programme.	Sep-24	Lee Cambule	In progress
					We will explore existing relationships and develop new partnerships / collaborative working practices throughout communities across Swansea.	We have identified resource requirements to take a lead in engagement activities for this area as part of the Enabling Communities Transformation Programme.	Jul-24	Lee Cambule	In progress
					We will utilise opportunities to encourage people to be more active in their	Work on the Corporate Volunteering Policy, handbook and toolkit are being finalised. We have identified resource requirements to take a lead in engagement activities for this area as part of the Enabling Communities Transformation Programme.	Dec-24	Lee Cambule	In progress
	'Time for change' – Poverty in Wales Publication Date: November 2022 https://www.audit.wales/ publication/time-change- poverty-wales		Local strategies, targets & performance reporting for tackling & alleviating poverty We highlight that councils and partners have prioritised work on poverty, but the mix of approaches and a complicated delivery landscape mean that ambitions, focus, actions and prioritisation vary widely. We highlight that evaluating activity and reporting performance are also variable with many gaps. We	N/a	Refresh the Tackling Poverty Strategy	The refresh of the Swansea Tackling Poverty Strategy has been progressing and a draft refreshed strategy is going through review and will soon be issued for public consultation. This work has identied seven key themes which will be presented for further engagement and coproduction activities, so that people with lived experience play an active role in shaping our priorities and actions early in the lifecycle of this strategy.	Mar-24	Lee Cambule	In progress

f Audit Wales Report	Recommendation Reference	All Wales Recommendations	Swansea Specific Recommendations	Actions to Achieve Recommendation	Progress to date	Target date for completion	Responsible Officer	Status - Ir progress complete
		recommend that the councils use their Wellbeing Plans to provide a comprehensive focus on tackling poverty to coordinate their efforts, meet local needs and support the revised national plan targets and actions. This should: include SMART local actions with a greater emphasis on prevention; include a detailed resourcing plan for the length of the strategy; be developed with involvement from other public sector partners, the third sector, and those with experience of poverty; include a robust set of consistent outcome indicators and measures to increase understanding of poverty locally; be subject to annual public reporting to enable a		Develop a Poverty Performance Framework	The performance framework is under review internally prior to wider circulation, review and approval. This performance framework will align the key themes, outcomes, indicators and performance measures across the scope of the Corporate Priority, so that all parties involved in contributing to Tackling Poverty and Enabling Communities (as well as the refreshed strategy) can understand how their performance contributes to delivering our aims and objectives.	Mar-24	Lee Cambule	In progres
Direct Payments for Adult Social Care Publication Date: June 2022 https://www.audit.wales/publication/direct-payments-adult-social-care Adult Services Scrutiny Panel - 8th November 2022	Recommendation 3	whole system view of poverty locally to help	N/a		Work is in progress and ongoing. Adult services has commissioned advocacy services to meet general advocacy obligations arising under the SSWBA. Further work will be undertaken to understand how these commissioned services can assist with this recommendation. The Direct Payments team has commenced a pilot project with our Community Initial Assessment Social Work Team. This involves matching Direct Payment staff with social work practitioners to provide support to service users at first point of contact. This initiative is designed to address technical and process questions and ensure that service users are in the strongest position possible to understand how DP could benefit them. Information on advocacy and how to access is contained within the Social Work Practice Handbook. We are working currently to review and update our public information on advocacy and this work is almost complete. The commissioned provider has a schedule of visits to all social work teams to explain the service they provide more fully. The commissioned provider is also undertaking a schedule of awareness raising of their service with provider organisations and members of the public. The direct payment team are working alongside the child and family services' academy providing early support and dialogue around the provision of direct payments and recruitment of personal	2024/25	Amy Hawkins	Social Wo Handboo complete The othe actions a In progres
Foundations' – Building Safety in Wales Publication Date: August 2023 https://www.audit.wales/publication/cracks-foundations-building-safety-wales Service Improvement, Regeneration and Finance Panel - 12th March 2024	Recommendation 5	Local authorities should develop local action plans that articulate a clear vision for building control to be able to plan effectively to implement the requirements of the Act. The Plans should: • be based on an assessment of local risks and include mitigation actions; • set out how building control services will be resourced to deliver all their statutory responsibilities; • illustrate the key role of building control in ensuring safe buildings and be linked to well-being objectives and other corporate objectives; and • include outcome measures that are focused on all building control services, not just dangerous structures. Local authorities should work with partners to make better use of limited resources by exploring the potential for collaboration and regionalisation to strengthen resilience through a cost benefit analysis of partnering with neighbouring authorities, establishing joint ventures and/or adopting a regional model where beneficial.		Expand on existing action plans taking account of the requirements of the new building safety act. Local authority partnership arrangements are long established and continue to be utilised. Discussions commenced to consider regional / collaborative working to include "hubs" of expertise to address the inevitable shortage of specialisms resulting from the introduction of the new building	Work in progress, LABC (Local Authority Building Control National membership organisation) is extending the support already provided to Welsh LAs to assist in creating an action plan to satisfy the recommendation. Discussions commenced, requires Welsh Government direction. LABC is preparing guidance for Local Authorities in respect of alternative service delivery models including shared service or regional building control	-Apr-24 Apr-25	Mark Wade	In progre
Update on the progress the Council is making around its Transformation Programme	N/a	N/a	To ensure detailed planning documents have clearly defined timescales for when the Council plans to achieve the specified benefits and outcomes.	safety regime. All Programme Sponsors will be asked to develop timescales for the planned	Planning documents will be updated and approved by individual programme boards and shared with TDB in March 2024.	31-Mar-24	Ness Young	In progre
Publication Date: October 2023 https://www.audit.wales/			To ensure the MTFP demonstrates how savings are being delivered by the Council, differentitaing between business as usual and transformation related savings	The MTFP for 2024-28 will explain how savings are being delivered and will show how much is expected to be delivered through transformation.	Savings delivery is being reported in quarterly budget monitoring reports to Cabinet and savings related to transformation will be distinguished in 2025-28	31-Mar-24	Ness Young	In progre

f Audit Wales Report	Recommendation Reference All Wales Recommendations	Swansea Specific Recommendations	Actions to Achieve Recommendation	Progress to date	Target date for completion	Responsible Officer	Status - In progress / complete
publication/city-and- county-swansea-update- progress-council- making-around-its- transformation		To ensure the performance information focuses on benefits and outcomes as well as specific programme activities	All programme Sponsors have been asked to ensure that they include information on benefits and outcomes as they develop their programme metrics	performance indicators in March 2024 ahead of the new	31-Mar-24	Ness Young	In progress
7 Use of Performance Information Publication Date: 8th Jan 24 https://www.audit.wales/publication/city-and-county-swansea-use-performance-information-service-user-perspective-and Service Improvement, Regeneration and		Information on the perspective of the service user: • the Council should strengthen the information it provides to its senior leaders to enable them to understand how well services and policies are meeting the needs of service users.	Review the corporate performance indicators and success measures which are reported to senior leaders to consider how these could be strengthened in terms of measuring service user perspectives.	Review each year as part of the Service Planning process	30-Apr-24	Richard Rowlands	In progress
Finance panel - 9th April 2024 8 Springing Forward - Workforce Publication Date: 29 Dec 23	R1 N/a	The Council should identify the medium-term resource implications of delivering its Workforce Strategy to support appropriate delivery arrangements	The transformation delivery board has approved temporary funding to create additional capacity within the HR&OD service until March 2025 in order to deliver elements of the Workforce Strategy.	See column G	29-Mar-25	Rachael Davies	In progres
https://www.audit.wales/publication/city-and-county-swansea-council-springing-forward-workforce Service Improvement, Regeneration and Finance Panel - 9th May			Consideration will need to be given to the long term delivery arrangements and ways in which the 2022-2026 strategy can be completed but also the new 2026-2030 plan can be devised and achieved.		27-Mar-26	Ness Young	In progres
2024	R2 N/a	The Council should expand its use of benchmarking information to help it to effectively measure success and value for money of its workforce arrangements.	Explore other methods of data benchmarking with all-Wales HR Director network	See column G	27-Dec-24	Rachael Davies	In progress
9 Sustainable development? – making best use of brownfield land and empty buildings Publication Date: 25th January 2024 https://www.audit.wales/ publication/sustainable- development-making- best-use-brownfield- land-and-empty- buildings Service Improvement, Regeneration and	find and publicise suitable sites for regeneration: • this should draw on data already held by councils, as well as external data sources to develop a composite and more complete picture of sites; and • where known, key barriers should be named to help efforts to overcome them		The Council will undertake a systematic assessment all land within the settlement boundaries of Swansea, with a particular focus on brownfield land as part of efforts to safeguard and enhance greenfield infrastructure assets. The assessment process will benefit from engagement and consultation with key stakeholders and partners, and feed into the formation of the Council's Local Development Plan. The assessment will draw on data held by the council, and another other available external data, to develop a comprehensive list of potential sites that will be publicised as part of the LDP process. This will identify where constraints may exist and need to be addressed and/or mitigated to help facilitate development.		Initial assessment undertaken in year 2024/25. Final, approved list of sites for regeneration and development to be confirmed in adopted LDP – anticipated end of 2026.		In progress

Ref	Audit Wales Report	Recommendation Reference	All Wales Recommendations	Swansea Specific Recommendations	Actions to Achieve Recommendation	Progress to date	Target date for completion	Responsible Officer	Status - In progress /
									complete
						Jan-24			
	IIIance Panel - Gate toc		To help ensure that regeneration activity and the shaping of the environment is informed by the needs of communities Councils should increase opportunities for community-based involvement in regeneration, both in plan-making and actual development.		The Council will maximise opportunities for involvement of community groups and individuals in both plan-making and specific development proposals by: - Complying fully with the Community Involvement Strategy for the replacement Local Development Plan, which was agreed with the Welsh Government in 2023. This details the range of processes and approaches taken to involving key stakeholders in the process of development pan formation, including the process of identifying sites for regeneration - Consulting widely with key stakeholders and any potentially affected parties regarding specific development proposals submitted to the planning authority. This will be undertaken in full compliance with statutory procedures for such consultation and engagement on regeneration proposals, and any other development that will shape the environment		Ongoing	Phillip Holmes	In progress
		R3	To provide focus and impetus to developing brownfield sites Councils should review their current regeneration approaches and where appropriate set clearer, more ambitious regeneration policies and targets. Together these should: • set out the approach and expectations of the council; • set out how their approach will be resourced; and • set out how the approach aligns with national policy goals and regional planning priorities		The Council will continue to review its key priorities and approaches to regeneration on an annual basis, and where appropriate amends the targets associated with these and having regard to available budgets. This will be undertaken as part of the work to produce the Service Plan for Regeneration and Planning.	See column G	Regular annual review – to coincide with the new financial year	Phillip Holmes	In progress
	Future / Danding								
	Future / Pending Audits / Reports								
	Springing Forward								
	(Assets) Thematic Review – Unscheduled Care								
	Thematic review – Financial Sustainability								
	Thematic review – commissioning and contract management Recovery Planning								
	Homelessness								
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ef Audit Wales Report	Recommendation Reference	All Wales Recommendations	Swansea Specific Recommendations	Actions to Achieve Recommendation	Progress to date	Target date for completion	Responsible Officer	Closed (yes/no)
Equality Impact Assessments: More than a Tick Box Exercise? Publication Date: September 2022 https://www.audit.wales/ news/making-equality- impact-assessments- more-just-tick-box- exercise		Reviewing public bodies' current approach for conducting EIAs	N/a	See Report of the Cabinet Member for Culture and Equalities to Service Improvement and Finance Scrutiny Performance Panel 6th December 2022.	Nov-23 We have developed an Integrated Impact Assessment (IIA) process. Our Integrated Impact Assessment was designed to meet the requirements of existing and new Welsh legislation such as the Public Sector Equality Duty, the Well Being of Future Generations Act (2015) and the new Socioeconomic duty (2021). Our IIA process also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers and the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language. We have received positive feedback from officers on our new IIA process		Lee Wenham	Yes
2 'A missed opportunity' – Social Enterprises. Pubication Date: September 2022 https://www.audit.wales/ publication/missed- opportunity-social- enterprises		Conduct self evaluation To get the best from their work with and funding of Social Enterprises, local authorities need to ensure they have the right arrangements and systems in place. We recommend that local authority officers use the checklist in Appendix 2 to: self-evaluate current Social Enterprise engagement, management, performance and practice; identify opportunities to improve joint working; and ijointly draft and implement an action plan with timeframes and responsibilities clearly set out to address the gaps and weaknesses identified through the self-evaluation.	N/a	See Column I	The Council welcomes the opportunity to evaluate its current position and identify actions, improvements and transformative work required to enable, promote and support the Social Enterprise sector in Swansea. Through the two oversight groups that coordinate the delivery of the Corporate Priority 'Tackling Poverty and Enabling Communities' – these are the Swansea Council Poverty Forum and Enabling Communities Group – we have undertaken an internal review of the evaluation tool.		Lee Cambule	Yes
	SE-3	Leadership on the poverty agenda To ensure the local authority delivers its S.16 responsibilities to promote Social Enterprises we recommend that it reports on current activity and future priorities following the evaluation of its Action Plan including the Annual Report of the Director of Social Services.	N/a	See Column I	We are compliant with the Section 16 duties in relation to promoting and reporting on Social Enterprises through the Annual Report of the Director of Social Services.	Complete	Lee Cambule	Yes
Community resilience and self-reliance Publication Date: January 2023 https://www.audit.wales/publication/together-wecan-community-resilience-and-self-reliance		To strengthen community resilience and support people to be more self-reliant, local authorities need to ensure they have the right arrangements and systems in place. We recommend that local authorities use the evaluation tool (attached) to: • self-evaluate current engagement, management, performance and practice; • identify where improvement is needed; and • draft and implement an action plan with timeframes and responsibilities clearly set out to address the gaps and weaknesses identified in completing the evaluation tool.		See Column I	The Council welcomes the opportunity to evaluate its current position and identify actions, improvements and transformative work required to enable communities in Swansea to become resilience and self-reliant. Through the two oversight groups that coordinate the delivery of the Corporate Priority 'Tackling Poverty and Enabling Communities' – these are the Swansea Council Poverty Forum and Enabling Communities Group – we have undertaken an internal review of the evaluation tool.		Lee Cambule	Yes
4 'Time for change' – Poverty in Wales Publication Date: November 2022 https://www.audit.wales/ publication/time-change- poverty-wales		Leadership on the poverty agenda we note that just over a third of councils have lead members and lead officers for addressing poverty. Given the importance of effective leadership in driving the poverty agenda forward and breaking silos within councils and between public bodies, we recommend each council designate a cabinet member as the council's poverty champion and designate a senior officer to lead and be accountable for the anti-poverty agenda.		See Column I	Swansea is one of few councils in Wales with a Cabinet Member, senior officer and Tackling Poverty team responsible for leading on tackling poverty. A communications campaign to raise awareness and the profile of this structure with our partners and stakeholders is the next step. We continue to engage with Welsh Local Government Association (WLGA) colleagues and their newly established Poverty Group to share knowledge and opportunities for learning. This will allow us to explore innovations and new ways to improve our approach to tackling poverty.	Complete	Lee Cambule	Yes

Ref Audit Wales Report	Recommendation Reference	All Wales Recommendations	Swansea Specific Recommendations	Actions to Achieve Recommendation	Progress to date	Target date for completion	Responsible Officer	Closed (yes/no)
					Nov-23			
		Experience mapping to create inclusive services for people in poverty. we highlight that people in poverty are often in crisis, dealing with extremely personal and stressful issues, but they often find it difficult to access help from councils because of the way services are designed and delivered. We recommend that councils improve their understanding of their residents' 'lived experience' through meaningful involvement in decision-making using 'experience mapping' and/or 'Poverty Truth Commissions' to review and improve accessibility to and use of council services.	N/a	See Column I	Swansea's Poverty Truth Commission is referenced in the report. Lived experience is vital in driving our strategic approach to tackling poverty. This includes recognising the extent of the journey that people experience when they are in or at risk of poverty, as these journeys can be very different depending on a range of factors. Experience mapping will help us to understand the experience of people living in poverty and develop the right policies, changes and services. Swansea launched the first Poverty Truth Commission in Wales last month. This presents an opportunity to spearhead this approach and work closely with the commission and others to improve accessibility and use of council services.		Lee Cambule	Yes
		Single web landing page for people seeking help. we highlight the difficulties people in poverty face accessing online and digital services. To ensure people are able to get the information and advice they need, we recommend that councils optimise their digital services by creating a single landing page on their website that: is directly accessible on the home page; provides links to all services provided by the council that relate to poverty; provides information on the work of partners that can assist people in poverty.	N/a	See Column I	The Council recently launched a dedicated web page - https://www.swansea.gov.uk/costoflivinghel p with information and advice on support for people in or at risk of poverty. This includes links to Council services such as Local Area Coordinators and to external websites including Welsh Government and Citizens Advice. The intention is to use feedback on this site to explore what improvements could be made. The corporate Digital Strategy supports this recommendation and there are further opportunities to address difficulties people in poverty face in accessing online and digital services as we refresh the Tackling Poverty Strategy.		Lee Cambule	Yes
		Streamlining & improving application & information services for people in poverty. we note that no council has created a single gateway into services. As a result, people have to complete multiple application forms that often record the same information when applying for similar services. We highlight that whilst it is important that councils comply with relevant data protection legislation, they also need to share data to ensure citizens receive efficient and effective services. We recommend that councils: □ establish corporate data standards and coding that all services use for their core data; □ undertake an audit to determine what data is held by services and identify any duplicated records and information requests; □ create a central integrated customer account as a gateway to services; □ undertake a data audit to provide refresher training to service managers to ensure they know when and what data they can and cannot share; □ review and update data sharing protocols to ensure they support services to deliver their data sharing responsibilities.		See Column I	The corporate Digital Strategy supports this recommendation, along with the Information Management Policy. The joint campaign to increase pension credit take-up between Swansea and Neath Port Talbot is included in the report as a good example of targeting those most in need to provide support and assistance. Development of our Corporate Personal Debt Recovery Policy is cited as good practice but there is also a view that council services are generally more focused on helping people in crisis than prevention. Developing strategic approaches to prevention and poverty in the refreshed Tackling Poverty strategy will support this. Through the Coordinated Crisis Support programme, we - along with our partners - have piloted a multi-agency referral process and a Wales Accord on Sharing Personal Information (WASPI) data sharing agreement is in place across Employability providers through our Swansea Working Partnership and both demonstrate this recommendation. Community Hubs are referenced in the report as offering councils the opportunity to help people at the point of crisis and the		Lee Cambule	Yes

Ref Audit Wales Report	Recommendation Reference	All Wales Recommendations	Swansea Specific Recommendations	Actions to Achieve Recommendation	Progress to date	Target date for completion	Responsible Officer	Closed (yes/no)
	Recommendation 8	Complying with the socio-economic duty. we set out that while all councils undertake some form of assessment to determine the likely socio-economic impact of policy choices and decisions, approaches vary and are not always effective. We recommend that councils review their integrated impact assessments or equivalent to: ensure that they draw on relevant, comprehensive and current data (nothing over 12 months old) to support analysis; ensure integrated impact assessments capture information on: o involvement activity setting out those the service has engaged with in determining its strategic policy such as partners, service users and those it is co-producing with; o the cumulative impact/mitigation to ensure the assessment considers issues in the round and how it links across services provided across the council; o how the council will monitor and evaluate impact and will take corrective action; o an action plan setting out the activities the Council will take as a result of the Integrated Impact Assessment.		See Column I	Swansea Council is recognised in the report for its comprehensive Integrated Impact Assessment (IIA) approach that provides a robust measurement of the socio-economic impact of strategic decisions. To ensure that we draw on relevant, comprehensive and current data, we will work with Data Cymru utilising their new 'A View of Poverty' data tool. The importance of robust, quality data to inform policy development is highlighted and we will develop a Swansea-centric dashboard of data and intelligence relating to tackling poverty.		Lee Cambule	Yes
5 Public Sector Readiness for Net Zero Carbon by 2030 Publication Date: July 2022 https://www.audit.wales/ publication/public-sector- readiness-net-zero- carbon-2030			In order to meet its net zero ambition, the Council needs to fully cost its action plan and ensure that it is aligned with its Medium Term Financial Plan.		Delivery Plan approved 15th December Cabinet, 2022.	Complete	Geoff Bacon	Yes
6 Direct Payments for Adult Social Care Publication Date: June 2022	Recommendation 1	Local Authorities should review public information in discussion with service users and carers to ensure it is clear, concise and fully explains what they need to know about Direct Payments.	N/a	See Column I	Co-production is at the centre of DP development in Swansea. A DP forum has been created and arrangements for developing DP services are developed co-productively via this group.	Complete	Amy Hawkins	Yes
https://www.audit.wales/ publication/direct- payments-adult-social- care	Recommendation 2	Local Authorities should undertake additional promotional work to encourage the take up of Direct Payments.		See Column I	A Strategic Manager post has been created to promote take up of Direct Payments and ensure that these services are optimised for people where this option is preferred.	Complete	Amy Hawkins	Yes
	Recommendation 4	Local Authorities should ensure information about DP is available at the front door to social care and are included at the initial discussion on the available care options for service users and carers.		See Column I	The Strategic Manager is actively introducing measures to improve knowledge and understanding of Direct Payments across our Social Work Teams. Steps taken to achieve recommendation 4 include: • Training and information sessions for Common Access Point Staff. • Ongoing training and information sessions for all Social Work Teams. • Ongoing work between the Carers Centre and the Direct Payments Team to ensure the Carers Centre can provide information and advice about Direct Payments at the first point of contact.	Complete	Amy Hawkins	Yes

Ref	Audit Wales Report	Recommendation Reference	All Wales Recommendations	Swansea Specific Recommendations	Actions to Achieve Recommendation	Progress to date	Target date for completion	Responsible Officer	Closed (yes/no)
			Local Authorities should provide training to Social Workers on Direct Payments to ensure they fully understand their potential and feel confident promoting it to service users and carers.		See Column I	A comprehensive information and training schedule is underway. Detailed information packs have been developed and social work training is being provided. To date relevant teams trained include: Community Initial Assessments Team, Local Area Coordination, North Hub Social Work Team, Swansea University Student Social Workers. • Further training sessions are currently scheduled for West Hub, CAP, Hospital SW Teams, Traumatic Brain Injury Service, Sensory Services, Mental Health Teams, Older Peoples Mental Health Teams. • All other social work teams across the Directorate will receive this information and training over the coming months. • Weekly 'drop in' sessions have also been developed to enable social work practitioners to access Direct Payments Team advice and receive support and guidance.		Amy Hawkins	Yes
		Recommendation 6	Welsh Government and local authorities to work together (with Social Care Wales and the All-Wales Direct Payments Forum) to develop a joint Recruitment and Retention Plan for Personal Assistants.		See Column I	<u> </u>	Complete	Amy Hawkins	Yes
		Recommendation 7	Clarify policy expectations in plain accessible language and set out: • What Direct Payments can pay for; • How application and assessment processes, timescales and review processes work; • How monitoring individual payments and the paperwork required to verify payments will work; • How unused monies are to be treated and whether they can be banked; and • How to administer and manage pooled budgets. Public information should be reviewed regularly (at least every two years) to ensure they are working effectively and remain relevant.		See Column I	The current DP Policy is under review and a Project Board has recently been established to assist with this work. The revised DP Policy will address each of the areas referred to above and will be kept under review by the Project Board.	-	Amy Hawkins	Yes
			Welsh Government and local authorities to work together to establish a system to fully evaluate Direct Payments that captures all elements of the process – information, promotion, assessing, managing and evaluating impact on wellbeing and independence. Managing and evaluating impact on wellbeing and independence.		See Column I	The Strategic Manager is working closely with colleagues from across the department to establish enhanced performance management arrangements. These arrangements will enable a robust analysis of all aspects of the Direct Payment service. To date Welsh Government has not published or consulted on any proposal to develop new data sets or performance management arrangements. The department will collaborate with Welsh Government to develop these arrangements as required		Amy Hawkins	Yes
		Recommendation 10	Annually publish performance information for all elements of Direct Payments to enable a whole system view of delivery and impact to support improvement.		See Column I	To date Welsh Government has not engaged local authorities to develop these requirements. Currently the department has systems in place for monitoring of key performance metrics via our monthly Performance and Finance Monitoring programme. Monitoring also occurs via the Adult Services Scrutiny Performance Panel.	Complete	Amy Hawkins	Yes

Audit Wales Report	Recommendation Reference	All Wales Recommendations	Swansea Specific Recommendations	Actions to Achieve Recommendation	Progress to date	Target date for completion	Responsible Officer	Closed (yes/no
Setting of well-being objectives Publication Date: August 2023 https://www.audit.wales/publication/city-and-county-swansea-council-setting-well-being-objectives			development principle in the setting of its well- being objectives by:		Council in May. The Council commissioned		Richard Rowlands	Yes
				savings and risks might impact the delivery of its WBOs;	As part of budget planning for the coming year Cabinet/Corporate Management Team will align any proposed budget decisions with the current WBO's so there is an ongoing alignment between the objectives, the budget and Medium-Term Financial Plan and the individual service plans.	Complete	Richard Rowlands	Yes
				measure progress on delivering its WBOs. Ensuring that any future Service Plans also takes the opportunity to include expand the number of measures which focus on outcomes and impacts.	been reviewed and revised. The template for each service has been pre-populated		Richard Rowlands	Yes
Update on the progress the Council is making around its Transformation Programme Publication Date: October 2023 https://www.audit.wales/ publication/city-and-		N/a	To formalise the reporting and communications between the TDB, the individual programmes, and the necessary democratic processes		The STCs and Scrutiny Performance Panels each have an annual work programme and are working through these.	Complete	Ness Young	Yes
county-swansea-update- progress-council- making-around-its- transformation			To ensure the longer-term ambitions and objectives across all the twelve transformation programmes are clear		Complete. Intended outcomes and benefits have been reviewed and updated for all programmes	Complete	Ness Young	Yes
			•	•	Complete. The new highlight report was endorsed by TDB on 14 December.	Complete	Ness Young	Yes
'Cracks in the Foundations' – Building Safety in Wales Publication Date: August 2023 https://www.audit.wales/ publication/cracks- foundations-building- safety-wales Service Improvement, Regeneration and		Local authorities should urgently review their financial management of building control and ensure they are fully complying with Regulations. This should include: • establishing a timetable of regular fee reviews to ensure charges reflect the cost of services and comply with the Regulations; • annually reporting and publishing financial performance in line with the Regulations; • ensuring relevant staff are provided with training to ensure they apply the Regulations and interpret financial reporting correctly; and • revise fees to ensure services are charged for in accordance with the Regulations.		annual basis following prescribed methodology to achieve cost recovery of the fee earning activities of the service. Financial statement produced year end and	deliver an update at a proposed summit	Complete and ongoing	Mark Wade	Yes

Audit Wales Report	Recommendation Reference	All Wales Recommendations	Swansea Specific Recommendations	Actions to Achieve Recommendation	Progress to date	Target date for completion	Responsible Officer	Close (yes/n
					Nov-23			
Finance Panel - 12th March 2024	Recommendation 8	Local authorities should review risk management processes to ensure that risks are systematically identified, recorded, assessed, mitigated and subject to regular evaluation and scrutiny.		Corporate risk register established and monitored monthly. Long established quality management systems in place and closely monitored.	•	Complete and ongoing	Mark Wade	Yes
Digital Strategy Review	Recommendation 1	N/a	R1 When the Council conducts future reviews of		· · · · · · · · · · · · · · · · · · ·	Mar-28	Sarah Lackenby	Yes
Publication Date: October 23 https://www.audit.wales/ bublication/city-and- county-swansea-digital- strategy-review Service Improvement, Regeneration and Finance Scrutiny Panel - 17th January 2024			its digital strategy, to help ensure it learns from the reviews and shares this learning widely the Council should: • determine if it had sufficient and appropriate information at the outset to determine the value and benefits of delivering the strategy overall and individual digital projects; • assess whether digital projects were delivered on time, to cost with perceived benefits being realised and identify any barriers preventing successful delivery of projects; • review the timeliness of its monitoring and reporting of progress to assess if emerging risks and issues were highlighted earlier enough for officers to deliver mitigating actions; and • review the effectiveness of the governance arrangements for its digital strategy to ensure they effectively support its delivery.	Improvement, Regeneration and Finance Scrutiny Panel on 12th December 2023 and to follow thereafter to Governance & Audit Committee for information The Council will undertake a review from 2027 onwards as a new revised Digital Strategy will be underway. This work will comprise: • A review of whether the external environment analysis proved to be the anticipated trajectory and what that means for any new strategy. Determine if the Council had sufficient and appropriate information at the outset • Feedback from internal and external	Improvement, Regeneration and Finance Scrutiny Panel on 12th December 2023 and Governance & Audit Committee for information on the 17th January 2024.			
Publication Date: 8th Jan 24 https://www.audit.wales/publication/city-and-county-swansea-use-performance-information-service-user-perspective-and Service Improvement, Regeneration and Finance panel - 9th April			Information on the perspective of the service user: • the Council should strengthen the information it provides to its senior leaders to enable them to understand how well services and policies are meeting the needs of service users.	2023 to obtain more information for senior leaders on service user perspectives.	Complete	Complete	Richard Rowlands	Yes
024	R2		Information on progress towards outcomes: • the Council should strengthen the information provided to senior leaders to help them evaluate whether the Council is delivering its objectives and its intended outcomes.	performance monitoring reports.	The Council has reviewed its performance management reports so that it can report from Q2 2023/24 onwards on progress meeting the corporate well-being objectives in a more comprehensive and holistic way that incorporates both qualitative and quantitative data and offers a more rounded view of performance delivering the corporate priorities.	Complete	Richard Rowlands	Yes
Springing Forward - Workforce	R2	N/a	The Council should expand its use of benchmarking information to help it to effectively measure success and value for money of its	The HR&OD service has started to make use of wider benchmarking data sets e.g. Data Cymru to inform recommendations	See column G	29-Dec-23	Rachael Davies	Yes
Publication Date: 29 Dec 23 https://www.audit.wales/publication/city-and-county-swansea-councilspringing-forward-workforce Service Improvement, Regeneration and Finance Panel - 9th May 2024			workforce arrangements.	and decisions				
Dec 23 https://www.audit.wales/publication/city-and-county-swansea-council-springing-forward-workforce Service Improvement, Regeneration and Finance Panel - 9th May			•					
Dec 23 https://www.audit.wales/publication/city-and-county-swansea-council-springing-forward-workforce Service Improvement, Regeneration and Finance Panel - 9th May			•					
Dec 23 https://www.audit.wales/publication/city-and-county-swansea-council-pringing-forward-workforce Service Improvement, Regeneration and Finance Panel - 9th May			•					
Dec 23 https://www.audit.wales/publication/city-and-county-swansea-council-springing-forward-workforce Service Improvement, Regeneration and Finance Panel - 9th May			•					

Integrated Impact Assessment Screening Form – Appendix B

Please ensure that you refer to the Screening Form Guidance while completing this form.

Dire	ch service area and vice Area: SDU ctorate: Corporate Se		re you from?			
Q1 (a) What are you scre	ening for re	evance?			
	New and revised policion Service review, re-orgatusers and/or staff			ons, which affec	t the wider communi	ty, service
	Efficiency or saving pro Setting budget allocation New project proposals construction work or ac	ons for new finan affecting staff, co	ommunities or acces	ssibility to the b	uilt environment, e.g.	
	Large Scale Public Eve Local implementation of Strategic directive and	ents of National Strate	gy/Plans/Legislation	n		
	Board, which impact or Medium to long term pl			development pla	ans, service delivery a	and
	improvement plans) Setting objectives (for empty and page 1) Major procurement and Decisions that affect the services	I commissioning	decisions			
	Other					
A trac	ker providing progres	s updates me	eting Audit Wale	es recommer	idations.	
Q2	What is the poten	tial impact o	n the following	: the impact	s below could b	e positive
Q2	What is the poten (+) or negative (-)	-	n the following	_		e positive No Impact

Integrated Impact Assessment Screening Form – Appendix B

Q3	What involvement has taken place/will you undertake e.g. engagement/consultation/co-productive approaches? Please provide details below – either of your activities or your reasons for not undertaking involvement								
Not a	pplicable - a tr	acker provi	ding progress update	s meeting Audit Wales recommendatior	าร.				
Q4	Have you co		_	ture Generations Act (Wales) 2015 in	the				
a)	Overall does the together? Yes ⊠		upport our Corporate Pl	an's Well-being Objectives when considered					
b)	Does the initiat Yes ⊠			n to each of the seven national well-being go	als?				
c)	Does the initiat Yes ⊠		ch of the five ways of wo	orking?					
d)	Does the initiat generations to Yes ⊠	meet their o	wn needs?	thout compromising the ability of future					
Q 5		nic, enviror		(Consider the following impacts – equal I, financial, political, media, public	ity,				
	High risk		Medium risk	Low risk					
Q6	Will this init	iative have	an impact (howeve	r minor) on any other Council service	e?				
[Yes	⊠ No	If yes, please pro	ovide details below					
Q 7	Will this init	iative resu	It in any changes ne	eeded to the external or internal webs	ite?				
	Yes	⊠ No	If yes, please pro	ovide details below					
Q 8	What is the	cumulativ	e impact of this pro	posal on people and/or communities					

when considering all the impacts identified within the screening and any other key decisions affecting similar groups/ service users made by the organisation?

(You may need to discuss this with your Service Head or Cabinet Member to consider more widely if this proposal will affect certain groups/ communities more adversely because of other decisions the organisation is making. For example, financial impact/poverty, withdrawal of multiple services and

Integrated Impact Assessment Screening Form – Appendix B

whether this is disadvantaging the same groups, e.g., disabled people, older people, single parents (who are mainly women), etc.)

Outcome of Screening – a tracker providing progress updates meeting Audit Wales recommendations. This report is a 'for information' report and so is not relevant for an IIA.

- Q9 Please describe the outcome of your screening using the headings below:
 - Summary of impacts identified and mitigation needed (Q2)
 - Summary of involvement (Q3)
 - WFG considerations (Q4)
 - Any risks identified (Q5)
 - Cumulative impact (Q7)

(NB:	This	summary	paragraph	should b	be use	d in the	'Integrated	Assessment	Implications'
	section	on of corp	orate repo	rt)					

Full IIA to be completed
☐ Do not complete IIA – please ensure you have provided the relevant information above to support this outcome

NB: Please email this completed form to the Access to Services Team for agreement before obtaining approval from your Head of Service. Head of Service approval is only required via email.

Screening completed by:	
Name: R Rowlands	
Job title: Strategic Delivery & Performance Manager	
Date: 08/02/24	
Approval by Head of Service:	
Name: Lee Wenham	
Name: Lee Wenham Position: Head of Communications & marketing	

Please return the completed form to accesstoservices@swansea.gov.uk

Agenda Item 12



Report of the Head of Democratic Services

Governance & Audit Committee – 28 February 2024

Governance & Audit Committee Action Tracker Report

Purpose: This report details the actions recorded by the

Governance & Audit Committee and response to

the actions.

Report Author: Jeremy Parkhouse

Finance Officer: N/A

Legal Officer: N/A

Access to Services

Officer:

N/A

For Information

1. Introduction

- 1.1 During the course of Governance & Audit Committee meetings various actions may be decided which are recorded on the minutes of the meetings.
- 1.2 As agreed in 2016/17 an Action Tracker process was put in place to ensure transparency over the outcomes of actions agreed by Committee.
- 1.3 The Action Tracker records the actions agreed by the Governance & Audit Committee and provides an outcome for each action.
- 1.4 The up to date Action Tracker 2023/24 is attached at Appendix 1.
- 1.5 The Action Tracker is regularly updated and any completed actions will be marked 'Completed' and coloured in grey.
- 1.6 The Action Tracker is reported to each Governance & Audit Committee meeting for information.

2. Integrated Assessment Implications

- 2.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
 - Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - Foster good relations between people who share a protected characteristic and those who do not.
 - Deliver better outcomes for those people who experience socioeconomic disadvantage.
 - Consider opportunities for people to use the Welsh language.
 - Treat the Welsh language no less favourably than English.
 - Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.
- 2.1.1 The Well-being of Future Generations (Wales) Act 2015 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.
- 2.1.2 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.
- 2.2 There are no implications associated with this report.

3. Financial Implications

3.1 There are no financial implications associated with this report.

4. Legal Implications

4.1 There are no legal implications associated with this report.

Background Papers: None

Appendices:

Appendix 1 Governance & Audit Committee Action Tracker 2023/24 (Recently

closed actions highlighted).

Appendix 1

		Governance & Audit Committee - Action	Tracker 20	23/2024 Appendix 1
Date of Meeting	Minute Ref	Action	Nominated Officer(s)	Status / Timescale
17/01/24	67	Audit Wales Digital Strategy Review	(-)	
		David Roberts, Lay Member would forward a link to the Swansea Bay University Health Board to the Democratic Services Officer for circulation to the Committee.	David Roberts / Jeremy Parkhouse	Closed Link circulated.
17/01/24	66	Implementation of Accounts Receivable Internal Audit Service's (IAS) Follow Up Review Recommendations		
		The Chair requested that the Head of Digital and Customer Services sought priority action from Oracle for the areas that required enhancement that would be relative to all Oracle clients, which would also provide the biggest impact to assist the processes within the Team, for example VAT input becoming a mandated field.	Sarah Lackenby	Ongoing
1701/24	65	Fundamental Audits 2022/23 Recommendation Tracker		
		Ensuring that recommendations partly or not implemented in Accounts Receivable / Accounts Payable which had their deadlines extended, were not missed and considering introducing an alternative classification for these items. The Principal Auditor would highlight this to the Chief Auditor.	Nick Davies / Simon Cockings	Ongoing
06/12/23	62	Governance & Audit Committee Work Plan		
00/40/00		The Chair requested that training session(s) be arranged on the following areas: - Performance management framework. Risk management. Internal audit.	Jeremy Parkhouse / Richard Rowlands / Simon Cockings	Closed Sessions organised on the following dates: Performance Management Framework — 11a.m. on 23/05/24 Risk Management — 11a.m. on 12/06/24 Internal Audit — 11 a.m. on 03/07/2024
06/12/23	55	Internal Audit Monitoring Report - Quarter 2 - 2023/24	Circ co	Ongoing
05/40/02	47	The Chair queried whether the effectiveness of the control measures on the risk register had been audited as part of the Corporate Governance audit. The Chief Auditor confirmed that he would respond regarding the review of corporate governance and would ensure the Chair received all audit reports finalised as requested.	Simon Cockings	Ongoing In 2024-25 the IAS will review the effectiveness of the Council's risk management framework, policy and procedures.
25/10/23	47	Audit Wales stated that it planned to report on the Statement of Accounts in March 2024.	Audit Wales	Ongoing A Special Committee meeting has been

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				scheduled for 14/03/2024 to receive the Statement of Accounts reports.
25/10/23	46	Report on the Audit Wales 'Together We Can' - Community		
		Resilience and Self-Reliance Report Recommendations The Chair recognised the work already completed and the large amount of work outstanding, which could take time to complete. She requested that the Tackling Poverty Service Manager provides an update on the timelines at a future meeting.	Lee Cambule	Ongoing Scheduled for July 2024.
25/10/23	45	Report on the Audit Wales 'A Missed Opportunity' - Social Enterprises Report Recommendations		
		The Chair recognised the work already completed and the large amount of work outstanding, which could take time to complete. She requested that the Tackling Poverty Service Manager provides an update on the timelines at a future meeting.	Lee Cambule	Ongoing Scheduled for July 2024.
25/10/23	44	The Governance and Assurance Arrangements of Swansea Council's Strategic Partnerships		
		The Chair requested that future reports highlight the key challenges and achievements of the partnerships during the period being reported.	Richard Rowlands	Ongoing Report be provided in 2024/25 Municipal year.
25/10/23	43	Public Services Ombudsman of Wales Annual Letter 2022-23		
		The Chair requested that the Head of Digital & Customer Services circulates to the Committee details of 'various other' complaints dealt with by the Ombudsman.	Sarah Lackenby	In response to this question the 5 'other' relate to: 1. Ombudsman advised the complainant they would not be investigating as they had not exhausted the Council's complaints procedure. Details of this case were not provided to us by the Ombudsman. 2. The Complainant had raised they were taking legal action, therefore the Ombudsman advised they would not be investigating. Again, the Ombudsman did not provide further detail. 3. Complaint that the Council had failed to issue a statement / press release where the complainants had suffered harassment from the general public.

				 4. Complaint about a member of staff which had not been responded to in a timely manner by the manager. An apology was sent and the Ombudsman decided not to investigate. 5. Complaint in Cultural Services about the disposal of some open space.
25/10/23	38	Absence Management Audit Report Update		
		Ness Young, Director of Corporate Services highlighted that an update on the Council's Management Arrangements for Sickness Absence and Occupational Health was scheduled for Committee on 6 December 2023. The Chair noted that the report would therefore be moved to the meeting on 10 April 2024.	Rachael Davies	Ongoing Added to the agenda for 10 April 2023.
	38	The Head of Human Resources and Service Centre was requested to	Rachael	Ongoing
		provide details of time lost due to accidents in the next update report.	Davies	Added to the agenda for 10 April 2023.
25/10/23	37	Employment of Agency Staff - 2023 Update		
		The Head of Human Resources and Service Centre was requested to provide details of agency workers who had been employed on permanent contracts by the Authority and the cost of employing agency workers in previous years.	Rachael Davies	Ongoing Added to the agenda for 10 April 2023.
13/09/23	30	Education Directorate: Internal Control Environment 2023/2024		
		The Chair noted that the monitoring of the position at Clydach Primary School would be done by the Education Performance Scrutiny Panel and added that the Committee would gain assurance from their findings. She requested that it be added to the Action Tracker Report.	Education Performance Scrutiny Panel	Ongoing The Panel are meeting with the Acting Head and Chair of Governors on 22 February 2024.
13/09/23	28	Internal Audit Recommendation Follow-Up Report Quarter 1 2023/24		
13/09/23	28	The Committee also queried the reporting of all outstanding high / medium risks that had not been actioned in future in order for long term outstanding risks to be identified.	Nick Davies / Simon Cockings	Ongoing For consideration. This will require the interrogation of the audit system and ultimately, some additional man hours to see the required information can be extracted. Feasibility to be investigated.
19/07/23	19	Internal Audit Section - Fraud Function Annual Report for 2022/2023		
		The Corporate Fraud Manager stated that he would provide responses regarding / action the following: - • Provide reasons for closure in future reports. • Provide examples of case studies in future training sessions.	Jonathon Rogers	Ongoing

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08/03/23 105	Governance & Audit Committee Action Tracker Report		
08/03/23 105	Governance & Audit Committee Action Tracker Report The Chair highlighted the following: - • Minute 90 (08/02/2023) – Audit Wales Reports – Readiness of the Public Sector for Net Zero Carbon by 2030 – Councillor A S Lewis (Deputy Leader of the Council) had updated the Climate Change and Nature Performance Panel regarding progress and would provide the Committee with a briefing note in order to provide assurance.	Councillor Andrea Lewis / Geoff Bacon	Ongoing Audit Wales have rightly identified the need for all public bodies to develop costed plans to meet political aspirations and legal obligations. It remains relatively early days and at this stage it is not realistic to have a fully costed plan that's aligned to the MTFP and beyond. The costed plan doesn't and couldn't align with a 4-year MTFP as the programme will develop and continues up until 2030. As yet there has been no statement from WG concerning additional funding. The council recognises it obligations and the expectations placed upon it and the wider public sector and will continue to develop its own methodology and share and learn best practice with others to try and ensure comparability and consistency where possible. Conversations are ongoing with Welsh Government Energy Services as to how an action plan can be refined and properly delivered which strikes a pragmatic balance between the realistic and affordable at a truly local, council wide level and what will require regional, national and international joint working and very substantial additional funding support. A future draft/interim report will follow when completed. A report on Swansea Council NZ30 emissions (22-23) due at Cabinet imminently and Welsh Government are continuing to develop standardised

Agenda Item 13



Report of the Head of Democratic Services

Governance & Audit Committee – 28 February 2024

Governance & Audit Committee Work Plan

Purpose: This report details the Governance & Audit

Committee Work Plans to May 2024.

Report Author: Jeremy Parkhouse

Finance Officer: N/A

Legal Officer: N/A

Access to Services

Officer:

N/A

For Information

1. Introduction

- 1.1 The Governance & Audit Committee Work Plan to May 2024 in Terms of Reference Order is attached at Appendix 1.
- 1.2 The Additional Work programme Governance and Audit Committee as a result of the Local Government and Elections Act is attached at Appendix 2.
- 1.3 The Scrutiny Programme Committee Work Plan 2023/24 report is attached at Appendix 3.
- 1.4 The Scrutiny & Monitoring of External Audit / Inspection / Regulatory (AIR) Reports (2023/24) is attached at Appendix 4.
- 1.5 The updated Governance & Audit Committee Terms of Reference is attached at Appendix 5.
- 1.6 The dates included for the meetings in 2023/24 were approved at the Council's Annual Meeting on 18 May 2023.

2. Integrated Assessment Implications

- 2.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
 - Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - Foster good relations between people who share a protected characteristic and those who do not.
 - Deliver better outcomes for those people who experience socioeconomic disadvantage
 - Consider opportunities for people to use the Welsh language
 - Treat the Welsh language no less favourably than English.
 - Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.
- 2.1.1 The Well-being of Future Generations (Wales) Act 2015 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.
- 2.1.2 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.
- 2.2 There are no impact assessment implications associated with this report.

3. Financial Implications

3.1 There are no financial implications associated with this report.

4. Legal Implications

4.1 There are no legal implications associated with this report.

Background Papers: None.

Appendices:

- Appendix 1 Governance & Audit Committee Work Plan to May 2024 in Terms of Reference Order.
- Appendix 2 Additional Work Programme Governance and Audit Committee as a result of the Local Government and Elections Act.
- Appendix 3 Scrutiny Programme Committee Work Plan 2023/24
- Appendix 4 Scrutiny & Monitoring of External Audit / Inspection / Regulatory (AIR) Reports (2023/24).
- Appendix 5 Governance & Audit Committee Terms of Reference.

Terms of Reference	14 June 2023	19 July 2023	13 September 2023	25 October 2023	6 December 2023	17 January 2024	28 February 2024	14 March 2024	10 April 2024	June 2024 (24/25)
Training									Performance Management Framework (May 24)	Risk Management
Governance & Assurance	Election of Chair & Vice Chair Appointment of Committee Member on Annual Governance Group	Complaints Update Report 2022/23		Scrutiny Annual Report 2022-23. The Governance and Assurance Arrangements of Swansea Council's Strategic Partnerships – 6 Month Update Public Services Ombudsman for Wales Annual letter to the Council for the period 2022-23			Annual Complaints Report		Draft Committee Work Programme 2024/25	Annual Governance Statement 2023/24 Draft Governance & Audit Committee Annual Report 2023/24 Election of Chair & Vice Chair Appointment of Committee Member on Annual Governance Group
Internal Audit	IA Quarter 4 2022/23 Monitoring Report IA Quarter 4 2022/23 Recommendation Tracker Report Fleet Maintenance Update Accounts Receivable Update DBS Update	Annual Report of School Audits 2022-23	IA Quarter 1 2023/24 Monitoring Report Moderate Report - Catering and Cleaning Team 23/24 IA Quarter 1 2023/24 Recommendation Tracking Report	Employment of Agency Staff Update Management of Absence Update Moderate Report – Clydach Primary School External Assessment Report 2023/24.	IA Quarter 2 2023/24 Monitoring Report	Accounts Receivable Update Fundamental Audits 2022/23 Rec Tracker Report	IA Quarter 3 2023/24 Monitoring Report IA Annual Plan Methodology Report 2024/25		IA Charter 2024/25 IA Strategy & Draft Annual Plan 2024/25 Update on the Council's Management Arrangements for Sickness Absence and Occupational Health.	Internal Audit Annual Report 2023/24
Risk Management & Performance			Q1 Risk Monitoring Report The Annual Review of Performance 2022- 23 (including Self- Assessment Report)		Q2 Risk Monitoring Report		Q3 Risk Monitoring Report Risk Management Review (Verbal)			Q4 Risk Monitoring Report

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		(Governance & A	udit Commi	ttee Workplan	2023/24		Appendix 1		
Counter Fraud		Corporate Fraud Annual Report 2022/23 and Corporate Fraud Annual Plan 2023/24			Corporate Fraud – Six Month Update					
Operational matters / key risks			Update on Internal Control Environment – Director of Education	Update on Internal Control Environment - Director of Social Services	Update on Internal Control Environment - Director of Finance		Update on Internal Control Environment – Director of Place		Update on Internal Control Environment – Director of Corporate Services	
External Audit	Audit Wales Report - City & County of Swansea Annual Audit Summary	Audit Wales Work Programme and Timetable – City and County of Swansea Council.		Audit Wales Work Programme and Timetable — City and County of Swansea Council. Audit Wales — 2023 Audit Plan 'A Missed Opportunity' - Social Enterprises. 'Together we can' - Community Resilience and Self-Reliance	Audit Wales Work Programme and Timetable – City and County of Swansea Council. Setting of well- being objectives – City and County of Swansea Council Audit Wales Letter – Review of the Council's Transformation Programme External Audit Recommendations.	Audit Wales - Audit of the Council's Digital Strategy 2023-28	Audit Wales Work Programme and Timetable – City and County of Swansea Council. External Audit Tracker Report	Audit Wales - Audit of Accounts Report - City & County of Swansea.	Audit Wales - Assurance and Risk Assessment - Financial Position Update Audit Wales Report - City & County of Swansea Annual Audit Summary	Audit Wales - 2024 Audit Plan External Audit Tracker Report
Financial Reporting					Draft Statement of Accounts 2022/23			Draft Statement of Accounts 2022/23		

Additional Work programme Governance and Audit Committee As a result of the Local Government And Elections Act.

Across all areas of the work programme, consideration and acknowledgement will be given to the views, feedback and assurance from the scrutiny and performance committees that robust overview and scrutiny has taken place of decisions, policies and proposals and the assurance then given to Audit committee when they are reviewing the area of work in relation to Assurance, risk environment, Regulatory compliance and overall governance.

Area of work	Owner	Frequency The frequencies are a guide and additional reviews may take place as and when the committee feel necessary.	Month to present to committee
To review the Council's corporate governance arrangements against the good governance framework	Ness Young / Richard Rowlands	Every 2 years	See Annual Governance Statement
To review the Council's draft annual Self-Assessment Report,	Richard Rowlands	Annual	September
To review the Council's draft response to the Panel Performance Assessment Report	Richard Rowlands	Once every 4 years	TBC
To review the Council's draft response to any Auditor General's recommendations arising from a special inspection in respect of the Council's performance requirements	Ness Young	As and When required	TBC
To review the programme of work from regulators	Richard Rowlands	Annually	Quarterly

To review and assess the authority's	Sarah Lackenby	Annual	January
ability to handle complaints effectively			
To review the Annual Governance	Richard Rowlands	Annual	May
Statement prior to approval			
To consider the Council's	Richard Rowlands / Ness	Annual	Possibly covered to a degree
arrangements to secure value for	Young		in the self-assessment report
money and review assurances and			but too early to say.
assessments on the effectiveness of			
these arrangements.			
To consider the Council's framework	Richard Rowlands / Ness	Annual	See Internal Audit Assurance
of assurance	Young		Мар
To monitor the effective development	Richard Rowlands	Each meeting	Quarterly Overview of Risk
and operation of risk management			Reports
To consider reports on the	Simon Cockings	As and when required	Quarterly Monitoring Reports
effectiveness of internal controls and			throughout the year.
monitor the implementation of agreed			
actions			
To review the assessment of fraud	Simon Cockings	Every 6 months	Fraud Function Annual Plan –
risks and potential harm to the Council			March
from fraud and corruption			
			Fraud Function Annual
			Report – July
			Frank Frantis a Half Wasa
			Fraud Function Half-Year
To reconit on the annual or formed at the training	Cias an Capting as	Franco Mantha	Update Report - December
To monitor the counter fraud strategy,	Simon Cockings	Every 6 Months	Fraud Function Annual Plan –
actions and resources			March
			Fraud Function Annual
			Report – July

			Fraud Function Half-Year Update Report - December
To Receive proposals in relation to the appointment of external providers of internal audit services and to make recommendations	Simon Cockings	as and when	n/a
To review the governance and assurance arrangements for significant partnerships or collaborations	Director of Corporate Services / Richard Rowlands / Relevant Director	Annual / as and when new Partnerships or collaborations are established	June/July
To approve the internal audit charter and resources	Simon Cockings	Annual	Internal Audit Charter Report – April
To consider the Chief Internal Auditor's annual report and opinion, and a summary of internal audit activity (actual and proposed) and the level of assurance it can give over the Council's corporate governance arrangements	Simon Cockings	Annual	Internal Audit Annual Report – May
To consider reports from the Chief Internal Auditor on Internal Audit's performance during the year including the performance of external providers of internal audit services	Simon Cockings	Every 6 months	Quarterly Monitoring Reports throughout the year.
To consider a report on the effectiveness of internal audit to support the Annual Governance Statement, where required to do so by the Accounts and Audit Regulations	Simon Cockings	Annual	Internal Audit Annual Report – June

To consider any impairments to independence or objectivity arising from additional roles or responsibilities outside of internal auditing of the Chief Internal Auditor. To approve and periodically review safeguards to limit such impairments	Simon Cockings	Annual	Internal Audit Charter Report – April
To receive reports outlining the action taken where the Chief Internal Auditor has concluded that management has accepted a level of risk that may be unacceptable to the authority or there are concerns about progress with the implementation of agreed actions	Simon Cockings	As and when	Quarterly Monitoring Reports throughout the year.
To consider reports dealing with the management and performance of the providers of internal audit services	Simon Cockings	As and when required	Quarterly Monitoring Reports throughout the year.
To consider a report from internal audit on agreed recommendations not implemented within a reasonable timescale.	Simon Cockings	Quarterly	Quarterly Monitoring Reports throughout the year.
To contribute to the Quality Assurance and Improvement Programme and in particular the external quality assessment of internal audit that takes place at least once every five year	Simon Cockings	Every 5 Years	Internal Audit Annual Report – May
To consider the external auditor's annual letter, relevant reports, and to those charged with governance.	Ben Smith	Annual	External Auditor's annual letter – July

Appendix 2

To review the annual statement of accounts.	Ben Smith	Annual	Report of S151 officer including Statement of
accounts.			Accounts – December
To consider the external auditor's report to those charged with governance on issues arising from the audit of the accounts	Ben Smith	Annual	External Audit Annual Report - July
To publish an annual report on the work of the committee.	Paula O'Connor	Annual	Draft Audit Committee Annual Report – June

Appendix 3

Scrutiny Programme Committee – Work Plan 2023/24

ACTIVITY	18 Jul 2023	19 Sep 2023	17 Oct 2023	14 Nov 2023	19 Dec 2023	16 Jan 2024
Scrutiny Work Programme	Agreement of Scrutiny Work Programme	Scrutiny Annual Report 2022/23				
Cabinet Member Portfolio Responsibility Q & A Sessions		Active Travel (CM for Environment & Infrastructure)			Support for Business (CM for Investment, Regeneration, Events & Tourism)	Leader / Economy, Finance & Strategy
Other Cabinet Member / Officer Reports Page 21			Scrutiny of Swansea Public Services Board (PSB Chair – Cllr Andrea Lewis)	- Annual Corporate Safeguarding Report (CM for Care Services / Director of Social Services) - Children & Young People's Rights Scheme (annual report) (CM for Community – Support)	Delivery of Corporate Priority – Tackling Poverty (annual item) (Leader / CM for Wellbeing)	
Scrutiny Performance Panel Progress Reports			Education	Service Improvement, Regeneration & Finance	Adult Services	Child & Family Services
Pre-decision Scrutiny / Call In	Pre-decision Scrutiny: FPR7 Redevelopment of 277-278 Oxford Street - Community Hub Project		Pre-decision Scrutiny: Oracle Fusion Project Implementation / Project Closure Report (Leader / CM for Service Transformation)			
Final Scrutiny Inquiry Reports / Follow Up on Scrutiny Recs.				- Follow Up on Bus Services Working Group (CM for Environment & Infrastructure) - Anti-Social Behaviour Inquiry Final Report		Follow Up on Road Safety Working Group (CM for Environ. & Infrastructure

ACTVITY	1 Feb 2024 (Special)	13 Feb 2024	19 Mar 2024	16 Apr 2024	14 May 2024
Scrutiny Work Programme					- Audit / Scrutiny Relationship – Discussion w/ Chair of Governance & Audit Committee - End of Year Review
Cabinet Member Portfolio Responsibility Q & A Sessions		Delivery against Workforce Development Strategy (CM for Corporate Services & Performance)			
Other Cabinet Member / Officer Reports			- Annual Complaints Report 2022-23 (CM for Service Transformation) - Welsh Language Standards (annual	Crime & Disorder Scrutiny - Safer Swansea Community Safety Partnership (Joint Chairs of Safer Swansea Partnership)	- Scrutiny of Swansea Public Services Board (PSB Chair – Cllr Andrea Lewis) - Welsh Language Standards (annual report
Page 212			report 2022/23) (CMs for Education & Learning / Culture, Human Rights & Equalities)		2023/24) (CMs for Education & Learning / Culture, Human Rights & Equalities)
Scrutiny Performance Panel Progress Reports		Climate Change & Nature	Education	Service Improvement, Regeneration & Finance	
Pre-decision Scrutiny / Call In	Call In - Customer Charter and Service Standards Framework	Call In - Customer Charter and Service Standards Framework			
Final Scrutiny Inquiry Reports / Follow Up on Scrutiny Recs.					Follow Up on Co- production Working Group (CM for Community - Support)

Scrutiny & Monitoring of External Audit / Inspection / Regulatory Reports (2023/24)

The Chair of the Governance & Audit Committee and Chair of the Scrutiny Programme Committee decide between them the route that specific reports should take, i.e., whether reported to and monitored by G & A Committee or SPC, as deemed appropriate.

External reports that are relevant for Scrutiny are allocated either to the Scrutiny Programme Committee or referred to relevant Scrutiny Performance Panels and scheduled for discussion, as appropriate.

When a report has been issued to the Council and is available for Scrutiny, the relevant Scrutiny Chair / Convener is made aware, and it can be highlighted to Committee / Panel members within the next available meeting agenda.

Reporting to Scrutiny will typically require relevant Cabinet Members / Officers to attend meetings to discuss implications and present action plans along with statements about progress. Scrutiny Officers will engage with relevant Cabinet Members / Officers to forward plan the scheduling of Committee / Panel discussion at the right time, e.g., with a response / action plan (showing any progress to date), making the best use of time given pressure on scrutiny work plans / workloads.

The Committee / Panel can then receive assurance from Council leads about their response to any external reports and provide challenge to ensure improvement, making observations, and arranging further monitoring as necessary.

Depending on content, every report may not require the same level of involvement and consideration (given degree of importance or interest) therefore it will be up to relevant scrutiny lead member(s) to determine best approach in dealing with relevant reports. In certain cases, the Committee / Panel may take an exceptional approach to reports, e.g., being provided with information outside of meetings and only scheduling for discussion at a meeting with relevant Cabinet Member / Officer where there are specific issues, concerns about action / progress. Flexible approaches will relieve pressure on workloads and ensure best use of time and resources.

The Governance & Audit Committee is provided with a log of reports being dealt with by Scrutiny so that it can maintain an oversight of monitoring and be assured that reports are being effectively followed up.

	Report Title	Type of Report	Lead Cabinet Portfolio	Scrutiny Committee / Performance Panel	Report(s) to Scrutiny	Monitoring by Scrutiny Complete (YES / NO?)
	A report on education services in City and County of Swansea (September 2022)	Estyn	Education & Learning	Education Panel	27 October 2022 15 December 2022 15 June 2023 14 December 2023	NO Further monitoring scheduled for Dec 2024
Page	<u>'Time for Change' – Poverty in</u> <u>Wales</u> (November 2022)	Audit Wales (National)	Economy, Finance & Strategy AND Well-being	Scrutiny Programme Committee	17 January 2023 19 December 2023	YES Tackling Poverty is an annual item at Committee
je 214	'A missed opportunity' – Social Enterprises (November 2022)	Audit Wales (National)	Care Services	Adult Services Panel	5 September 2023	NO Discussion on Action Plan / progress to be arranged – likely March 2024
	'Together We Can' – Community Resilience and Self-Reliance (January 2023)	Audit Wales (National)	Community (Support)	Adult Services Panel	7 August 2023	YES
	Rose Cross Residential Care Home Inspection (May 2023)	CIW	Care Services	Adult Services Panel	28 June 2023	YES
	Ty Waunarlwydd Home For The Elderly Inspection (June 2023)	CIW	Care Services	Adult Services Panel	28 June 2023	YES

Setting of Wellbeing Objectives	Audit	Corporate	Service Improvement,	<u>17 October 2023</u>	YES
(August 2023)	Wales	Services &	Regeneration and		
	(Local)	Performance	Finance		
Digital Strategy Review	Audit	Service	Service Improvement,	12 December 2023	YES
(November 2023)	Wales	Transformation	Regeneration and		
	(Local)		Finance		
Cracks in the Foundations' -	Audit	Corporate	Service Improvement,	12 March 2024	
Building Safety in Wales	Wales	Services &	Regeneration and		
(August 2023)	(National)	Performance	Finance		
Use of Performance	Audit	Corporate	Service Improvement,	9 April 2024	
Information:	Wales	Services &	Regeneration and	-	
Service User Perspective and	(Local)	Performance	Finance		
<u>Outcomes</u>					
(November 2023)					
Springing Forward – Workforce	Audit	Corporate	Service Improvement,	7 May 2024	
(November 2023) Springing Forward – Workforce (December 2023)	Wales	Services &	Regeneration and		
2	(Local)	Performance	Finance		

NOTE:

Estyn: All individual School Estyn Inspection outcome summaries and links to full reports are included in Education Scrutiny Performance Panel agendas for information / awareness. The Panel will follow up on any where there are concerns and some when good practice has been highlighted.

Governance & Audit Committee – Terms of Reference

Statement of Purpose

The Governance and Audit Committee is a key component of the City and County of Swansea's corporate governance. It provides an independent and high level focus on the audit, assurance and reporting arrangements that underpin good governance and financial standards.

The purpose of the Governance and Audit Committee is to provide independent assurance of the adequacy of the risk management framework, the internal control environment and the performance assessment of the Council. It provides an independent review of the governance, performance assessment, risk management and control frameworks and oversees the financial reporting and annual governance processes. It oversees internal audit and external audit, helping to ensure efficient and effective assurance arrangements are in place.

Membership

The Local Government (Wales) Measure 2011 provides that two thirds of the members of the Committee are to be members of the council and one third must be lay members. Only one member of the Cabinet or Assistant to the Cabinet may sit on the Committee, and that person must not be the Leader. The Chair must be a lay member and the vice chair must not be a member of the Cabinet or an Assistant to the Cabinet.

Governance, Performance, Risk and Control

- a) To review the Council's corporate governance arrangements against the good governance framework and consider annual governance reports and assurances.
- b) To review the Council's draft annual Self-Assessment Report, and make any appropriate recommendations for changes to the conclusions or actions the Council intends to make.
- c) To review the Council's draft response to the Panel Performance Assessment Report, and make any appropriate recommendations for changes.
- d) To review the Council's draft response to any Auditor General's recommendations arising from a special inspection in respect of the Council's performance requirements and to make any appropriate recommendations for changes.
- e) To review and assess the authority's ability to handle complaints effectively and to make any associated reports and

- recommendations in relation to the authority's ability to handle complaints effectively.
- f) To review the Annual Governance Statement prior to approval and consider whether it properly reflects the risk environment and supporting assurances.
- g) To consider the Council's arrangements to secure value for money and review assurances and assessments on the effectiveness of these arrangements.
- h) To consider the Council's framework of assurance and ensure that it adequately addresses the risks and priorities of the council.
- i) To monitor the effective development and operation of risk management in the Council.
- To monitor progress in addressing risk related issues reported to the Committee.
- k) To consider reports on the effectiveness of internal controls and monitor the implementation of agreed actions.
- To review the assessment of fraud risks and potential harm to the Council from fraud and corruption.
- m) To monitor the counter fraud strategy, actions and resources.
- n) To review any proposals in relation to the appointment of external providers of internal audit services and to make recommendations.
- o) To review the governance and assurance arrangements for significant partnerships or collaborations.

Internal Audit

- p) To approve the internal audit charter and resources.
- q) To approve the risk-based internal audit plan, containing internal audit's resource requirements, the approach to using other sources of assurances and any work required to place reliance upon those other sources.
- r) To approve significant interim changes to the risk based internal audit plan and resource requirements.

- s) To make appropriate enquiries of both management and the Chief Internal Auditor to determine if there are any inappropriate scope or resource limitations.
- t) To consider the Chief Internal Auditor's annual report and opinion, and a summary of internal audit activity (actual and proposed) and the level of assurance it can give over the Council's corporate governance arrangements.
- u) To consider the Chief Internal Auditor's annual report.
- v) To consider reports from the Chief Internal Auditor on Internal Audit's performance during the year including the performance of external providers of internal audit services.
- w) To consider a report on the effectiveness of internal audit to support the Annual Governance Statement, where required to do so by the Accounts and Audit Regulations.
- x) To consider any impairments to independence or objectivity arising from additional roles or responsibilities outside of internal auditing of the Chief Internal Auditor. To approve and periodically review safeguards to limit such impairments.
- y) To consider summaries of specific internal audit reports as requested.
- z) To receive reports outlining the action taken where the Chief Internal Auditor has concluded that management has accepted a level of risk that may be unacceptable to the authority or there are concerns about progress with the implementation of agreed actions.
- aa) To consider reports dealing with the management and performance of the providers of internal audit services.
- bb) To consider a report from internal audit on agreed recommendations not implemented within a reasonable timescale.
- cc) To consider the external auditor's annual letter, relevant reports, and the report to those charged with governance.
- dd) To contribute to the Quality Assurance and Improvement Programme and in particular the external quality assessment of internal audit that takes place at least once every five years.

ee) To provide free and unfettered access to the Governance and Audit Committee Chair for the Chief Internal Auditor, including the opportunity for a private meeting with the Committee.

External Audit

- ff) To consider the external auditor's annual letter, relevant reports, and to those charged with governance.
- gg) To consider specific reports as agreed with the external auditor.
- hh) To comment on the scope and depth of external audit work and to ensure it gives value for money.
- ii) To commission work from external audit.
- jj) To advise and recommend on the effectiveness of relationships between external audit and other inspector agencies or relevant bodies

Financial Reporting

- kk) To review the annual statement of accounts. Specifically, to consider whether appropriate accounting policies have been followed and whether there are concerns arising from the financial statements or from the audit that need to be brought to the attention of the Council.
- II) To consider the external auditor's report to those charged with governance on issues arising from the audit of the accounts.

Accountability Arrangements

- mm) To report to full Council on a regular basis on the Committee's performance in relation to the terms of reference and the effectiveness of the Committee in meeting its purpose.
- nn) To report to Council on an annual basis and to publish an annual report on the Committee's work, its performance in relation to the Terms of Reference, and its effectiveness in meeting its purpose.
- oo) To raise the profile of probity generally within the Council and to report on matters of concern to the individual Cabinet Member, relevant Scrutiny Committee, Cabinet or to Council as necessary and appropriate.
- pp) To work in synergy with the Scrutiny Committees of the Council and liaise with other Council Committees as and when appropriate to avoid duplication in work programmes.

- qq) To report to those charged with governance on the committee's findings, conclusions and recommendations concerning the Appendix 1 adequacy and effectiveness of their governance, risk management and internal control frameworks, financial reporting arrangements, and internal and external audit functions
- rr) To publish an annual report on the work of the committee.

Training and Development

ss) To attend relevant training sessions including specialist training tailored for Members of the Governance and Audit Committee.