## Appendix 4

								Level and Sour	ce of Assurance				Internal	Planned	
					<u> </u>	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	
			g	tus	date		Oth	er Internal Assura	ance	Other /	ndependent A	ssurance	needs	Work	Area
Busines	ss Risk	Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan A
Risk ID         94         Risk Title         Pupil Attainment         & Achievement         Risk Level         Corporate	If pupils do not receive a very good education then they will not achieve the right qualifications and skills to take advantage of the Swansea Bay City Deal and to contribute effectively to the economic prosperity of the city.	Medium	Medium	Amber	Helen Morgan-Rees / Kate Phillips	<ul> <li>&gt;Covid-19 – Safe Return to School Plan in place, 88% attendance first three weeks of Sept.</li> <li>Continuity of Learning Plan and Policy in place – Schools developing remote/ blended learning opportunities.</li> <li>&gt;Support for pupils to return safely in Sept. through Health, Welfare &amp; Community Education Stream of Covid-19 Recovery Plan.</li> <li>&gt;Childcare in schools offer for key workers and most vulnerable children during pandemic.</li> <li>&gt;Pupils eligible for FSM receive fortnightly BACS payment or food parcels during pandemic.</li> <li>&gt;Check-in, Catch-up and prepare sessions for safe return for learners.</li> <li>&gt;Further enhancement of the Continuity of Learning Programme.</li> <li>&gt;Challenge adviser monitoring visits.</li> <li>&gt;Budget proposals for 2021-22 continue to prioritise the delegated schools budget and areas of pupil specific</li> </ul>	Positive engagement and support from Cabinet and Council. Recovery plan has work streams looking at continuity of learning, wellbeing of school workforce. Two policy development work streams looking at skills and training as well as continuity of learning. Achieving Better Together Recovery Plan has oversight of education and skills work streams Cabinet oversight of key delivery partnership for improving practitioners and leaders in schools	>Dedicated Scrutiny Panel to scrutinise education work and performance. Scrutiny covers barriers to learning, access to support, school improvement activity, key delivery partners, vocational opportunities and Swansea Skills Partnership, key delivery partnership in <i>Partneriaeth</i> and curriculum reform readiness.	Additional Learning Needs Board receives delivery highlight report of transformation al plan. Improving Education & Skills PDC. >Education Skills Co- ordinator appointed. >PSOs/ Accountancy provide support and oversight of school finance. Attendance and exclusion analysis and reports.	>Various Edu. Audits in the Audit Plan. >ESTYN reports review during school audits for finance / mgt. control.	>ESTYN prog.of external school inspection has been paused in 2020-2021 and until after Easter 2022 >Local authority link inspectors have conducted thematic review on continuity of learning and support for vulnerable learners. Estyn undertake engageme nt visits with schools for curriculum readiness and ALN reform readiness. Link inspectors visit on a termly basis to evaluate	>Audit Wales & CIW. > HSE audit of schools as Covid safe environment s to allow education to continue. >Welsh government returns, for example. Accelerated learning programme.	>Range of Education audits in the plan to be completed as part of the rolling audit schedule.	>School and other Education / thematic audits due in 2022/23	Service Specific - Education - Improving Education and Skills

							Level and Source	e of Assurance				Internal	Planned	
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Business Risk		poor	Statu	pdr		Ull Oll	er <u>internar</u> Assura				ssurance		WORK .	<pre></pre>
	Current Impact	Current Likeliho	Overall RAG S	Risk Owner / L	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan

significant cash increase will support the continuing enhancement of mainstream provision	
for all pupils	

								Level and Sour	ce of Assurance				Internal	Planned	
					_	Level 1		Level 2			Level 3		Audit	Internal	
Business	Diale		ро	atus	odate		Oth	er <u>Internal</u> Assur	ance	Other <u>I</u>	ndependent /	Assurance	Needs	Audit Work	Area
Business	RISK	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
153 Risk Title Safeguarding Risk Level Corporate	If our safeguarding arrangements are not sufficiently robust, 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	>Covid-19 – Safeguarding Arrangements and resources remodelled to ensure this is a key priority function within social services and services can continue to be safely delivered despite Covid-19 restrictions. >Planned implementation of multi-agency safeguarding hub progressed despite Covid-19 restrictions. The required dedicated Safeguarding Team for Adults included in the modified restructure of Adult Services required as a result of Covid-19 >Support and Shield vulnerable people in the community during Covid-19 >Provide emotional and well-being support to children and young people during Covid- 19. >Provide support to people at greater risk from domestic violence during Covid- 19. >Provide frontline social care staff with PPE during Covid-19 >Prioritise workload to focus on most	>Director of Social Services to advise Cabinet and CMT on options to bolster resilience of the workforce in frontline child protection teams. >Positive engagement and support from Cabinet and Council.	>Two dedicated Scrutiny Panels in place to scrutinise Social Services Work and Performance. >People PDC in place.	>Establish and maintain a regional protocol to provide secure Covid-19 care home provision including increased capacity in in- house care homes. >Council Covid-19 Recovery Plan to recover services and deal with emerging risks >Corporate Safeguarding Board >Principal Officers for safeguarding within Social Services. >Corporate Safeguarding within Social Services. >Corporate Safeguarding Policy and Group >Mandatory Corporate Safeguarding Training in place for Staff and Members. >Corporate Policy following	> Internal Audit of Safeguar- ding >Internal audit of DBS	>Regional and multi- agency safeguar- ding partners- hips > CIW	> Audit Wales	>Currently included as part of standard rolling audit schedule, repeated based on audit risk score.	>Safeguar ding cross cutting audit is included in the 22/23 audit plan	Cross Cutting – Council Governance and Control – Safeguarding People from Harm

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		Current Impact	Current Likelih	Overall RAG S	Risk Owner / L	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit	-		Audit Plar

vulnerable and	review by	
prioritise services and	PDDC in 2019	
contact with those	>CMT	
during Covid-19	approved	
response.	action plan to	
>Children Services to	stabilise	
further enhance the	recruitment	
multi-agency Front	and retention	
Door Team with a	of frontline	
dedicated	Children	
safeguarding hub.	Services staff	
>Action plan being		
developed in response		
to recent audit on DBS		
compliance in schools.		
>Corporate		
Safeguarding Board		
reviewing additional		
safeguards to be		
implemented by HR		
Transactions Team.		
>Sufficient numbers of		
trained Adult and Child		
Services staff.		
>String performance		
monitoring and		
reporting		
arrangements.		
>String commitment to		
invest in Social Care		
>Safeguarding Leads		
identified across all		
Council services.		
>Separate		
safeguarding		
arrangements in place		
in schools and Central		
Education		
Safeguarding Officer		
in main directorate.		
>As part of a wider		
restructuring of Adult		
Services there is still a		
plan to re-establish a		

							Level and Source	ce of Assurance				Internal	Planned	
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Business Risk	#	poor	Status	þ		Othe	er <u>Internal</u> Assura	ance	Other <u>II</u>	ndependent /	Assurance		WOIK	n Ar
	Current Impact	Current Likelih	Overall RAG S	Risk Owner / L	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla

			dedicated Safeguarding Team and the Front Door.					

								Level and Sour	ce of Assurance				Internal	Planned	
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			ро	atus	odate		Oth	er <u>Internal</u> Assura	ance	Other <u>Ir</u>	ndependent /	Assurance	Neeus	Work	Area
Busine		Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan
Risk ID 159 Risk Title Financial Control – MTFP aspects of Sustainable Swansea Risk Level Corporate	If we fail to deliver Sustainable Swansea and maintain sufficient financial control, and in particular do not ensure we contain service overspending, then we will not be able to respond appropriately to continuing austerity, demographic pressures, increasing demand and changing public expectations.	Very High	Very High	Red	Ben Smith / Jeff Dong	>Covid-19 – Recovery Plan: Future Council – Finance new MTFP. >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. >PFM 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 >Spending restrictions published to all staff and reviewed. Many controls continue to be exercised by CMT in relation to filling vacant posts, restructures, regrades and committing contract sums. >Corporate level monitoring. >Agreed budget. >Clear governance and reporting in place. >Prevention Strategy. >Monitoring at monthly P&FM's. >FSTG reporting and monitoring. MTFP. >Tracker in place from June 2018 to capture	>Quarterly 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.	>Dedicated Scrutiny Service Improvement and Finance Performance Panel consider and scrutinise the budget on a quarterly basis.	>Quarterly 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.	>Audit Committee provide challenge, oversight and assurance >Periodic budget monitoring reports go to Audit Committee >Budget reports included in the 2019/20 workplan for Audit Committee		>WAO 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 strengthen- ed 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.		>Saving and other budget mgt to be included as part of the Achieving Better Together (trans) audit 22/23 >Fundame ntal audits included in the plan as due in 2022/13	Service Specific / Fundamental Audits - Section 151 Officer Assurance

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Business Risk	ಕ	poor	Statu	Upda		Othe	er <u>Internal</u> Assura	ance	Other <u>I</u>	<u>ndependent</u> A	ssurance		Work	ЧU
	Current Impac	Current Likelik	Overall RAG	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla

Risk ID 180 Risk Title New Legislative and Statutory Changes Risk Level Corporate	If the council cannot respond adequately to new legislative and regulatory requirements due to reduced resources, then it will be open to external challenge and may suffer reputational damage and fines.				Meredith / Debbie Smith	and warn of delivery risks. >S151 Officer remains able and prepared to not certify adequacy of budgets and issue S114 notice if proven necessary. >CMT has standing item on agenda for consultations being undertaken by WG/UK Govt which alerts CMT to new legislation/ guidance and ensures visibility and horizon scanning for future legislative changes. >Legislative requirements built into plans and decision making. >Policy Briefings and LLG updates are added to CMT agenda on regular basis for wider visibility and discussion. >Legal implications inserted into decision making reports with Legal and Access to Services sign-off. >Monitoring of new legislation by Legal department and close liaison with client dapattments in	>All reports for Cabinet/ Council have legal implications paragraph and report authors are supported by legal officers when considering legislative requirements in decision making process.	>Scrutiny councillors routinely monitor and challenge services, policies and decision- making across the Council, which will include compliance with relevant legislation, assessment of quality, and highlighting of issues / concerns.	<ul> <li>&gt;Lawyers in Local</li> <li>Government</li> <li>updates</li> <li>received by</li> <li>Chief Legal</li> <li>Officer.</li> <li>&gt; Legislation</li> <li>updates</li> <li>circulated</li> <li>periodically to</li> <li>CMT by Chief</li> <li>Legal Officer.</li> <li>&gt; Policy</li> <li>Briefing –</li> <li>widely</li> <li>circulated</li> <li>&gt; Appraisals</li> <li>identify legal</li> <li>training/gaps</li> <li>in legal</li> <li>provision.</li> <li>&gt; The Data</li> <li>Protection</li> <li>Officer</li> <li>provides an</li> <li>annual report</li> <li>on compliance</li> <li>with data</li> </ul>	>Consult with CMT / HoS each year as part of annual consult'n exercise to inform the Audit Plan and inform forward work plan for the following year. >Audits added to plan as they arise prioritised by risk.		>Audits to be added to the plan via as per annual consult with HoS/ Directors.	>New audits to be added as requested by HoS/ Directors as necessary via consultatio n and in year as needed	Service Specific – Across Corporate Priorities / Monitoring Officer Assurance
		Medium	Low	Amber	Tracey Mei	liaison with client departments ie introduction of ALN in education			with data protection legislation.					Service (

							Level and Source	e of Assurance				Internal	Planned	
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	ent Imp	ent Lik	all RA0	Owner	Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit F
	Curre	Curre	Over	Risk										

Risk ID	If we do not	1	T			> Covid-19 –	>Workforce	>There is a	> New and	> An		>To be	_
196	have a robust					Redeploy and train			revised	update		included	
190							Strategy being	legal					
Dist. Title	workforce					staff to assist with the	developed in	requirement to	HR&OD	report will		as part of	
Risk Title	strategy in					Covid-19 response.	consultation	present an	Policies are	be		the	
Workforce	place, then					>Support staff health	with Cabinet	annual	taken to JCC	prepared		Achieving	
Strategy	we will not					and well-being during	Member,	analysis of	for approval.	for		better	
	have staff					Covid-19	David	Gender pay		presentati		Together	
Risk Level	with sufficient					>Support staff to work	Hopkins. Final	gap issues.	>The	on to the		(trans)	_
Corporate	capacity and					remotely at home	Strategy will		Workforce	Gove &		audit to	tro
	the right					during Covid-19	be presented	A presentation	Strategy is	Audit		include	Control
	knowledge					>Workforce will be a	to Cabinet for	has previously	being	Committee		savings	2
	and skills to					key strand of the	endorsement/	been made to	developed in	in		delivery	and
	manage					future Council	approval.	the Workforce	consultation	February		and	Ð
	change,					workstream in the	There is a	Scrutiny	with the	2022.		workforce	2
	deliver					Covid-19 recovery	legal	Working	Recovery and			strategy	Council Governance
	transformed					plan	requirement	Group on the	Future			elements	/el
	services and					>Reporting through	for Council to	Impact of the	Generations			in the	Ó
	ensure					Leadership Team	agree the	Pandemic of	PDCand			audit plan	i i
	statutory					>Tracking and	annual Council	the Workforce.	Equality and			for	2 L
	compliance.					monitoring of the OD	Pay Policy	There is a	Future			2022/23	no
						plan and delivery.	, ,	further	Generations				0
						>OD Strategy and		meeting	Board.				ŝ
						Implementation Plan		scheduled for					Audits
					-	in place		February 2022					Αu
					Chard	>Apprenticeship/		which will					ð
					ů,	Traineeship strategy.		include					tti
						>Gender Pay Gap and		consideration					Cutting
					Adrian	Project Plan		of the					s)
					-p	>Service Planning		Workforce					Cross
					<	0							ū
					2	>Corporate Plan –		Strategy.					
					qu	Transformation &							
					ke ke	Future Council							
					ac	Objective							
		E	E	5		>Workforce Planning							
		dit	dit	ğ	rat								
		Medium	Medium	Amber	Sarah Lackenby								
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Business Risk	ਲ	poor	Status	Upda		Othe	er <u>Internal</u> Assura	ance	Other <u>II</u>	<u>ndependent</u> A	Assurance		Work	A L
	Current Impac	Current Likelih	Overall RAG	Risk Owner /	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plar

Risk ID	If demand for					>10% Uplift Of The	Monitored via	Dedicated	CIW	>Number	>Non-	
221	personal care					Fee To All Dom. Care	ECG on a	adult services	inspection	of Adult	residential	
	at home					Providers	weekly basis	scrutiny panel	of	Services	care audit	-
Risk Title	continues to					Implemented In Year	,	,,	regulated	audits are	is included	Assurance / Safeguarding
Availability of	exceed the					To Enable			services	on the	on the	ard
Domiciliary Care	Council's					External Providers To			and the LA	plan	audit plan	ng
,	capacity to					Pay A Competitive			statutory	completed	for	feć
Risk Level	directly					Salary To Staff To			functions	on rolling	2022/23.	Sa
Corporate	provide or					Assist With The				programm		0
	commission					Recruitment And				e basis		ů L
	sufficient					Retention Of				includes		rra
	domiciliary					Staff. The Need For A				residential		ssl
	care staff and					Further Uplift Will Be				and non-		
	services, then					reviewed By End Of				residential		51
	the local					2022.				care		Section 151
	authority will					>Respite Services				audits.		itio
	fail to meet its					Adapted So They Can						Sec.
	statutory					Flex To Address Long						0
	duties under					Term Care Needs If						
	the Social					Required.						enti
	Services and					Effectiveness Will Be						ပဳ
	Well Being					Reviewed At The End						e G
	Act,					Of December 2021 At						Ξ
	individuals					The Regional						s
	care and					Community Silver						p
	support needs					Emergency Planning						s al
	will not be					Meeting >A Pilot Of Dom Care						<ul> <li>Financial Services and Service Centre</li> </ul>
	sufficiently well met and					Services Being						ĽŽ.
	there will be					Provided By A						Se
						Residential Care						a
	significantly increased					Provider Has Been						nci D
	pressure on				Ρ	Initiated. Success Will						na
	acute hospital				ie	Be Reviewed At The						i E
	services.				5	End Of December						1 0
	Services.				ete	2021.						cifi
					ã	> Third Sector						bē
					ŝ	Providers Asked To						S
					David Howes / Peter Field	Reprioritise Services						Service Specific
			1		운	To Support Individuals	1			1		20
		_	_		q	With Alternative To	1			1		Ň
		High	High	Red	avi	Domiciliary Care To	1			1		
		Ī	Ĩ	2	Ö	Mitigate The Impact Of						

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Business Risk	t	poor	Statu	Upda		Othe	er <u>Internal</u> Assura	ince	Other <u>I</u>	<u>ndependent</u> A	ssurance		Work	in Are
	Current Impac	Current Likelih	Overall RAG	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla

Lack Of Access To		
Formal Care.		
>Hospital Discharge		
Services Repurposed		
To Maximise Capacity		
Across All Four		
Discharge Pathways		
With Focus On		
Increasing Access To		
Short Term Res.		
Placements As An		
Alternative To Dom.		
Care. The		
Effectiveness Of		
These Changes Are		
Monitored Bi Weekly		
At The Regional		
Health And Care		
Transformation Board.		
These Emergency		
Arrangements Will Be		
Reviewed At The End		
Of February 2022.		
>Daily Management		
Of Waiting Lists And		
Contact With Care		
Providers To Prioritise		
Access To Services.		
The Priority Of		
Individuals On The		
Waiting List Is		
Reviewed Weekly And		
Monitored At The		
Regional Emergency		
Community Silver		
Planning Meeting.		
>Increased Number Of		
Contracted Providers		
To 22 To Maximise All		
Local Capacity As		
Current Data		
Suggests Increase In		
Demand Is Resulting		
In Capacity Pressures.		
11 Oapaony 1 10000100.		

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Business Risk	*	poor	Status	Updat		Oth	er <u>Internal</u> Assura	ince	Other <u>Ir</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
					The Council's Framework For Commissioning Domiciliary Care Is Subject To An Annual Review. Next Review Will Be End Of March 2022									

								Level and Sour	ce of Assurance				Internal	Planned	
					<b>_</b>	Level 1		Level 2			Level 3		Audit	Internal	
			p	tus	date		Oth	er <u>Internal</u> Assur	ance	Other /	ndependent /	Assurance	Needs	Audit Work	Area
Business	Risk	Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan /
222 <b>Risk Title</b> Digital, data and cyber security <b>Risk Level</b> Corporate	If we do not have robust digital, data and cyber security measures and behaviours in place, embedded and working as best as they can be, then we will be vulnerable to cyber threats, disruption to service delivery, possible loss of information including confidential information and associated fines and reputational damage.	Very High	Medium	Ove	Sarah Lackenby / Jo Harley Rish	>Covid-19 – Ensure the Council's Covid-19 recovery plan accounts for increased risk form cyber-attacks and data fraud arising from new working patterns and reliance on technology >Introduce simulated cyber-attacks on staff to measure their actions, identify weaknesses and improve knowledge >Provide staff with ICT security and data management updates and guidance during Covid-19 and whilst working from home including cyber security guidance and Covid-19 cyber scams staffnet page >Cyber security during Covid-19 reviewed alongside advice from Warp and PSN compliance e.g. use of Zoom. >Enhanced Security Layer provided by Microsoft 365 >Cyber security strategy created and ready for engagement with staff >Digital services working with internal audit and emergency		>More use of secure cloud storage.	>Member of the Cyber Security Information Sharing Partnership which is a joint industry and government initiative to exchange cyber threat information >Part of Wales Warning Advice and Reporting Point to share cyber threats and defences with other public bodies > Cyber Essentials and Cyber Essentials Plus accreditation >New regional multi-agency cyber cell meetings being attended to share intelligence and actions >PSN Certification Achieved >Cyber	>Various IT / System audits in Audit Plan. >GDPR audit added 18/19.	>Public Services Network (PSN) complianc e certificate - tested annually. >Achieved IASME Cyber Essentials certificatio n, working towards Cyber Essentials Plus by March 2019	>WAO review undertake an IT audit each year as part of reviewing financial accounts	>Range of IT audits in the plan to be completed as part of the rolling audit schedule.	>IT audits included in the 2022/23 plan as per the rolling programm e and additional ICT reviews as a result of the annual consultatio n exercise and review of risk registers.	Service Specific – Digital & Customer Services and IT Audits – Transformation and Future Council

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						Level 1		Level 2			Level 3		Audit	Internal	
				S	ater								Needs	Audit	g
	Business Risk	5	poou	Statu	Upda		Othe	er <u>Internal</u> Assura	ance	Other <u>II</u>	<u>ndependent</u> A	Assurance		Work	in Area
		Current Impact	Current Likelih	Overall RAG	Risk Owner /	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plar

<ul> <li>&gt;Live testing of the DR</li> <li>Plan, options being</li> <li>reviewed potentially in</li> <li>line with wider</li> <li>corporate business</li> <li>continuity exercise</li> <li>&gt;LrF Cyber exercise</li> <li>planned and revised</li> <li>SIRO training</li> <li>&gt;Comms. Issued to</li> <li>staff and members</li> <li>detailing impact of</li> <li>cyber attack at other</li> <li>councils.</li> </ul>	>Member of Wales WARP & CISP sharing knowledge of threats. >Discussed at IG Board – standing agenda item	
cyber attack at other		

								Level and Sour	ce of Assurance				Internal	Planned	
					ЭГ	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	
Busin	ess Risk	ж Т	poor	Status	Jpdate		Oth	er <u>Internal</u> Assur	ance	Other <u>//</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 Area
Risk ID         235         Risk Title         Emergency         Planning,         Resilience and         Business         Continuity         Risk Level         Corporate	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.	Medium	Medium	Amber	Adam Hill / Craig Gimblett	<ul> <li>&gt;Covid-19 – Prepare for further Covid-19 or other infectious</li> <li>disease outbreaks</li> <li>&gt;Rest Centre Plan and arrangements</li> <li>&gt;Additional dedicated</li> <li>PPE reserve for responders and public</li> <li>during evacuation and additional rest centre</li> <li>location for mass</li> <li>evacuation to be</li> <li>established from bay</li> <li>&gt;Additional strategic</li> <li>training to increase</li> <li>organisational</li> <li>resistance agreed for 3rd Nov</li> <li>&gt;Specific Covid Rest</li> <li>Centre arrangements</li> <li>developed and</li> <li>implemented complete</li> <li>with evac PPE and</li> <li>hygiene supplies</li> <li>&gt;Restructure of EMS</li> <li>to include additional</li> <li>EMS Officer and</li> <li>Principle for 12</li> <li>months</li> <li>&gt;Review and update</li> <li>business continuity</li> <li>plans</li> <li>&gt;Cisis Media Plan</li> <li>&gt;Flood Management</li> <li>Plan</li> <li>&gt;Offsite Comah Plan</li> <li>&amp; Exercising</li> </ul>	>EMS Manager attends ECG for political and officer oversight and awareness. >Daily sti rep of all key activity distributed to CMT, Leader and Deputies. >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 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.	>Emerg. Mgt audit in Audit Plan for CBS. >H&S, Emerg. Planning / Civil Cont. and Business Continuity in Audit Plan for HR&OD			>Standard audits in the plan cover this area on rolling basis.	>Audits in the plan to be completed when due as part of the standard rolling schedule. >Emergen cy Planning and Business Continuity is included in the 2022/23 audit plan.	Service Specific Audits – Communications / ICT / Council wide assurance

							Level and Source	e of Assurance				Internal	Planned	
					Level 1		Level 2			Level 3		Audit	Internal	
			SI	ter								Needs	Audit	g
Business Risk		poo	tatı	Jpda		Othe	er <u>Internal</u> Assura	ince	Other <u>II</u>	<u>ndependent</u> A	ssurance		Work	i Are
	act	elih	S S	٦/	Management									lar
	urrent Imp	urrent Lik	verall RAC	tisk Owner	Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit F
	O	C	0	R										

	Emergency Control Centre >Greater responsibility allocated to Deputy CEO from Oct 2018. Responsible officer changed from Phil Roberts to Adam Hill. >Project Griffin training >Call out & activation protocols/ action cards >RAG alert system across H&S, Emergency	Plans and Action cards reviewed annually and EMS audited in 2019. >Collaborative working with SWP on call out protocols in-place and reviewed. >ACT App and free training promoted across Authority.		
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								Level and Sour	ce of Assurance				Internal	Planned	
					ЭĽ	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	_
Busines	ss Risk	#	poor	Status	Update		Oth	er <u>Internal</u> Assur	ance	Other <u>Ir</u>	<u>ndependent</u> A	ssurance	1100005	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
Risk ID 236 Risk Title Health & Safety Risk Level Corporate	If we fail to have robust Health & Safety policies and arrangements in place, then there could be a health and safety breach identified as a corporate failing with associated legal, financial and reputational consequence s.	High	Low	Amber	Adam Hill / Craig Gimblett	>Covid-19 – Additional guidance on H&S assessments and general Covid information as a priority >Retrospective entered Covid assessments, standard operating procedures for schools and premises, BAME and health assessment process created and PPE guidance. >Early review of lone working, DSE and mental health policies >Well-being policies. New mental health policy under consultation includes social isolation and impact of home working >Staff well-being part of future council stream of Covid recovery plan >Stress management and counselling and H&S advice to staff during Covid-19 >Review business continuity plan to prepare for EU exit >H&S toolkits >Noise, dust, light, humidity, vibration sampling >Riddor procedures for reportable incidents to HSE.	>H&S Manager part of ECG, providing regular updates to group as required and presenting to CMT. >H&S Manager meets monthly with portfolio holder to provide briefing and political oversight and awareness.	>H&S Manager has provided updates to numerous scrutiny panels, none currently in diary. >Service has been fully audited internally in 2019.	>Member of 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. >Accidents statistics provided to all safety committees and groups. >Policy development and review plan in-place under full consultation. >Officer representation at trade union meetings. >Additional resources placed in Occupational Health & Stress Management and Counselling, with extension of	>H&S Audit Plan			>Standard audits in the plan already cover this area.	>Audits in the plan to be completed when due as part of the standard rolling schedule due in 2022/23	Service Specific Audits – Communications / ICT / Council wide assurance

				er -	Level 1		Level and Sour	ce of Assurance		Level 3		Internal Audit Needs	Planned Internal Audit	
Business Risk	×	poor	Status	Updater		Oth	er <u>Internal</u> Assur	ance	Other <u>I</u>	ndependent A	Assurance	Neeus	Work	n Area
	Current Impact	Current Likeliho	Overall RAG	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plar
											-	_		
					>RAG alert system across H&S.			Psychological Support						

>RAG alert system	Psychological
across H&S,	Support
emergency mgt, well-	project until
being	31/03/22
>H&S Policies	
>H&S mandatory	
training / e-learning	
>RAG fire risk profiling	
for all premises	
>Greater responsibility	
given to Deputy Chief	
Exec from Oct 2018.	

								Level and Sour	ce of Assurance				Internal	Planned	
					5	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	
Business	Risk	*	poor	Status	Update		Oth	er <u>Internal</u> Assur	ance	Other <u>I</u>	<u>ndependent</u> A	ssurance	Neeus	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
259 Risk Title Regional Working Risk Level Corporate	If the Council, along with its partners and Welsh Government, does not develop and improve regional working, then it will divert the Council and its resources from key priorities and will not benefit Swansea and its residents.	Medium	Medium	Amber	Phil Roberts / Liz Edmonds	>Covid-19 – Maintain stronger partnership working relationships post Covid-19 and as part of the Council's Covid-19 recovery plan and continue to make use of MS Teams to ensure regional meetings are more frequent and effective >Collaboration on the delivery of school improvement services >Playing a leading and proactive role in major regional collaborations >Representations made to WG on reforming the grant regime >Governance structures in place for all major collaborations >Partnerships have been mapped >Director leads for each partnership >Senior Management restructure structure structure structure structure structure structure	<ul> <li>&gt;Council is playing a leading and proactive role in major regional collaborations.</li> <li>&gt;Leader of the Council is the City Region Joint</li> <li>Committee Chair.</li> <li>&gt;Council meets up regionally with 5 other local authorities to discuss collaboration projects.</li> <li>&gt;Annual Report on Regional Working presented to Council.</li> </ul>	>Scrutiny inquiry findings documented as required actions on the Risks Register. >Annual Report on Regional Working is produced by Scrutiny providing overview of three key collaborations inc. ERW, West Glam. Regional Partnership (prev. Western Bay), and Swansea Bay City Deal.	<ul> <li>Chief</li> <li>Executive</li> <li>takes the lead</li> <li>role for ERW</li> <li>and Western</li> <li>Bay as well as</li> <li>being an</li> <li>executive</li> <li>member of the</li> <li>City Deal Joint</li> <li>Committee.</li> <li>ERW has fully</li> <li>formed</li> <li>Governance</li> <li>Arrangements.</li> <li>&gt;City Deal has</li> <li>Joint</li> <li>Committee</li> <li>Agreement</li> <li>and joint</li> <li>scrutiny</li> <li>arrangements</li> <li>agreed by</li> <li>Council.</li> <li>&gt;Western Bay</li> <li>has a Joint</li> <li>Committee</li> <li>and scrutiny</li> <li>arrangements</li> <li>in place.</li> </ul>		<ul> <li>&gt;City Deal has a Joint Working Agreem't in place, which was approved at Council on 26th July 2018.</li> <li>&gt;Review of progress by IPC on the Western Bay Health &amp; Social Care collab'n.</li> </ul>		>New audit area added as a result of the review of the Risk register from 2022/23	>Internal audit review included in the 2022/23 audit plan.	Cross Cutting Audits – Council Governance and Assurance

								Level and Sour	ce of Assurance				Internal	Planned	
						Level 1		Level 2			Level 3		Audit	Internal	
Busines	ss Risk		poo	tatus	pdate		Oth	er <u>Internal</u> Assur	ance	Other <u>/</u>	ndependent l	Assurance	Needs	Audit Work	ı 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
Risk ID 264 Risk Title COVID-19 Risk Level Corporate	If we fail to carry on providing a co-ordinated and joined-up response to Covid-19 and make the best use of our workforce and available resources, then: we will be unable to protect vulnerable people and meet demand for key services, such as social care; there will be disruption to services and supplies; including food supplies; we will not be supporting critical services, key workers and local businesses sufficiently to limit the impact of the virus.	Very High	Low	Red	Adam Hill / Richard Rowlands	<ul> <li>&gt; Prepare And Implement A Covid-19 Recovery Plan To Restart, Adapt, Recover And Transform Council Services.</li> <li>&gt; Work With Partners To Provide Social Care And Other Critical Front-Line Staff With Ppe.</li> <li>&gt; Work With Partners To Ensure Resilient Supply Chains, Especially Food And Ppe Supply.</li> <li>&gt; Work With Partners To Redeploy Staff And Seek Recruits To Critical Areas, Such As Social Care And Food Distribution To Food Banks.</li> <li>&gt; Prepare For The Possibility Of Further Covid-19 Outbreaks.</li> <li>&gt; Provide Council-Led To Support To Local Businesses, E.G. Advice, Grants And Rate Relief.</li> <li>&gt; Work With Partners To Inform And Reassure The Public And Reinforce Health And Social Distancing Messages Through Social And Other Media.</li> <li>&gt; Work With Partners To Support Education Teams &amp; Schools And Provide Education /</li> </ul>	<ul> <li>&gt;Covid-19</li> <li>Recovery and transformation</li> <li>Plan</li> <li>'Achieving</li> <li>Better</li> <li>Together'</li> <li>approved At</li> <li>Cabinet.</li> <li>&gt;Various</li> <li>Cabinet</li> <li>reports</li> <li>through</li> <li>2020/21 to</li> <li>support work</li> <li>to respond to</li> <li>the pandemic,</li> <li>e.g. Financial</li> <li>Procedure</li> <li>Rule 19.1c</li> <li>and FPR7.</li> <li>Authorisation</li> <li>for Alteration</li> <li>and</li> <li>Conversion of</li> <li>Bay Studios,</li> <li>Fabian Way,</li> <li>Swansea into</li> <li>an 1000 Bed</li> <li>Surge Hospital</li> <li>on Behalf of</li> <li>the Swansea</li> <li>Bay University</li> <li>Health Board</li> <li>See Cabinet</li> <li>27/04/20.</li> </ul>	>Scrutiny has kept a watching brief. SPC to review local position and progress with Recovery Plan.	>Covid-19 Recovery and transformation Plan 'Achieving Better Together' reviewed by Audit Committee quarterly overview of risk management, including Corporate Risks. >Audit Committee oversight of relevant reports and impact of Covid-19, e.g. See Audit Committee review of Revenue and Capital Budget Monitoring - 2nd Quarter on 09/02/21, including Welsh Government funding and Covid-19 grant payments made to local businesses	>Matters arising addressed in some Internal Audit work, e.g. See report to Audit Committee 09/02/21 Internal Audit Annual Plan 2020/21 - Monitoring Report for the Period 1 October 2020 to 31 December 2020 to 31 December 2020 to 31 December 2020 to 31 December 2020 additional work done in the quarter, including Lloyds pre-paid card review in relation to the Covid- 19 Foodbank setup and operation.	>Report providing an assessme nt of the key issues following the Covid- 19 response with a particular focus on how we have collectively managed Care Home settings reviewed at the Regional Partnershi p Board.	>Audit Wales has shaped their work to provide assurance and challenge in a way which helps to support the Council through this period. 2020-21 work includes: • recovery planning in response to the COVID- 19 pandemic; • COVID- learning project – helping to identify and share learning from the way in which public bodies have responded to the pandemic;	>Achievin g Better Together (Recovery) complete d in 2021/22 plan.	>ABT Transfora mtion audit is included on the 22/23 audit plan.	Cross Cutting Audits – Council Governance and Assurance

							Level and Source	e of Assurance				Internal	Planned	
					Level 1		Level 2			Level 3		Audit	Internal	
			s	ter								Needs	Audit	ea
Business Risk	t	poor	Statu	Upda		Othe	er <u>Internal</u> Assura	ince	Other <u>I</u>	<u>ndependent</u> A	ssurance		Work	in Are
	Current Impac	Current Likelih	Overall RAG	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla

Childcare For Key	
Workers & Food For	
Children Who Get	
Fsms.	
> Work With Partners	
To Prioritise Demand	
For Key Services,	
Especially Social Care	
And Homelessness.	
> Provide Food,	
Pharmacy And Well-	
Being Support To	
Shielded Individuals	
Through Swansea	
Council Helpline,	
Local Area Co-	
Ordinators (Lac), Swansea Council For	
Voluntary Service	
(Scvs) And The Food	
Bank Network.	
> Work With Partners	
To Help Increase	
Emergency Bed	
Provision Through The	
Conversion Of	
Buildings Into Field	
Hospitals.	
> Log And Share	
Good Practice And	
Lessons Learnt	
Responding To The	
Covid-19 Virus And	
Share Relevant Data	
And Statistics On The	
Impact Of The Virus,	
Such As Those	
Provided By Ons	
	I

								Level and Sour	ce of Assurance				Internal	Planned	
					Ŀ	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	
Busine	ss Risk	1	poo	status	Jpdate		Oth	er <u>Internal</u> Assur	ance	Other <u>/</u>	<u>ndependent</u> A	ssurance	Necus	Work	Area ר
		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 269	If the local economy and					> Refresh Regional Economic	> Cabinet considered	> Regular scrutiny	> Regional directors and		>Collabor ate With		>Number of Regen	> Regen and	
Risk Title Local Economy and Infrastructure Risk Level Corporate	infrastructure is not transformed and supported to be resilient and to take advantage of national and global trends and events and attract 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 citizen.	High	High	Red	Martin Nicholls / Phillip Holmes	Regeneration Strategy > Develop A Covid Economic Recovery Plan > Attract Sufficient Investment And Development And Regenerate The City Centre. > Work With Partners To Deliver The Swansea Bay City Deal And Attract Investment Across The Region To Deliver Highly Skilled And Well-Paid Jobs. > Organise And Facilitate Virtual Meet- The-Buyer Events To Help Local Businesses To Identify Opportunities To Bid For Council Work And Contracts. > Take Appropriate Actions Where The Council Has A Direct Relationship With Businesses Such As Swansea Indoor Market Traders With Rent Relief To Support Businesses During Covid-19. > Provide Business Advice And Support, Including Administering Uk And Welsh Government Business Grants And Funds, To Assist	economic recovery plan >Cabinet considered FPR7 where appropriate	undertaken on post Covid economic recovery and specifically on phase 1 arena/digital district project	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. >City Deal Regional Scrutiny Panel overview of progress on Swansea Waterfront City project >Reporting of programme outputs to funding bodies, WG, WEFO HLF etc.		Welsh Governme nt On Regional Economic Framewor k		and Planning audits included on the audit plan to be completed on a rolling basis.	Planning audits included on the 22/23 audit plan > Added review of City Deal and Swansea Central Phase 1 for 2022/23	Service Specific Audits – Planning & City Regeneration

							Level and Source	e of Assurance				Internal	Planned	
					Level 1		Level 2			Level 3		Audit	Internal	
			S	ter								Needs	Audit	rea
Business Risk	ਰ	poor	Status	Upda		Othe	er <u>Internal</u> Assura	ance	Other <u>II</u>	<u>ndependent</u> A	Assurance		Work	A
	Current Impac	Current Likelih	Overall RAG	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plar

	1	
Them During Covid-		
19.		
> Assist Tourism		
Businesses To		
Reopen Safely		
Following Closure As		
A Result Of Covid-19.		
> Work With The		
Welsh Government		
On A Foundational		
Economy Approach		
To Help Establish A		
Firm Base Of Medium		
Sized Firms In		
Swansea, Strengthen		
Local Supply Chains		
And Add Social Value		
In Procurement.		
> Implement The		
Business And		
Economic Stream Of		
The Councils Covid-19		
Recovery Plan To		
Understand And		
Recover From The		
Impact Of Covid-19,		
Build Resilience And		
Develop Opportunities		
		I

						Level and Sour	ce of Assurance				Internal	Planned	
			S.	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	
Business Risk	poc	tatus	pdate		Oth	er <u>Internal</u> Assura	ance	Other <u>I</u>	<u>ndependent</u> A	Assurance	Needs	Work	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
Risk IDIf rates of274Covidinfection &rransmissionCovid 40 Biological				<ul> <li>&gt; Additional Agency</li> <li>Worker Support Is</li> <li>Being Procured To</li> <li>Address Backlogs In</li> </ul>	Monitored via ECG on a weekly basis	Dedicated social services scrutiny performance	regional partnership board oversight		CIW inspection of both regulated		n/a	n/a	
Risk Title Covid-19 Risktransmission continue to rise whilst we try to deal with backlogs of planned, previously delayed, health and care and we continue to lose staff from the health and care sector then demand for all forms of personal care is likely to exceed our capacity and resilience to be able to directly provide or commission that care			David Howes / Angela Morgan	Address Backlogs In Adult Assessment And Reviews. This Extra Support Will Be In Place Until April 2021 And Then Review. > Emergency Care Home Support Arrangements Have Been Established Through Which Local Authority And Primary And Community Health Staff Provide Direct Support To Care Homes Where Staffing Difficulties In Those Homes Cause A Risk Of Service Failure. Use Of These Emergency Support Staff Are Monitored At The Weekly Regional Community Silver Emergency Planning Meeting. These Arrangements Will Remain In Place Until February 2022 And Then Subject To Review > Additional Workforce Support Arrangements Have Been Established Through Utilising Dedicated Corporate Hr And Occupational		performance	oversight		regulated care services and LA statutory functions				n/a

							Level and Source	ce of Assurance				Internal	Planned	
					Level 1		Level 2			Level 3		Audit	Internal	
			S	iter								Needs	Audit	g
Business Risk	t	poor	Statu	Upda		Othe	er <u>Internal</u> Assura	ance	Other <u>II</u>	<u>ndependent</u> A	Assurance		Work	n Are
	Current Impac	Current Likelih	Overall RAG	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla

Increased Levels Of
Sickness Absence, To
Provide Additional
Welfare Support For
Staff And To Enhance
Recruitment And
Retention Of Staff.
The Effectiveness Of
These Arrangements
Are Monitored On A
Monthly Basis At
P&Fm
> Staff Contracted
Hours Have Been
Extended On A
Voluntary Basis To
Add Additional
Workforce Capacity
In Critical Service
Areas Such As In
House Domiciliary And
Residential Care.
These Arrangements
Will Be
Reviewed At The End
Of March 2022
> All Cases Open To
The Directorate Have
Been Rag Rated To
Ensure Individuals
With The Most Critical
Need Are Prioritised
For Assessment, Care
And Support. For
Individuals With Lower
Levels Of Need
Alternative
Arrangements For
Support Are
Negotiated With
Families, Carers Or
Other Community Or
Third

								Level and Source	ce of Assurance				Internal	Planned	
						Level 1		Level 2			Level 3		Audit	Internal	
				s	ter								Needs	Audit	g
Busines	s Risk	ਰ	poor	Statu	Upda		Othe	er <u>Internal</u> Assura	ance	Other <u>I</u>	<u>ndependent</u> A	ssurance		Work	n Are
		Current Impac	Current Likelih	Overall RAG 8	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla

Sector Support. The
Rag Status Of Each
Case Is Reviewed By
The Responsible
Teams On A Minimum
Of A Monthly Basis.
The Use Of The Rag
Status Will Be
Reviewed In March
2022
> Additional Welsh
Government Funding
Is Being Utilised To
Add Capacity To
Critical Workforce
Functions
Or To Commission
Additional Services
From The
Independent And
Third Sector. The
Effective Use Of This
Funding Is Monitored
Quarterly Through The
Health And Social
Care Regional
Partnership Board.
This
Funding Will Cease At
The End Of This
Financial Year.
> Adults Services Has
Been Restructured To
Create Dedicated
Teams That Manage
Either Referrals,
Assessments,
Reviews Or
Safeguarding In Order
To Provide
Transparency Of
Workload Pressures
And To

							Level and Source	e of Assurance				Internal	Planned	
					Level 1		Level 2			Level 3		Audit	Internal	
			s	ter								Needs	Audit	ea
Business Risk	t	poor	Statu	Upda		Othe	er <u>Internal</u> Assura	ince	Other <u>I</u>	<u>ndependent</u> A	ssurance		Work	in Are
	Current Impac	Current Likelih	Overall RAG	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla

Enable Staff To Be	
Flexed To Respond	
To Excess Demand.	
The Performance Of	
The Teams Are	
Monitored At The	
Monthly P&Fm. The	
Restructure Will Be	
Maintained Until	
March 2022 And Then	
Subject To Review	
> Additional Surge	
Beds Have Been	
Opened Within The	
Council¿S In House	
Residential Care	
Service To	
Provide Temporary	
Placements For	
Individuals Unable To	
Access Domiciliary	
Care And Alternative	
Forms	
Of Family Support Are	
Not Available. The	
Use Of These Beds Is	
Monitored On A	
Monthly Basis At	
P&Fm.	
This Additional	
Capacity Will Be	
Maintained Until	
March 2022 And Then	
Reviewed	
> The Delivery Of And	
Access To Personal	
Care Services Have	
Been Adapted To	
Prioritise Individuals	
With	
The Highest Level Of	
Need And Robust	
Infection Control	
Measures	

							Level and Sour	ce of Assurance				Internal	Planned	
				<u> </u>	Level 1		Level 2			Level 3		Audit	Internal	
Business Risk	*	poor	Status	Updater		Oth	er <u>Internal</u> Assura	ance	Other <u>I</u>	ndependent A	Assurance	Needs	Audit Work	n Area
	Current Impact	Current Likelihoo	Overall RAG S	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla
					Implemented To									

Implemented To	
Protect Staff And	
Service Users. The	
Effectiveness Of	
These Adaptations	
Are Monitored On A	
Weekly Basis Through	
The	
Weekly Community	
Health And Care	
Silver Planning	
Meetings. These	
Arrangements Will Be	
Reviewed In	
February 2022.	

								Level and Sour	ce of Assurance				Internal	Planned	
					Ŀ	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	-
Busi	ess Risk		poor	Status	Jpdate		Oth	er <u>Internal</u> Assur	ance	Other <u>I</u>	ndependent k	Assurance	, NOCUS	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
Risk ID 276 Risk Title Achieving Bett Together – Recovery Risk Level Corporate	If the Council does not deliver the actions and milestones in the recovery plan, then there is a risk the organisation will not move on effectively from the effects of the pandemic. This is important as it forms the foundations for the next transformatio n programme				Marlyn Dickson	<ul> <li>&gt; Monitoring capacity. Capacity Is A Significant Risk Across The Council With Staff Working On Ttp, Some Staff Still Diverted Onto Urgent Covid Tasks, Staff Off Sick With Covid Or Self-Isolating, And The General Pressure Of Business As Usual Alongside The Continuing Pandemic. Delivery Of The Recovery Plan Must Be Viewed In This Context And Any Risks Or Issues Flagged By Workstream Leads. Overall Programme Management Capacity Is Required. A Post Has Now Been Created And Recruited Will Begin Shortly</li> <li>&gt; Robust governance and recovery plan monitoring and reporting. Governance Established For The Recovery Plan Utilising Existing Groups And Boards. Reporting Monitoring In Place With Workstream Leads.</li> </ul>	>Recovery and transformation Plan 'Achieving Better Together' approved at Cabinet, October 2020. >Cabinet members aligned to working groups and the Board and steering group are chaired by the Leader and deputy leader respectively.	> Recovery and transformation Plan 'Achieving Better Together' reviewed by Scrutiny Programme committee. (During 2021 reviews took place in March & October).	<ul> <li>&gt; Recovery and transformation Plan 'Achieving Better Together' reviewed by Audit Committee.</li> <li>&gt; Recovery, reshaping and Budget Strategy Board established to oversee the work of the Organisational Cross Cutting and Transformatio n Steering group.</li> <li>&gt; PDC supporting the development of polices and monitoring progress of the workstreams.</li> <li>&gt;CMT receive regular updates and monitor</li> <li>progress of the actions and work of the3 groups.</li> </ul>	>Assuranc e Is Provided From Internal Audit >Recovery and transforma tion Plan 'Achieving Better Together' reviewed by Governan ce & Audit Committee (During 2021 reviews took place in Feb & November > Internal audit review undertake n in August 2021- High Assurance rating given. Recovery Element only – transforma tion	> Liaise with the WLGA Councils Service Transform ation Network and other Local Authorities	<ul> <li>&gt; Assurance         Is Provided         From         External         Audit         &gt; WAO         review         'Springing         Forward' to         examine         how councils         are         strengthenin         g their ability         to transform,         adapt and         maintain         the delivery         of services,         including         those         delivered in         partnership         with key         Stakeholder         s and         communities         (focus on         Assets &amp;         Workforce)         ¼ 4 2021 &gt;         ¼ 4 2021 &gt;         ¼ 1 2022.         WAO         'Coming         Out' review         will seek to         provide both         assurance         and insight         into how         Council staff      </li> </ul>	> Audit added to plan for 2021/22. Recovery element completed in 2021/22 transforma tion element deferred to 22/23	>To be included as part of the Achieving better Together (trans) audit to include savings delivery and workforce strategy elements in the audit plan for 2022/23	Cross Cutting Audits – Council Governance and Assurance
		Low	Low	Amber		Recovery Plan Utilising Existing Groups And Boards. Reporting Monitoring In Place With			regular updates and monitor progress of the actions and work of	rating given. Recovery Element only – transforma		'Coming Out' review will seek to provide both assurance and insight			

								Level and Sour	ce of Assurance				Internal	Planned	
					Sr.	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	_
Busines	ss Risk	8	poou	Status	Update		Oth	er <u>Internal</u> Assur	ance	Other <u>II</u>	ndependent l	Assurance	Needs	Work	in 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
Risk ID 277 Risk Title Achieving Better Together – Transformation Risk Level Corporate	If the Council does not transform effectively it will not be sustainable and financially resilient in the longer term	High	Low	Amber	Adam Hill / Marlyn Dickson	<ul> <li>&gt; Transformation activities in the programme plan must align with the MTFP to ensure future financial sustainability</li> <li>&gt; Programme documents need to be in place: Programme plan (milestones and deadlines), governance, benefits realisation plan, RAID log, change plan</li> <li>&gt; Learning from the previous transformation programme, Sustainable Swansea adapted into the new programme following final report to Scrutiny in June 2021</li> </ul>	<ul> <li>&gt; Officer/ Member budget setting process in place and programmed into the forward plan for the Board.</li> <li>&gt; Established and Agreed monitoring of MTFP and financial position through Quarterly reports and financial reports to cabinet.</li> </ul>	<ul> <li>&gt; Recovery and transformation Plan 'Achieving Better Together' reviewed and monitored by Scrutiny Programme Committee (During 2021 reviews took place in March &amp; October).</li> </ul>	<ul> <li>&gt; Recovery, reshaping and Budget</li> <li>Strategy</li> <li>Board</li> <li>&gt; Recovery and transformation</li> <li>Plan</li> <li>'Achieving</li> <li>Better</li> <li>Together' reviewed by</li> <li>Audit</li> <li>Committee.</li> <li>&gt;Monthly</li> <li>P&amp;FM / DMT</li> <li>Meetings.</li> <li>&gt; Reports to</li> <li>CMT to monitor</li> <li>progress or take</li> <li>responsive action</li> </ul>	<ul> <li>&gt;Independ ent</li> <li>Assurance</li> <li>Is</li> <li>Provided</li> <li>From</li> <li>Internal</li> <li>Audit</li> <li>Recovery</li> <li>and</li> <li>transforma</li> <li>tion Plan</li> <li>'Achieving</li> <li>Better</li> <li>Together'</li> <li>reviewed</li> <li>by</li> <li>Governan</li> <li>ce &amp; Audit</li> <li>Committee</li> <li>(During</li> <li>2021</li> <li>reviews</li> <li>took place</li> <li>in Feb &amp;</li> <li>November</li> </ul>		Covid' hybrid environment . Effective use of its resources, the staff, is core to the Council in achieving its overall objectives. >Independe nt Assurance Is Provided From External Audit >WAO review in relation to the MTFP aspects of transformati on programme.	>Added to the audit plan from 21/22	>To be included as part of the Achieving better Together (trans) audit to include savings delivery and workforce strategy elements in the audit plan for 2022/23	Cross Cutting Audits – Council Governance and Assurance

								Level and Sour	ce of Assurance				Internal	Planned	
					er	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	
Business Risk		Ħ	poou	Status	Update		Oth	er <u>Internal</u> Assura	ance	Other <u>I</u>	ndependent A	ssurance		Work	in 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
Risk ID 282 Risk Title Post-EU Exit Risk Level Corporate	If we dont monitor, gather and share intelligence on the period following the end of EU transition via the post- Brexit Steering Group and WLGA, then we may not be fully prepared to mitigate emerging risks or take advantage of new opportunities.	Very Low	Very Low	Green	Adam Hill / Richard Rowlands	> The Council Has Established An Internal Post-Brexit And Covid Recovery Steering Group (With Representatives From Across The Council) And Attends The WIga Eu Co-Ordinators Group To Review And Monitor The Local Impact Following The End Of The Eu Transition Period And To Identify And Respond To Any Risks And Opportunities Arising.	See risk 276 - Achieving Better Together – Recovery See risk 277 - Achieving Better Together – Transformatio n	See risk 276 - Achieving Better Together – Recovery See risk 277 - Achieving Better Together – Transformatio n	See risk 276 - Achieving Better Together – Recovery See risk 277 - Achieving Better Together – Transformatio n	See risk 276 - Achieving Better Together – Recovery See risk 277 - Achieving Better Together – Transform ation	See risk 276 - Achieving Better Together – Recovery See risk 277 - Achieving Better Together – Transform ation Quarterly reports to WLGA EU Transition Group	See risk 276 - Achieving Better Together – Recovery See risk 277 - Achieving Better Together – Transformati on	n/a	n/a	n/a

		Level and Source of Assurance       Level 1       Level 2       Other       Internal       Assurance								Internal	Planned				
					Ŀ	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	
Busine	ss Risk	sk Lent Impact					Oth	er <u>Internal</u> Assura	ance	Other <u>In</u>	ndependent l	Assurance		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
Pick ID	If the council		1							NINdepend		> Indonanda	>Ongoing	>Ongoing	
Risk ID 289 Risk Title Reducing & Tackling Fraud Risk Level Corporate	If the council does not put robust arrangements in place to protect its limited resources and assets from fraud and corruption, then it will remove resources from the council so that they are not put to best use to support those with the greatest need and will cause untold social harm to individuals and communities.	High	Low	Amber	Ben Smith / Simon Cockings	<ul> <li>&gt; Detailed Policies</li> <li>And Procedures In</li> <li>Place For Staff To</li> <li>Follow To Reduce The</li> <li>Likelihood</li> <li>And Opportunity Of</li> <li>Fraudulent Activity.</li> <li>Include Financial</li> <li>Procedure Rules,</li> <li>Contract Procedure</li> <li>Rules And</li> <li>Procurement</li> <li>Guidelines. These Are</li> <li>Reviewed Annually</li> <li>And Staff Are</li> <li>Reminded Of The</li> <li>Existence Of The</li> <li>Policies And</li> <li>Procedures Every Six</li> <li>Months.</li> <li>&gt; The Annual Counter</li> <li>Fraud Plan Is</li> <li>Presented And</li> <li>Approved By Cmt And</li> <li>The Audit And</li> <li>Governance</li> <li>Committee On An</li> <li>Annual Basis. This</li> <li>Helps To Ensure</li> <li>Fraud Risks Are</li> <li>Identified And</li> <li>Highlighted And</li> <li>Ensures Resources</li> <li>Are Targeted To Key</li> <li>Areas To Limit The</li> <li>Possible Risk Of</li> <li>Fraud.</li> <li>&gt; The Corporate</li> <li>Management Team</li> <li>And The Governance</li> <li>And The Governance</li> <li>And The Governance</li> <li>And Audit Committee</li> <li>Receive An Annual</li> <li>Report</li> </ul>			<ul> <li>&gt;The Annual Counter Fraud Plan Is</li> <li>Presented And Approved By</li> <li>The Audit And Governance</li> <li>Committee On An Annual Basis.</li> <li>&gt; The</li> <li>Governance</li> <li>And Audit</li> <li>Committee</li> <li>Receive An</li> <li>Annual Report</li> <li>And A Mid- Year Update</li> <li>Report</li> <li>Outlining The</li> <li>Work</li> <li>Undertaken By</li> <li>The CFF</li> <li>To Raise</li> <li>Awareness</li> <li>and To Report</li> <li>Progress</li> <li>This Assists In</li> <li>Increasing</li> <li>Fraud</li> <li>&gt; Governance</li> <li>And Audit</li> <li>Committee</li> <li>Review And</li> <li>Assess The</li> <li>Risk</li> <li>Management,</li> <li>Internal</li> <li>Control And</li> <li>Corporate</li> <li>Governance</li> <li>Arrangements</li> <li>Of The</li> <li>Authority As</li> </ul>	>Independ ent Assurance Is Provided From Internal And External Audit On The Effectiven ess Of Governan ce, Risk Managem ent And Internal Control On An Annual Basis Via The Chief Auditor's Annual Report And Opinion, The Annual Governan ce Statement And The Annual Sastement And Dinion, The Annual Sovernan ce Statement And Covernan ce Statement And Copinion, The Annual Sovernan ce Statement And Covernan ce Statement And Covernan ce Statement And Covernan ce Statement And Covernan ce Statement And Covernan ce Statement And Covernan ce Statement And Covernan ce Statement And Covernan ce Statement And Covernan ce Statement And Covernan ce Statement And Stornal Statement And Stornal Statence Con Statence Statement And Statence		<ul> <li>Independe</li> <li>nt</li> <li>Assurance</li> <li>Is Provided</li> <li>From</li> <li>Internal And</li> <li>External</li> <li>Audit On</li> <li>The</li> <li>Effectivenes</li> <li>s Of</li> <li>Governance,</li> <li>Risk</li> <li>Managemen</li> <li>t And</li> <li>Internal</li> <li>Control On</li> <li>An Annual</li> <li>Basis Via</li> <li>The Chief</li> <li>Auditor's</li> <li>Annual</li> <li>Report And</li> <li>Opinion, The</li> <li>Annual</li> <li>Governance</li> <li>Statement</li> <li>And The</li> <li>Annual Isa</li> <li>260 Report</li> <li>From The</li> <li>Council's</li> <li>External</li> <li>Auditors.</li> <li>The</li> <li>Existence Of</li> <li>A Strong</li> <li>And</li> <li>Effective</li> <li>Governance,</li> <li>Risk</li> <li>Managemen</li> <li>t And</li> </ul>	>Ongoing fraud related work based within the audit team	>Ongoing fraud detection and prevention work via the CFT within internal audit.	n/a

Γ								Level and Source	e of Assurance				Internal	Planned	
						Level 1		Level 2			Level 3		Audit	Internal	
				S	ter								Needs	Audit	g
	Business Risk	ಕ	poor	Statu	Upda		Othe	er <u>Internal</u> Assura	ince	Other <u>I</u>	<u>ndependent</u> A	ssurance		Work	n Are
		Current Impac	Current Likelih	Overall RAG	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla

And A Mid-Year	Part Of The	And	Internal
Update Report	Committee¿S	Effective	Control
Outlining The Work	Annual Work	Governan	Framework
Undertaken By The	Programme	ce, Risk	Provides
Corporate Fraud	Which	Managem	Assurance
Function During	Includes	ent And	That There
The Period To Raise	Quarterly	Internal	Are Suitable
Awareness. To Report	Monitoring	Control	Controls
Progress Against The	Reports From	Framewor	And
Plan And How Many	The Chief	k Provides	Procedures
Outcomes Have	Internal	Assurance	In Place To
Been Met/Not Met.	Auditor, The	That	Reduce The
This Assists In	Strategic	There Are	Possibility
Increasing Fraud	Delivery And	Suitable	Of
Awareness Across	Performance	Controls	Fraudulent
The Organisation And	Manager And	And	Activity
Also	Annual	Procedure	>The
Highlights Key Risk	Reports From	s In	Council Has
Areas In Order To	The Corporate	PlaceTo	Contributed
Deter And Reduce	Directors. The	Reduce	To The
The Risk Of Further	Committee	The	Review Of
Fraudulent Activity	Also Reviews	Possibility	Counter-
>The CFF Act As The	And Assesses	Of	Fraud
Hub For The Receipt	These Areas	Fraudulent	Arrangemen
Of Intelligence And	When	Activity	ts In Public
Alerts From The	Reviewing The	> The	Sector
National	Annual	Council	Bodies
Anti-Fraud Network	Governance	Takes Part	Across
And Other	Statement	In The	Wales
Organisations	Each Year.	National	Undertaken
Actions Are Taken	The Existence	Fraud	By Audit
And Information Is	Of A Strong	Initiative	Wales. In
Circulated To Key	And Effective	Exercise	Response
Officers And	Governance.	Coordinat	To This
Stakeholders To Raise	Risk	ed By The	Review The
Awareness Of The	Management	Cabinet	Council Has
Risk Of Potential	And Internal	Office On	Compiled An
Fraudulent Activity	Control	A	Action Plan
Against The Council.	Framework	Two-	To
This Helps To Raise	Provides	Yearly	Implement
Awareness Of Current	Assurance	Basis	The
And Emerging Fraud	That There	Which	Improvemen
Risks That May Be	Are Suitable	Involves	ts
Faced By The Council	Controls And	Data	Suggested

Γ								Level and Source	e of Assurance				Internal	Planned	
						Level 1		Level 2			Level 3		Audit	Internal	
				S	tei								Needs	Audit	g
	Business Risk	ಕ	poor	Statu	Jpda		Othe	er <u>Internal</u> Assura	ince	Other <u>I</u>	<u>ndependent</u> A	ssurance		Work	n Are
		Current Impac	Current Likelih	Overall RAG S	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla

And So Reduces The	Procedures In	Matching	By The	
Risk Of The Authority	Place Across	Across A	Review To	
Being Subject To	The Council	Broad	Further	
Fraudulent Attack	То	Range Of	Strengthen	
>The Council Has A	Reduce The	Council	Counter-	
Dedicated Team Of	Possibility Of	Data In	Fraud	
		Order To		
Professionally Trained	Fraudulent		Arrangemen ts. The	
And Experienced	Activity.	Detect		
Corporate Fraud		And	Action Plan	
Investigators To		Prevent	Is Currently	
Prevent, Deter And		Fraudulent	Being	
Detect Fraudulent		Activity.	Implemente	
Activity And To Ensure		-	d.	
Any Allegations Of				
Fraud				
And Corruption Are				
Effectively				
Investigated. The				
Tristanan And Mark				
Existence And Work				
Of The Corporate				
Fraud Team Is				
Publicised At Least				
Twice A Year As A				
Deterrent To				
Fraudulent Activity.				
>Annual Review Of All				
Relevant Policies And				
Procedures To Ensure				
They Remain Fit For				
Purpose In				
Helping To Prevent				
And Detect Fraud And				
Corruption E.G. The				
Anti-Fraud And				
Corruption Policy,				
Anti-Money				
Laundering Policy,				
Whistleblowing Policy,				
Disciplinary Policy And				
The Code Of Conduct.				
>The Council				
Communicates A Zero				
Tolerance Approach				
To Fraud, Bribery And	1			

							Level and Source	ce of Assurance				Internal	Planned	
					Level 1		Level 2			Level 3		Audit	Internal	
			ŝ	ter								Needs	Audit	rea
Business Risk	*	poor	Statu	Updat		Othe	er <u>Internal</u> Assura	ance	Other <u>II</u>	<u>ndependent</u> A	ssurance		Work	A C
	Current Impact	Current Likelih	Overall RAG	Risk Owner / I	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plar

Corruption A Minimum Of Twice A Year Via Internal And External Bulletins.         >The Council Has A Dedicated Fraud Inbox For Staff And The General Public To Report Any Suspicion Of Alleged Fraudulent Activity. The Council Assesses All Reports Of Fraud Received And Evaluates The	

							Level and Source	e of Assurance				Internal	Planned	
					Level 1		Level 2			Level 3		Audit	Internal	
			S	ter								Needs	Audit	ea
Business Risk	5	poou	Statu	Updai		Othe	er <u>Internal</u> Assura	ance	Other <u>I</u>	<u>ndependent</u> A	Assurance		Work	in Are
	Current Impact	Current Likelih	Overall RAG	Risk Owner /	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla

Risk ID	If the supply	<u> </u>	1			> Discuss & Monitor				>N/a audit	n/a	
296	of					The Situation With				advised	n/a	
200	construction					The Various Project				issue likely		
Risk Title	materials					Teams Monthly And				to		
Supply of	continue to be					Escalate As Required.				dissipate		
Construction	delayed, and					This Is Done Via A				in 22/23		
Materials	in short					Monthly Cross Cutting				111 22/20		
Matchais	supply, then					Tracker Discussed At						
Risk Level	this will					Dmt.						
Corporate	impact					> Increasing Our						
Corporate	negatively on					Stock Levels When						
	the cost and					Materials Become						
	programme					Available. This Is						
	for the					Monitored Via Regular						
	delivery of					Programme Meetings						
	capital					As Required For						
	programme					Scheme Delivery And						n/a
	projects.					In Conjunction With						L L
	projooto.					The Procurement						
						Team						
					is.	And Suppliers						
					Š	Considering						
					<u> </u>	Alternatives Where						
					he	Possible.						
					ac	> Regular Liaison With						
					Ř	The Dedicated						
					s	Procurement Team						
						Helps Reduce The						
		-			с,	Risks.						
		igh			ž	>Teams Continue						
		Ĭ	Ч		tin	Working Closely With						
		Very High	High	Red	Martin Nicholls / Rachel Lewis	Suppliers To Mitigate						
		>	-	~	≥	Risk Of Non Delivery						

									Level and Sour	ce of Assurance				Internal	Planned	
						ъ	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	
	Busines	s Risk	*	poor	Status	Update		Oth	er <u>Internal</u> Assur	ance	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
Risk IE 306 Risk Ti WCCIS Risk Lo Corport	itle S evel	If the current instability and poor performance of the All Wales Community Care Information System is not rectified then backlogs in the recording of client contacts, assessments, case recording and plans for all individuals receiving intervention from Swansea Social Services will accrue, increasing further current pressures on frontline staff, severely limiting performance management and reporting capability and potentially compromising				/ Angela Morgan	<ul> <li>&gt; Additional Business Support Mobilised To Assist Frontline Staff With Catching Up On Backlogs.</li> <li>Backlogs Created By The Lack Of Access To The System Are Monitored On A Twice Weekly Basis At A Wccis Meeting.</li> <li>&gt;Manual Workarounds Have Been Implemented To Manage The Recording Of Assessments, Case Recordings And Plans When All Other Services Have Restricted Access To The System. The Need To Maintain These Manual Systems Is Monitored On A Monthly Basis At P&amp;Fm</li> <li>&gt; Usual Performance Monitoring Arrangements Have Been Suspended And Manual Systems To Monitor A Smaller Number Of Key Performance Measures Put In Place. These Key Performance</li> </ul>		> Key Performance Measures Continue To Be Monitored On A Monthly Basis In P&Fm And Every 6 Weeks By Scrutiny Performance Committee.	<ul> <li>The National Team Are Working Closely With The Software Provider And Microsoft To Implement Fixes To Stabilise The System (This Is Outside Of The Control Of The Council). The Council Have Escalated Concerns About The Effectiveness Of The National Team And The Software Provider To Facilitate A Stable National System. The Impact Of Ongoing System Instability Is Monitored At A Twice Weekly Meeting Wccis Meeting And The Council ¿S Lead Director</li> </ul>				>New system audit added to the audit plan from 22/23	>WCCIS initial audit review included on the 22/23 audit plan.	Service Specific Audits – Adult Services
		safe service delivery.	High	High	Red	David Howes	Measures Continue To Be Monitored On A Monthly Basis In P&Fm And Every 6 Weeks By Scrutiny			For Digital Services Attends Weekly						

							Level and Source	ce of Assurance				Internal	Planned	
					Level 1		Level 2			Level 3		Audit	Internal	
			s	ter								Needs	Audit	rea
Business Risk	ಕ	poor	Statu	Jpda		Othe	er <u>Internal</u> Assura	ance	Other <u>Ir</u>	<u>ndependent</u> A	ssurance		Work	n Are
	Current Impac	Current Likelih	Overall RAG S	Risk Owner / L	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Pla

Derfermence	National		
Performance	National		
Committee.	Governance		
> During Periods Of	Meetings.		
System Instability	-		
Where The Number Of			
Users Needs To Be			
Reduced, Priority			
Access			
Is Maintained For			
Critical Users And In			
Particular The Teams			
That Are Managing			
New Referrals In			
Children			
And Adult Services.			
The Effectiveness Of			
These Arrangements			
Are Monitored On A			
Twice Weekly Basis At			
A Wccis Meeting			
A woos weeting			

Last Updated: 07/02/22