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Risk ID	If pupils do					>Covid-19 – Safe	>Positive	>Dedicated	Additional	>Various	>ESTYN	>Audit	>Range of	>School	
Risk Title Pupil Attainment & Achievement Risk Level Corporate	not receive a very good education	Medium	Medium	Amber	Helen Morgan-Rees / Kate Phillips	Return to School Plan in place, 88% attendance first three weeks of Sept. Continuity of Learning Plan and Policy in place – Schools developing remote/ blended learning opportunities. >Support for pupils to return safely in Sept. through Health, Welfare & Community Education Stream of Covid-19 Recovery Plan. >Childcare in schools offer for key workers and most vulnerable children during pandemic. >Pupils eligible for FSM receive fortnightly BACS payment or food parcels during pandemic. >Check-in, Catch-up and prepare sessions for safe return for learners. >Further enhancement of the Continuity of Learning Programme. >Challenge adviser monitoring visits. >Budget proposals for 2021-22 continue to prioritise the delegated schools budget and areas of pupil specific support and the	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	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 Partneriaeth and curriculum reform readiness.	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.	Edu. Audits in the Audit Plan. >ESTYN reports review during school audits for finance / mgt. control.	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 objectives.	Wales & CIW. > HSE audit of schools as Covid safe environment s to allow education to continue. > Welsh government returns, for example. Accelerated learning programme.	Education audits in the plan to be completed as part of the rolling audit schedule.	and other Education / thematic audits due in 2022/23	Service Specific - Education – Improving Education and Skills

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					significant cash									
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Risk ID 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 inhouse 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 Policy and Group >Mandatory Corporate Safeguarding Principal Officers for safeguarding Policy and Group >Mandatory Corporate Safeguarding Training in place for Staff and Members. >Corporate Priority >New Safeguarding 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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					vulnerable and prioritise services and contact with those during Covid-19 response. > Children Services to further enhance the multi-agency Front Door Team with a dedicated safeguarding hub. > 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			review by PDDC in 2019 >CMT approved action plan to stabilise recruitment and retention of frontline Children Services staff						

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						Safeguarding Team and the Front Door.									
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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.				Su Su	>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	>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	>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 strengthened considerably boosted by the £17m addition to reserves in 19-20 outturn. >Risks in current year managed temporarily by drawing down from		>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
		Very High	Very High	Red	Ben Smith / Jeff Dong	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			challenge delivery/ non- delivery and accelerate timescales.			those increased reserves.			Š

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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.	Medium	Low	Amber	Tracey 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 departments ie introduction of ALN in education.	>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.	>Lawyers in Local Government updates received by Chief Legal Officer. > Legislation updates circulated periodically to CMT by Chief Legal Officer. > Policy Briefing — widely circulated > Appraisals identify legal training/gaps in legal provision. > The Data Protection Officer provides an annual report on compliance with data protection legislation.	>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

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Risk ID	If we do not		1			> Covid-19 –	>Workforce	>There is a	> New and	> An				>To be	
196	have a robust					Redeploy and train	Strategy being	legal	revised	update				included	
	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 have staff					and well-being during Covid-19	Member, David	analysis of Gender pay	for approval.	for presentati				better 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	gap locaco.	Workforce	Gove &				audit to	Cross Cutting Audits - Council Governance and Control
•	the right					during Ćovid-19	be presented	A presentation	Strategy is	Audit				include	ont
	knowledge					>Workforce will be a	to Cabinet for	has previously	being	Committee				savings	C
	and skills to					key strand of the	endorsement/	been made to	developed in	in .				delivery	an
	manage					future Council workstream in the	approval. There is a	the Workforce	consultation with the	February 2022.				and workforce	9
	change, deliver					Covid-19 recovery	legal	Scrutiny Working	Recovery and	2022.				strategy	Jan
	transformed					plan	requirement	Group on the	Future					elements	err
	services and					>Reporting through	for Council to	Impact of the	Generations					in the	δ
	ensure					Leadership Team	agree the	Pandemic of	PDCand					audit plan	
	statutory					>Tracking and	annual Council	the Workforce.	Equality and					for	an
	compliance.					monitoring of the OD	Pay Policy	There is a	Future					2022/23	Ö
						plan and delivery. >OD Strategy and		further meeting	Generations Board.						1
						Implementation Plan		scheduled for	board.						dits
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					Chard	>Apprenticeship/		which will							р
					S	Traineeship strategy.		include							草
					Adrian	>Gender Pay Gap and		consideration							õ
					iž.	Project Plan		of the							SSC
					ĕ	>Service Planning		Workforce							ö
					~	>Corporate Plan –		Strategy.							
					Sarah Lackenby /	Transformation & Future Council									
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Piek ID	If demand for		1			>10% Unlift Of Tho	Monitored via	Dedicated	T		CIW		Mumbor	>Non	
Risk ID 221 Risk Title Availability of Domiciliary Care Risk Level Corporate	If demand for personal care at home continues to exceed the Council's capacity to directly provide or commission sufficient domiciliary care staff and services, then the local authority will fail to meet its statutory duties under the Social Services and Well Being Act, individuals care and support needs will not be sufficiently well met and there will be significantly increased pressure on acute hospital services.	High	High	Red	David Howes / Peter Field	>10% Uplift Of The Fee To All Dom. Care Providers Implemented In Year To Enable External Providers To Pay A Competitive Salary To Staff To Assist With The Recruitment And Retention Of Staff. The Need For A Further Uplift Will Be reviewed By End Of 2022. >Respite Services Adapted So They Can Flex To Address Long Term Care Needs If Required. Effectiveness Will Be Reviewed At The End Of December 2021 At The Regional Community Silver Emergency Planning Meeting >A Pilot Of Dom Care Services Being Provided By A Residential Care Provider Has Been Initiated. Success Will Be Reviewed At The End Of December 2021. > Third Sector Providers Asked To Reprioritise Services To Support Individuals With Alternative To Domiciliary Care To Mitigate The Impact Of	Monitored via ECG on a weekly basis	Dedicated adult services scrutiny panel			cIW inspection of regulated services and the LA statutory functions		>Number of Adult Services audits are on the plan completed on rolling programm e basis includes residential and non-residential care audits.	>Non-residential care audit is included on the audit plan for 2022/23.	Service Specific – Financial Services and Service Centre – Section 151 Assurance / Safeguarding

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					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									
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					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.									

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[The Council's Framework For									
						Commissioning Domiciliary Care Is Subject To An Annual Review. Next Review Will Be End Of March 2022									

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Risk ID 222 Risk Title Digital, data and cyber security Risk Level Corporate	If we do not have robust digital, data and cyber security measures and systems 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.					>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		>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	>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 consultation n exercise and review of risk registers.	fic – Digital & Customer Services and IT Audits – Transformation and Future Council
		Very High	Medium	Red	Sarah Lackenby / Jo Harley	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 planning to further imprive the ICT disaster recovery plan			cyber cell meetings being attended to share intelligence and actions >PSN Certification Achieved >Cyber essential accreditation achieved						Service Specific – Digital & 0

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					>Live testing of the DR			>Member of				T		
					Plan, options being			Wales WARP						
					reviewed potentially in			& CISP						
					line with wider			sharing						
					corporate business			knowledge of						
					continuity exercise			threats.						
					>LrF Cyber exercise			>Discussed at						
					planned and revised SIRO training			IG Board – standing						
					>Comms. Issued to			agenda item						
					staff and members			agenda item						
					detailing impact of									
				l	cyber attack at other									
					councils.									
				l	>BullWall Software									
					purchased to protect									
					against malware									
					attacks.									

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Risk ID		If we do not					>Covid-19 – Prepare	>EMS	>EMS have	>Multi agency	>Emera.			>Standard	>Audits in	
235		have					for further Covid-19 or	Manager	been called to	exercising and	Mgt audit			audits in	the plan to	
		sufficient					other infectious	attends ECG	several	training	in Audit			the plan	be	
Risk Titl		emergency					disease outbreaks	for political	Scrutiny	>Internal	Plan for			cover this	completed	
Emergen		planning,					>Rest Centre Plan and	and officer	panels, with	development/	CBS.			area on	when due	
Planning		resilience and					arrangements	oversight and	none currently	training of new	>H&S,			rolling	as part of	
Resiliend		business continuity					>Additional dedicated PPE reserve for	awareness. >Daily sit rep	in the calendar.	officers including	Emerg.			basis.	the standard	
Continuit		arrangements					responders and public	of all key	Calcilual.	newly created	Planning /				rolling	Service Specific Audits – Communications / ICT / Council wide assurance
Continuit	• 9	in place, then					during evacuation and	activity		assistants	Civil Cont.				schedule.	Izal
Risk Lev	vel	we will not be					additional rest centre	distributed to		post.	and				>Emergen	SSI
Corporat	te	able to					location for mass	CMT, Leader		>Joint work	Business				су	в
		respond					evacuation to be	and Deputies.		programs and	Continuity				Planning	Νį
		effectively in					established from bay	>CMT		information	in Audit				and	=
		an					>Additional strategic training to increase	receives		sharing with Welsh Civil	Plan for				Business	ŭ l
		emergency, provide the					organisational	regular updates on		Contingencies	HR&OD				Continuity is included	ပိ
		necessary					resistance agreed for	key planning		managers and					in the	\ <u>\</u>
		civic					3 rd Nov	and		South Wales					2022/23	일
		leadership or					>Specific Covid Rest	agreement as		Resilience					audit plan.	/ SI
		continue to					Centre arrangements	required from		Team.						ioi
		run vital					developed and	EMS		>Service						g
		services and					implemented complete	manager.		Manager part						un.
		ensure					with evac PPE and	>EMS		of the National						틸
		compliance with the legal					hygiene supplies >Restructure of EMS	manager meets monthly		and Regional PSPG group						ρ
		requirements					to include additional	with the		and						
		of the Civic					EMS Officer and	portfolio holder		CONTEST						ţ
		Contingencies					Principle for 12	for political		Group with						pn
		Act 2004 as a					months	oversight and		local PSPG						C A
		Category 1					>Review and update	visibility.		arrangements						iğ.
		Responder.				Ħ	business continuity			in-place.						be
						<u>Se</u>	plans			>EMS is						e (O
						Gimblett	>Crisis Media Plan			embedded within the						-Ķ
							>Temporary Mortuary arrangements			SWLRF at						Ser
						Adam Hill / Craig	>Major Incident Plan			Executive.						"
						ပ်	>Flood Management			Strategic and						
						<u>`</u>	Plan			Tactical levels						
			Ε	Ε	_	王	>Emergency Recovery			BC plans in-						
			Medium	di	ppe	an	Plan			place with						
			ΜĒ	Medium	Amber	Ad	>Offsite Comah Plan			each HoS.						
			_	_			& Exercising									

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					Level 1		Level and Sour	ce of Assurance		Level 3		Internal Audit	Planned Internal	
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Business Risk	ಕ	pood	Status	Updat		Oth	er <u>Internal</u> Assur	ance	Other <u>Ir</u>	<u>ndependent</u> A	ssurance		Work	ın Are
	Current Impact	Current Likelihood	Overall RAG	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
					>Commissioned 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 Management >Service and Corporate Business Impact Assessments and business continuity plans >Continual review of plans & protocols >Vehicle mitigation & protective security advice >Risk Profiling			>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.						

							Lavel and Carr	ce of Assurance					Planned		
						Level 1		Level 2	ce of Assurance		Level 3		Internal Audit	Internal	
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Busine	ss Risk	#	poor	Status	Updat		Oth	er <u>Internal</u> Assur	ance	Other <u>II</u>	ndependent A	ssurance		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 we fail to					>Covid-19 – Additional	>H&S	>H&S	>Member of	>H&S	<u> </u>		>Standard	>Audits in	1
Risk Title Health & Safety Risk Level Corporate	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	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. 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.	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.	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. >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	Audit Plan			audits in the plan already cover this area.	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

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							Level and Sour	ce of Assurance				Internal	Planned	
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		b	Status	dat		Oth	er <i>Internal</i> Assura	ance	Other II	ndependent A	ssurance		Work	Area
Business Risk	ਰ	þóc	Sta	п										ll /
	Current Impact	Current Likelihood	Overall RAG	Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan
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							1		1	1	1	r		
					>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									1 1
					given to Deputy Chief									
					Exec from Oct 2018.									

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Business Risk	ಕ	hood	Statu	Upda		Oth	er <u>Internal</u> Assur	ance	Other <u>I</u>	<u>ndependent</u> A	ssurance		Work	an 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 the Council,					>Covid-19 – Maintain	>Council is	>Scrutiny	>Chief		>City Deal		>New	>Internal	
Risk ID 259 Risk Title Regional Working Risk Level Corporate Risk Level 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 strengthening capacity for regional working	playing a leading and proactive role in major regional collaborations. >Leader of the Council is the City Region Joint Committee Chair. >Council meets up regionally with 5 other local authorities to discuss collaboration projects. >Annual Report on Regional Working presented to Council.	inquiry 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.	Executive takes the lead role for ERW and Western Bay as well as being an executive member of the City Deal Joint Committee. ERW has fully formed Governance Arrangements. >City Deal has Joint Committee Agreement and joint scrutiny arrangements agreed by Council. >Western Bay has a Joint Committee and scrutiny arrangements in place.		has a Joint Working Agreem't in place, which was approved at Council on 26th July 2018. >Review of progress by IPC on the Western Bay Health & Social Care collab'n.		audit area added as a result of the review of the Risk register from 2022/23	audit review included in the 2022/23 audit plan.	Cross Cutting Audits – Council Governance and Assurance

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		O	O	0	22										
Risk ID	If we fail to					> Prepare And	>Covid-19	>Scrutiny has	>Covid-19	>Matters	>Report	>Audit	>Achievin	>ABT	
264	carry on					Implement A Covid-19	Recovery and transformation	kept a watching brief.	Recovery and	arising	providing	Wales has shaped their	g Better	Transfora	
Risk Title	providing a co-ordinated					Recovery Plan To Restart, Adapt,	Plan	SPC to review	transformation Plan	addressed in some	an assessme	work to	Together (Recovery	mtion audit is	
COVID-19	and joined-up					Recover And	'Achieving	local position	'Achieving	Internal	nt of the	provide)complete	included	
00115 10	response to					Transform Council	Better	and progress	Better	Audit	key issues	assurance	d in	on the	
Risk Level	Covid-19 and					Services.	Together'	with Recovery	Together'	work, e.g.	following	and	2021/22	22/23	
Corporate	make the best					> Work With Partners	approved At	Plan.	reviewed by	See report	the Covid-	challenge in	plan.	audit plan.	
	use of our					To Provide Social	Cabinet.		Audit	to Audit	19	a way which			
	workforce and					Care And Other	>Various		Committee.	Committee	response	helps to			
	available resources,					Critical Front-Line Staff With Ppe.	Cabinet reports		>Audit Committee	09/02/21 Internal	with a particular	support the Council			ce
	then: we will					> Work With Partners	through		quarterly	Audit	focus on	through this			Council Governance and Assurance
	be unable to					To Ensure Resilient	2020/21 to		overview of	Annual	how we	period.			Ins
	protect					Supply Chains,	support work		risk	Plan	have	2020-21			As
	vulnerable					Especially Food And	to respond to		management,	2020/21 -	collectively	work			pur
	people and					Ppe Supply.	the pandemic,		including	Monitoring	managed	includes:			g g
	meet demand					> Work With Partners	e.g. Financial		Corporate	Report for the Period	Care	• recovery			l au
	for key services, such					To Redeploy Staff And Seek Recruits To	Procedure Rule 19.1c		Risks. >Audit	1 October	Home settings	planning in response to			L L
	as social					Critical Areas, Such	and FPR7.		Committee	2020 to 31	reviewed	the COVID-			0 0
	care; there					As Social Care And	Authorisation		oversight of	December	at the	19			9
	will be					Food Distribution To	for Alteration		relevant	2021 –	Regional	pandemic;			ıncı
	disruption to					Food Banks.	and		reports and	detailing	Partnershi	• COVID-			정
	services and					> Prepare For The	Conversion of		impact of	additional	p Board.	learning			
	supplies, including food					Possibility Of Further Covid-19 Outbreaks.	Bay Studios, Fabian Way,		Covid-19, e.g. See Audit	work done in the		project – helping to			its
	supplies; we					> Provide Council-Led	Swansea into		Committee	quarter,		identify and) N
	will not be					To Support To Local	an 1000 Bed		review of	including		share			g/
	supporting					Businesses, E.G.	Surge Hospital		Revenue and	Lloyds		learning			Cross Cutting Audits
	critical					Advice, Grants And	on Behalf of		Capital Budget	pre-paid		from the way			ರ
	services, key				spi	Rate Relief.	the Swansea		Monitoring -	card		in which			SSC
	workers and				Rowlands	> Work With Partners	Bay University		2nd Quarter	review in		public			ő
	local businesses				ð	To Inform And Reassure The Public	Health Board – See Cabinet		on 09/02/21, including	relation to the Covid-		bodies have responded			
	sufficiently to					And Reinforce Health	27/04/20.		Welsh	19		to the			
	limit the				arc	And Social Distancing			Government	Foodbank		pandemic;			
	impact of the				Hill / Richard	Messages Through			funding and	setup and		, ,			
	virus.				8	Social And Other			Covid-19 grant	operation.					
		Чķ			Ì	Media.			payments						
		High			Ī	> Work With Partners			made to local						
		Very	Low	Red	Adam	To Support Education Teams & Schools And			businesses						
		>	Ľ	ď	ĕ	Provide Education /									

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	Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater										
					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									
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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			> Refresh Regional	> Cabinet	> Regular	> Regional		>Collabor		>Number	> Regen	
Risk Title Local Economy and Infrastructure Risk Level Corporate	economy and 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	Economic 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	considered economic recovery plan >Cabinet considered FPR7 where appropriate	scrutiny undertaken on post Covid economic recovery and specifically on phase 1 arena/digital district project	directors and 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. > City Deal Regional Scrutiny Panel overview of progress on Swansea Waterfront City project > Reporting of programme outputs to funding bodies, WG, WEFO HLF etc.		ate With Welsh Governme nt On Regional Economic Framework		of Regen 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

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Business Risk	 #	poor	Status	Update		Oth	er <u>Internal</u> Assura	ance	Other <u>Ir</u>	ndependent A	ssurance	Needs	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
					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									

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Busine	ss Risk	t	pooq	Statu	Upda		Oth	er <u>Internal</u> Assur	ance	Other <u>I</u>	<u>ndependent</u> A	ssurance		Work	ın 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
Rick ID	If rates of		I			> Additional Agency	Monitored via	Dedicated	regional	1	CIW		n/a	n/a	
Risk ID 274 Risk Title Covid-19 Risk Risk Level Corporate	If rates of Covid infection & transmission 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	High	High	Red	David Howes / Angela Morgan	> Additional Agency Worker Support Is Being Procured To 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 Health Resource To Help Manage	Monitored via ECG on a weekly basis	Dedicated social services scrutiny performance panels	regional partnership board oversight		CIW inspection of both regulated care services and LA statutory functions		n/a	n/a	n/a

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					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									

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Г			1			Sector Support. The	T						T	T	
						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									
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Business Risk	+	Current Likelihood	Overall RAG Status	Risk Owner / Updater		Oute	i <u>iiiteiliai</u> Assult	illo	Other <u>II</u>	<u>idependent</u> A	ssurance		Work	Audit Plan Area
	Current Impact	elih	U)	1 -	Management									Jai
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		I			Enable Staff To Be	1				I		1		1
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					To Excess Demand.									
					The Performance Of									
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					Monitored At The									
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					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					1		1		
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					This Additional									
					Capacity Will Be									
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					Care Services Have									
					Been Adapted To									
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					The Highest Level Of					1		1		
					Need And Robust									
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					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.									

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						Level 1		Level and Sour	ce of Assurance		Level 3		Internal Audit	Planned Internal	
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Busines	ss Risk	ಕ	hood	Status	Updat		Oth	er <u>Internal</u> Assur	ance	Other <u>II</u>	ndependent A	Assurance		Work	ın 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 276 Risk Title Achieving Better 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 transformation programme	Low	Low	Amber	Adam Hill / Marlyn Dickson	> 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 > 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.	>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).	> Recovery and transformation Plan 'Achieving Better Together' reviewed by Audit Committee. > Recovery, reshaping and Budget Strategy Board established to oversee the work of the Organisational Cross Cutting and Transformation Steering group. > PDC supporting the development of polices and monitoring progress of the workstreams. > CMT receive regular updates and monitor progress of the actions and work of the 3 groups.	>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 deferred to 22/23	> Liaise with the WLGA Councils Service Transform ation Network and other Local Authorities	> Assurance Is Provided From External Audit > 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 & Workforce) ½ 4 2021 > ½ 1 2022. > WAO 'Coming Out' review will seek to provide both assurance and insight into how Council staff might work together in the 'post	> 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

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					er	Level 1		Level 2			Level 3		Audit Needs	Internal Audit	m l
Bus	ness Risk	せ	pood	Status	Updat		Oth	er <u>Internal</u> Assura	ince	Other <u>Ir</u>	ndependent A	ssurance		Work	an 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 Bet Together – Transformatio Risk Level Corporate	sustainable	High	Low	Amber	Adam Hill / Marlyn Dickson	> Transformation activities in the programme plan must align with the MTFP to ensure future financial sustainability > Programme documents need to be in place: Programme plan (milestones and deadlines), governance, benefits realisation plan, RAID log, change plan > Learning from the previous transformation programme, Sustainable Swansea adapted into the new programme following final report to Scrutiny in June 2021	> Officer/ Member budget setting process in place and programmed into the forward plan for the Board. > Established and Agreed monitoring of MTFP and financial position through Quarterly reports and financial reports to cabinet.	> Recovery and transformation Plan 'Achieving Better Together' reviewed and monitored by Scrutiny Programme Committee (During 2021 reviews took place in March & October).	> Recovery, reshaping and Budget Strategy Board > Recovery and transformation Plan 'Achieving Better Together' reviewed by Audit Committee. > Monthly P&FM / DMT Meetings. > Reports to CMT to monitor progress or take responsive action	>Independ ent Assurance 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		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 Source of Assurance Level 1 Level 2 Level 3								Appe	naix 5					
									ce of Assurance				Internal	Planned	
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Busine	ss Risk	#	poor	Status	Update		Oth	er <u>Internal</u> Assur	ance	Other <u>I</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
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 – Transformation	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

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Busine	ss Risk	#	poor	Status	Updat		Othe	er <u>Internal</u> Assur	ance	Other <u>Ir</u>	ndependent 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
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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	> Detailed Policies And Procedures In Place For Staff To Follow To Reduce The Likelihood And Opportunity Of Fraudulent Activity. Include Financial Procedure Rules, Contract Procedure Rules And Procurement Guidelines. These Are Reviewed Annually And Staff Are Reminded Of The Existence Of The Policies And Procedures Every Six Months. > The Annual Counter Fraud Plan Is Presented And Approved By Cmt And The Audit And Governance Committee On An Annual Basis. This Helps To Ensure Fraud Risks Are Identified And Highlighted And Ensures Resources Are Targeted To Key Areas To Limit The Possible Risk Of Fraud. > The Corporate Management Team And The Governance And Audit Committee Receive An Annual Report			>The Annual Counter Fraud Plan Is Presented And Approved By The Audit And Governance Committee On An Annual Basis. > The Governance And Audit Committee Receive An Annual Report And A Mid- Year Update Report Outlining The Work Undertaken By The CFF To Raise Awareness and To Report Progress This Assists In Increasing Fraud > Governance And Audit Committee Review And Assess The Risk Management, Internal Control And Corporate Governance Arrangements Of The Authority As	>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 Isa 260 Report From The Council's External Auditors. The Existence Of A Strong		>Independe nt Assurance Is Provided From Internal And External Audit On The Effectivenes s Of Governance, Risk Managemen t And Internal Control On An Annual Basis Via The Chief Auditor's Annual Report And Opinion, The Annual Governance Statement And The Annual Isa 260 Report From The Council's External Auditors. The Existence Of A Strong And Effective Governance, Risk Managemen t And	>Ongoing fraud related work based within the audit team	>Ongoing fraud detection and prevention work via the CFT within internal audit.	n/a

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

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					And So Reduces The Risk Of The Authority			Procedures In Place Across	Matching Across A		By The Review To			
					Being Subject To			The Council	Broad		Further			
					Fraudulent Attack			To	Range Of		Strengthen			
					>The Council Has A			Reduce The	Council		Counter-			
					Dedicated Team Of			Possibility Of	Data In		Fraud			
					Professionally Trained			Fraudulent	Order To		Arrangemen			
					And Experienced			Activity.	Detect		ts. The			
					Corporate Fraud				And		Action Plan			
					Investigators To				Prevent		Is Currently			
					Prevent, Deter And Detect Fraudulent				Fraudulent		Being			
					Activity And To Ensure				Activity.		Implemente d.			
					Any Allegations Of						u.			
					Fraud									
					And Corruption Are									
					Effectively									
					Investigated. The									
					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									

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							Level and Sour	ce of Assurance				Internal	Planned	
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Business Risk	ಕ	hood	Statu	Upda		Oth	er <u>Internal</u> Assura	ance	Other <u>II</u>	ndependent A	Assurance		Work	an Are
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		Τ		1	Corruption A Minimum									1 '
					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									
					Threat And Responds									
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Busine	ess Risk	ಕ	pood	Status	Update		Otho	er <u>Internal</u> Assura	ance	Other <u>II</u>	ndependent A	ssurance	Necus	Work	ın 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 296	If the supply of					> Discuss & Monitor The Situation With							>N/a audit	n/a	
Risk Title Supply of Construction Materials Risk Level Corporate	of construction materials continue to be delayed, and in short supply, then this will impact negatively on the cost and programme for the delivery of capital programme projects.	Very High	High	Red	Martin Nicholls / Rachel Lewis	The Situation With The Various Project Teams Monthly And Escalate As Required. This Is Done Via A Monthly Cross Cutting Tracker Discussed At Dmt. > Increasing Our Stock Levels When Materials Become Available. This Is Monitored Via Regular Programme Meetings As Required For Scheme Delivery And In Conjunction With The Procurement Team And Suppliers Considering Alternatives Where Possible. > Regular Liaison With The Dedicated Procurement Team Helps Reduce The Risks. >Teams Continue Working Closely With Suppliers To Mitigate Risk Of Non Delivery							advised issue likely to dissipate in 22/23		n/a

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Busi	ness Risk	+	000	Statu	pd		Oth	er <u>Internal</u> Assur	ance	Other <u>II</u>	<u>ndependent</u> A	ssurance		VVOIK	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
Risk ID	If the current		1		<u> </u>	> Additional Business		> Key	> The National		<u> </u>		>New	>WCCIS	T 1
Risk Title WCCIS Risk Level Corporate	ir 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 safe service delivery.	High	High	Red	David Howes / Angela Morgan	Support Mobilised To Assist Frontline Staff With Catching Up On Backlogs. Backlogs Created By The Lack Of Access To The System Are Monitored On A Twice Weekly Basis At A Wccis Meeting. >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&Fm > 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 Measures Continue To Be Monitored On A		Performance Measures Continue To Be Monitored On A Monthly Basis In P&Fm And Every 6 Weeks By Scrutiny Performance Committee.	ream 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 For Digital Services Attends Weekly				system audit added to the audit plan from 22/23	initial audit review included on the 22/23 audit plan.	Service Specific Audits – Adult Services

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	Business Risk	5	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Other <u>Internal</u> Assurance			Other Independent Assurance				Work	n Are
		Current Impact					Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
		1	1		<u> </u>	Performance			National				1		
						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									
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Last Updated: 07/02/22