



Dinas a Sir Abertawe

Hysbysiad o Gyfarfod

Fe'ch gwahoddir i gyfarfod

Pwyllgor Llywodraethu ac Archwilio

Lleoliad: Ystafell Bwyllgor 5, Neuadd y Ddinas, Abertawe

Dyddiad: Dydd Mawrth, 9 Tachwedd 2021

Amser: 2.00 pm

Cadeirydd: Paula O'Connor

Aelodaeth:

Cynghorwyr: C Anderson, P M Black, D W Helliwell, T J Hennegan, P R Hood-Williams, O G James, J W Jones, M B Lewis, C E Lloyd, S Pritchard, J A Raynor, L V Walton a/ac T M White

Aelod Lleyg: Julie Davies

Gwyllo ar-lein: <https://bit.ly/3pA22dG>

Agenda

	Rhif y Dudalen.
1 Ymddiheuriadau am absenoldeb.	
2 Datgeliadau o fuddiannau personol a rhagfarnol. www.abertawe.gov.uk/DatgeluCysylltiadau	
3 Cofnodion. Cymeradwyo a llofnodi, fel cofnod cywir, gofnodion y cyfarfod(ydd) blaenorol.	1 - 5
4 Cynllun Blynnyddol Archwilio Mewnol 2021/21 - Adroddiad Monitro ar gyfer y Cyfnod 1 Gorffennaf 2021 i 30 Medi 2021.. (Er Gwybodaeth) (Simon Cockings)	6 - 32
5 Ymateb i Adroddiad Archwilio Mewnol y Gwasanaeth Cyfarpar Cymunedol a'r Gwasanaeth Larymau Cymunedol.	33 - 52
6 Adroddiad Dilynol Argymhellion Archwiliadau Mewnol - Chwarter 2 2021/22. (Er Gwybodaeth) (Simon Cockings)	53 - 61
7 Adroddiad Orlhain Argymhellion Archwiliadau Hanfodol 2020/21. (Er Gwybodaeth) (Simon Cockings)	62 - 71

8	Adroddiad Diweddarau Canol Blwyddyn Swyddogaeth Twyll Corfforaethol 2021/22. (Jeff Fish / Jonathon Rogers)	72 - 81
9	Trosolwg Risg Corfforaethol 2021/22 - Chwarter 2. (Er Gwybodaeth) (Richard Rowlands)	82 - 124
10	(Cyfarwyddiaeth): Yr Amgylchedd Rheolaeth Fewnol 2021/22. (Er Gwybodaeth) (Dave Howes)	125 - 146
11	Adroddiad Blynyddol Diogelu Corfforaethol 2020-21. (Er gwybodaeth) (Simon Jones)	147 - 184
12	Y diweddaraf am Abertawe'n Cyflawni'n Well Gyda'n Gilydd. (Er Gwybodaeth) (Adam Hill)	185 - 205
13	Effaith Deddf Ansoffedd a Llywodraethu Corfforaethol 2020. (Llafar) (Ben Smith)	
14	Adroddiad Orlhain Camau Gweithredu'r Pwyllgor Archwilio. (Er Gwybodaeth) (Jeremy Parkhouse)	206 - 211
15	Cynllun Gwaith y Pwyllgor Archwilio. (Er Gwybodaeth) (Jeremy Parkhouse)	212 - 228

Cyfarfod nesaf: Dydd Mawrth, 14 Rhagfyr 2021 ar 10.00 am

Huw Evans

Huw Evans
Pennaeth Gwasanaethau Democrataidd
Dydd Mawrth, 2 Tachwedd 2021

Cyswllt: Gwasanaethau Democrataidd: - 636923

Agenda Item 3



City and County of Swansea

Minutes of the **Governance & Audit Committee**

Remotely via Microsoft Teams

Tuesday, 12 October 2021 at 2.00 pm

Present: Paula O'Connor (Chair) Presided

Councillor(s)

C Anderson
T J Hennegan
M B Lewis
J A Raynor

Councillor(s)

P M Black
P R Hood-Williams
C E Lloyd
L V Walton

Councillor(s)

D W Helliwell
J W Jones
S Pritchard
T M White

Lay Member

Julie Davies

Also Present

Councillor R C Stewart – Leader of the Council

Councillor R V Smith – Cabinet Member for Education, Improvement, Learning & Skills

Officer(s)

Adrian Chard

Strategic Human Resources and Organisational
Development Manager

Simon Cockings

Chief Auditor

Adam Hill

Deputy Chief Executive / Director of Resources

Chris Howell

Head of Waste Management

Tracey Meredith

Chief Legal Officer / Monitoring Officer

Jeremy Parkhouse

Democratic Services Officer

Brian Roles

Head of Education Planning and Resources

Ben Smith

Chief Finance Officer / Section 151 Officer

Also Present

Jason Garcia

Audit Wales

Apologies for Absence

Councillor O G James

36 Disclosures of Personal and Prejudicial Interests.

In accordance with the Code of Conduct adopted by the City and County of Swansea, the following interests were declared: -

Councillors P M Black, D W Helliwell, P R Hood-Williams, J W Jones, S Pritchard,

J A Raynor, L V Walton and T M White declared personal interests as school governors in Minute No.38 – Employment of Agency Staff Audit Report 2019/20 – Update.

37 Minutes.

Resolved that the Minutes of the Governance & Audit Committee meetings held on 24 August and 14 September 2021 be approved as a correct record.

38 Employment of Agency Staff Audit Report 2019/20 - 2021 Update. (Adrian Chard)

Adrian Chard, Strategic Human Resources and Organisational Development Manager, supported by Chris Howell, Head of Waste, Parks & Cleansing and Brian Roles, Head of Education Planning and Resources presented a 'for information' report on the actions arising from the Employment of Agency Staff Audit report.

Further to the report made to the Committee in June 2021, a progress update on a number of areas was provided, including the total number of Agency Workers engaged through the corporate contracted agencies (Staffline and RSD Social Care).

It was added that the total spend / cost of Agency Workers for 2020/21 was £4,300,381. The largest total spend this year was with Staffline (circa £1.57 million) and RSD (circa £98,000). The figures provided also included provision for consultancy work, primarily in Social Services and the provision of the Welsh Government Social Care Bonus. It was explained that further analysis of these costs had identified small numbers of agency workers engaged via non-corporate contracted agencies.

The report updated the Committee on compliance, Social Services, Place and Education Directorate's feedback.

The Committee discussed the following in respect of Waste: -

- Staff support, particularly arrangements for staff returning to work from long periods of sickness;
- The daily pressures faced in the Waste, including the impact upon the service when a crew is absent and the need to employ agency workers as replacements to ensure service provision;
- The number of traineeships employed in Waste, how they are the main route to employment within Waste and the proposals to fill 30 additional posts in the service;
- How agency workers are employed during fluctuating periods of the work load, how seasonal contracts had not been very successful and the most effective method was to employ established agency workers;
- Previous investigations into establishing an internal jobs bank within the Authority and the practical problems / additional costs which would have to be overcome if a bank was established;
- The assurance provided by the report and the challenge to make future improvements;

- How the physically demanding nature of the roles within Waste meant that staff from other areas e.g. Cleansing, would find the roles too physically demanding;
- The training being provided to crews and the organising of a reserve list to ensure service provision;
- The critical nature of Waste and the continuous need for the service to be fluid, how sickness within the service had a direct affect upon residents and the huge progress made in Waste.

Councillor R C Stewart, Leader of the Council highlighted the extraordinary effort to maintain the service throughout the Covid 19 Pandemic and the continued pressures / impacts of the service provision. He referred to the fact that there had been a significant downward trend in the use of agency workers by Waste due to the Authority's policy of employing people, whilst also recognising that the service had to rely upon agency workers to maintain services.

The Committee discussed the following in respect of Education: -

- Using percentage figures in future to provide a realistic picture;
- Agency worker provision within schools and outside schools, e.g. Pupil Referral Unit, Additional Learning Needs Support, Home Tuition and Cleaning Services;
- The continued focus upon management within Education and how schools manage their own arrangements to employ qualified supply teachers to meet the needs of individual schools;
- The advantages of the supply agency framework;
- The difficulty in providing accurate agency workers figures from all the schools in the Authority and the assurance provided by having over 93% of schools using the framework;
- The total delegated schools budget of £167 million, the vast bulk of which was for staffing costs;
- The importance of the role of school governing bodies, ensuring value for money and the assurance provided by the Internal Audit / Scrutiny process.

Councillor R V Smith, Cabinet Member for Education, Improvement, Learning and Skills emphasised that the provision of agency workers as cover was a matter for each school. He added that the use of agency workers had changed and was still evolving and made reference to the up-skilling of individuals in schools to provide cover. He emphasised the need to ensure that staff were not removed from their duties to provide cover and highlighted the continued need to provide a professional service at all times.

The Chair commented that it was the aim of the Authority to reduce the overall numbers of agency workers used and highlighted the importance of management effectively managing sickness absence as a means to achieving this aim.

She added that Estyn inspections provided assurances in respect of schools. However, the suspension of these checks due to Covid 19 was the reason why additional assurance was being sought and emphasised the need to drive down agency worker numbers whilst recognising the challenges faced by the Council.

39 Scrutiny Annual Report 2020-21 & Scrutiny Work Programme. (For Information) (Councillor Peter Black - Chair of Scrutiny)

Councillor P M Black, Chair of the Scrutiny Programme Committee presented a report which supported the development of a strong relationship between Scrutiny and the Governance & Audit Committee by providing the recently published Scrutiny Annual Report 2020-21 and information about the current Scrutiny Work Programme.

It was noted that the Council had long recognised the relationship between Scrutiny and Audit and need for:

- mutual awareness and understanding of the each other's work;
- respective work plans to be coordinated to avoid duplication / gaps;
- clear mechanism for referral of issues, if necessary.

The importance of the following was highlighted:

- clarity between the core roles of both functions;
- regular conversations about Committees' work programmes, and responsibilities;
- a way to ensure that issues can be passed between Committees, avoiding duplication.

The actions already undertaken in this respect were listed and it was noted that the relationship benefitted from a number of Councillors sitting on both Committees. The Scrutiny Annual Report 2020-21 was provided at Appendix 1.

The Committee discussed the work followed by the Scrutiny Programme Committee and Scrutiny Performance Panels, particularly holding the Executive to account, the follow-up monitoring process and how Scrutiny was seeking to improve standards.

The Chair added that she would be attending the Scrutiny Programme Committee on 19 October 2021 to present the Governance & Audit Committee Annual Report 2020-21 & Committee Work Plan. She emphasised the importance of both Committees working together for clarity, mutual understanding and efficiency.

She requested that the Scrutiny Programme Committee Work Plan be included in the Governance & Audit Committee Work Plan report for all future Committee meetings.

40 Auditor General for Wales Review of Town Centre Regeneration. (For Information) (Ben Smith)

Ben Smith, Chief Finance / Section 151 Officer, presented 'for information' the Auditor General for Wales Review of Town Centre Regeneration report.

It was added that under the Local Government and Elections (Wales) Act 2021, principal council's had a duty to respond to the Auditor General's recommendations.

The report made a number of recommendations to local authorities and the Welsh Government. It was explained that following on from letters sent to each council by Audit Directors in June 2021 noting that councils' Governance and Audit Committee should formally consider all reports of external review bodies – principally; Audit Wales, Estyn and the Care Inspectorate Wales (CIW).

The requirements of the Auditor General were outlined as follows: -

“We expect each local authority to consider the findings of this review and our recommendations, and that its governance and audit committee receives this report and monitors its response to our recommendations in a timely way”.

The Committee commented upon the following: -

- The option of the report being referred to the Development and Regeneration Scrutiny Panel for further discussion;
- Additional Councillor training / guidance being provided in order for the issues raised to be dealt with appropriately;
- Reports available on the Audit Wales website;
- How it was the responsibility of the Authority to establish which reports required responses.

The Chair stated that she had been invited to a meeting with Officers scheduled for 21 October 2021 to further discuss the report and agree an appropriate way forward.

It was added that future progress would be monitored by the Development & Regeneration Scrutiny Panel.

41 Governance & Audit Committee Action Tracker Report. (For Information) (Jeremy Parkhouse)

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

The Chair noted that some actions remained outstanding, including the tracking of Audit Wales recommendations / consideration of how other local authorities managed and tracked the recommendations.

42 Governance & Audit Committee Work Plan. (For Information) (Jeremy Parkhouse)

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

The Chair added that the new areas of the Committee's work should be incorporated into the Work Plan before May 2022.

The meeting ended at 3.28 pm

Chair

Agenda Item 4



Report of the Chief Auditor

Governance & Audit Committee – 9 November 2021

Internal Audit Annual Plan 2020/21 Monitoring Report for the Period 1 July 2021 to 30 September 2021

Purpose:	This report shows the audits finalised and any other work undertaken by the Internal Audit Section during the period 1 July 2021 to 30 September 2021.
Policy Framework:	None.
Consultation:	Legal, Finance, Access to Services.
Report Author:	Simon Cockings
Finance Officer:	Ben Smith
Legal Officer:	Debbie Smith
Access to Services Officer:	Rhian Millar
For Information	

1. Introduction

- 1.1 The Internal Audit Annual Plan 2021/22 was approved by the Governance & Audit Committee on 9th March 2021. This is the second quarterly monitoring report to be presented to allow the Committee to review and comment upon the progress of the Internal Audit Section in achieving the Annual Plan.
- 1.2 This report shows the audits finalised in the period 1st July 2021 to 30th September 2021.
- 1.3 The Committee should be made aware that throughout this period the Internal Audit Function and the wider Authority have continued to adapt

to the unprecedented challenges as a result of the Covid-19 pandemic, which continues to impact every aspect of Council business and operations.

- 1.4 As reported in previous monitoring reports, due to the Covid-19 pandemic access to most council sites continues to be restricted. This has continued to have an impact on the Audit Team’s ability to complete some on-site testing throughout the second quarter.

2. Audits Finalised 1 July 2021 to 30 September 2021

- 2.1 A total of 19 audits were finalised during the quarter. The audits finalised are listed in Appendix 1 which also shows the level of assurance given at the end of the audit and the number of recommendations made and agreed. Appendix 2 provides a summary of the scope of the reviews finalised during the period.

- 2.2 An analysis of the assurance levels of the audits finalised is shown in the following table.

Assurance Level	High	Substantial	Moderate	Limited
Number	6	11	2	0

- 2.3 A total of 141 audit recommendations were made and management agreed to implement all of the recommendations, i.e. 100% of the recommendations made were accepted against a target of 95%.

- 2.4 All recommendations made are classified as high risk, medium risk, low risk or good practice. An analysis of the recommendations agreed during the quarter is shown in the following table

High Risk	Medium Risk	Low Risk	Good Practice	Total
3	23	82	33	141

- 2.5 The implementation status for those audits that have been subject to a standard follow-up in the quarter is reported separately in the Recommendation Follow-up Report. This includes all follow-ups completed, except for the fundamental audits as the outcome of these follow-up reviews is reported to committee via the Fundamental Audit Recommendation Tracker Report.

- 2.6 The Internal Audit Section also certified the following grants in the quarter as required by the terms and conditions of the grant issued by the Welsh Government.

Grant	Amount
Live Kilometre Support Grant 2019/20	£31k
Suresprung Transitional Employer Support Grant 2020/21	£78,748
ENABLE – Support for Independent Living Grant 2020/21	£301,646

- 2.7 The Audit Plan is a 'living' document which is likely to change during the course of the year due to e.g. emerging risks or new priorities. However it is important that the Committee can monitor progress against the plan approved at the start of the year. To achieve this, Appendix 3 shows each audit included in the Plan approved by Committee on the 9th March 2021 and identifies the position of each audit as at 30th September 2021.
- 2.8 As reported previously, due to the Covid-19 pandemic and as a result of the Council wide response to the advice issued by Central and Welsh Government, all Internal Audit staff have been working remotely from home since the end of March 2020. This continued to be the case throughout the quarter.
- 2.9 It must continue to be acknowledged that the measures introduced across the Council in response to the pandemic continues to have an impact on the team's ability to initiate and progress with some audits, due to the effect such measures have had across client departments.
- 2.10 However, with the success of the Covid-19 vaccination programme and the easing of some restrictions over the quarter, the audit team have been able to successfully undertake a number of site visits to complete on site testing where this has been deemed essential to the completion of the audit. Ongoing conditions continue to have an impact on the team's ability to progress with business as usual in some instances and the team has continued to work hard to undertake audit work remotely in the first instance.
- 2.11 An analysis of the details in Appendix 3 shows that as at 30/09/21, 39 audit activities from the 2021/22 audit plan had been completed to at least draft report stage (30%), with an additional 31 audits in progress (24%). As a result approximately 53% of the Audit Plan had either been completed or was in progress.
- 2.12 Two moderate reports were issued in the quarter. The following tables provide brief details of the significant issues which led to the moderate ratings.

Audit	Community Alarms Service 2021/22
Objectives	<p>The objectives of the audit were to ensure that material business risks have been identified and that the controls in place are adequate for the purpose of minimising business risk and are operating in practice.</p> <p>The audit reviewed the procedures in place and included detailed testing on the following areas:</p> <ul style="list-style-type: none"> • Expenditure • Purchase Cards • Income Collection & Recharges • Refunds and Cancellations • Stock • Service User Databases • Repairs, Maintenance & Service Resilience • GDPR & Data Retention
Assurance Level	Moderate
Summary of Key Points	
<p><u>Stock</u></p> <p>1. A review of stock reports revealed that items recorded in the 'To Be Investigated' category included 2,129 items with a total recorded value of £126,213. In addition, a total of 1,871 items with a value of £115,232 were recorded as being 'Missing in Action'. It was also noted that there were several hundred items in each report without a value assigned to them. (HR)</p> <p><u>Repairs, Maintenance and Service Resilience</u></p> <p>2. Due to the critical nature of the service, enquiries were made to determine whether knowledge of the hardware, software and administration of the service is held by more than one senior employee. It was found that this knowledge is only held by the Assistive Technology and Customer Services Operational Lead. We were advised that the service is undergoing a Commissioning Review and that changes relating to the management of the service are being considered as part of this review.(HR)</p> <p><u>GDPR & Data Retention</u></p> <p>3. Employees mandatory GDPR training, completion of the Manager's GDPR Checklist, and the retention of physical/electronic records were discussed with the Service Manager and the following was found:</p> <ul style="list-style-type: none"> a) Not all staff had completed the required training. (MR) b) A GDPR Manager's Checklist had not been completed for the service. (MR) 	

2.14

Audit	Community Equipment Service 2021/22
Objectives	<p>The objectives of the audit were to ensure that material business risks have been identified and that the controls in place are adequate for the purpose of minimising business risk and are operating in practice.</p> <p>The audit reviewed the procedures in place and included detailed testing on the following areas:</p> <ul style="list-style-type: none"> • Joint Working Arrangements • Expenditure • Purchase Cards • Stock of Equipment • Testing of Lifting Equipment • Vehicles • Inventory • Employees • Income (Vending Machine) • Petty Cash • Trustee Meetings / Charity Returns • GDPR / Data Retention
Assurance Level	Moderate
Summary of Key Points	
<p><u>Expenditure</u></p> <p>1. A sample of 20 payments made for the supply of goods or services was chosen and checked for compliance with the Council's Spending Restrictions, Contract Procedure Rules and Accounting Instructions. In 10 cases in our sample, cumulative purchases with the supplier exceeded £10,000, which is the threshold at which the Council's Contract Procedure Rules apply. In four of those cases contract award reports / waivers could not be located. (MR)</p> <p><u>Purchase Cards (P-Cards)</u></p> <p>2. Purchases made using a P-Card during the period April 2020 to March 2021 were reviewed and checked for compliance with the Council's Policy on the Use of Purchase Cards. It was noted that 22 P-Card transactions were not approved by a line manager within the Service, but by officers in the Service Centre in Finance.</p> <p><u>Stock of Equipment</u></p> <p>3. A report of the stock recorded on the Pro-Cloud system was provided. The Pro-Cloud stock control system has been introduced since the last audit of the service and a report on the category "Missing in Action" (MIA) was provided. It is thought that most of these items have not been returned by service users who no longer need them, or from service users who have passed away. The report for MIA included over 6,700 items with a total value of £2,035,000. It was also noted that over 800 of the 6,700 items were recorded in the report without a value assigned to them. (HR)</p>	

Testing of Lifting Equipment

4. Slings & hoists supplied by the service are legally required to be inspected on a six monthly basis under the Lifting Operations and Lifting Equipment Regulations 1998 (LOLER). A list of overdue inspections was provided, and we were advised that at one point during the Covid-19 pandemic there were over 400 overdue inspections. This figure had been reduced to 140 since the Covid restrictions had been relaxed. (MR)

GDPR & Data Retention

5. Employees mandatory GDPR training, completion of the Manager's GDPR Checklist, and the retention of physical/electronic records were discussed with the Service Manager and the following was found:
 - a) Not all staff had completed the required training. (MR)
 - b) A GDPR Manager's Checklist had not been completed for the service. (MR)

3. Follow Ups Completed 1 July 2021 to 30 September 2021

- 3.1 The follow up procedures operated by the Internal Audit Section include visits to any non-fundamental audits which received a moderate or limited level of assurance to confirm and test that action has been taken by management to address the concerns raised during the original audit.
- 3.2 The follow up visit is usually within 6 months of the final report being issued and includes testing to ensure that any high or medium risk recommendations have been implemented. Where agreed recommendations have not been implemented, this will be reported to the appropriate Head of Service (or Chair of the Governing Body in the case of schools) and the Chief Finance Officer (Section 151 Officer).
- 3.3 No moderate audit follow-ups were undertaken in the quarter. The follow-up of the Management of Absence audit had been scheduled to be completed in quarter two. However, following the update from the Head of Service Centre at the September Committee meeting and due to ongoing staffing pressures within the department, we have rescheduled the follow up to be completed in quarter four. This will also tie in with the further update to the committee from the Service Centre Manager in February 2022.
- 3.4 It should also be highlighted that as shown in Appendix 1, the fundamental audit of Employee Services Payroll was finalised in the quarter with a substantial level of assurance. This audit had previously been on a two-yearly audit cycle as a result of receiving a consistent high assurance rating. As a result of the latest audit, from 2021/22 this audit will return to an annual audit cycle.

4 Corporate Fraud Function Update

- 4.1 Audit Wales published a report in June 2019 giving an overview of the scale of fraud in the Welsh Public Sector, together with a description of counter-fraud arrangements across the Welsh Government, the NHS and Local Government. A further report was published in July 2020, which was based on a more extensive programme of field work, and identified a range of opportunities to improve on the current national position.
- 4.2 In response to the latest report, an action plan was compiled to address the areas of improvement that had been suggested by Audit Wales. The actions are currently being implemented as shown in the updated action plan that can be found in Appendix 4. Please note that the action plan has been updated as requested at the September committee meeting.

5 Integrated Assessment Implications

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

- 5.4 The completion of the Integrated Impact Assessment Screening revealed that:
- The Quarterly Internal Audit Monitoring Report has a low positive impact across all groups.
 - It has been subject to consultation with the Chief Finance & S151 Officer, Legal and Access to Services.
 - All Well-being of Future Generations Act considerations are positive and any risks identified are low.
 - The overall impact of the Quarterly Internal Audit Report is positive as it will support the Authority in its requirement to protect public funds.

6. Financial Implications

- 6.1 There are no financial implications associated with this report.

7. Legal Implications

- 7.1 There are no legal implications associated with this report.

Background Papers: Internal Audit Plan 2021/22

Appendices: Appendix 1 - Audits Finalised Q2 2021/22

Appendix 2 - Summary of Scope of Audits Finalised Q2 2021/22

Appendix 3 - Internal Audit Plan 2020/21 - Progress to 30/09/21

Appendix 4 - Fraud Function Action Plan Update – Progress to 30/09/21

MONITORING REPORT Q2 2021/22 - AUDITS FINALISED

Head of Service	Audit Title	Date Finalised	Assurance Level	Recommendations		
				Made	Agreed	Not Agreed
Building Services	Heol y Gors Depot - Estimating	17/08/21	High	0	0	0
Education Planning & Resources	Bishopston Comprehensive School	23/08/21	High	7	7	0
Education Planning & Resources	Bryn Tawe Comprehensive School	06/09/21	High	2	2	0
Education Planning & Resources	Pentrefhafod Comprehensive School	13/09/21	High	9	9	0
Financial Services & Service Centre	Capital Accounting 2021/22	21/09/21	High	0	0	0
Planning & City Regeneration	Rights of Way (Countryside Access Team)*	29/09/21	High	5	5	0
Highways & Transportation	Highways & Transportation - Tender and Evaluation*	15/07/21	Substantial	6	6	0
Education Planning & Resources	Pontarddulais Comprehensive School	23/08/21	Substantial	11	11	0
Highways & Transportation	Fleet Hire - Spot Hire	31/08/21	Substantial	7	7	0
Cultural Services	Glyn Vivian Art Gallery*	31/08/21	Substantial	11	11	0
Highways & Transportation	Clydach - Plant Hire	03/09/21	Substantial	7	7	0
Financial Services & Service Centre	Employee Services (Payroll) 2021/22	09/09/21	Substantial	11	11	0
Housing & Public Health	East Area District Housing Office (Morrison DHO)	10/09/21	Substantial	18	18	0
Adult Services	Learning Disability Recharges*	16/09/21	Substantial	7	7	0
Waste Management & Parks	Cleansing Operations	23/09/21	Substantial	7	7	0
Partnership & Achievement Service	Music Service*	30/09/21	Substantial	3	3	0
Planning & City Regeneration	Swansea Mobility Hire*	30/09/21	Substantial	4	4	0
Adult Services	Community Alarms Service	20/09/21	Moderate	9	9	0
Adult Services	Community Equipment Service	20/09/21	Moderate	17	17	0
			Total	141	141	0

*Audits completed from the 2020/21 audit plan

MONITORING REPORT Q2 2021/22 - SUMMARY OF SCOPE OF AUDITS FINALISED

Head of Service	Audit Title	Assurance Level	Audit Scope	Key Findings / Risks
Building Services	Heol y Gors Depot - Estimating	High	Monthly valuations and Jobs in Progress, Accruals, Estimates, Subcontractor payments, Subcontractor CIS Scheme, Monitoring, Variations to original estimate, Recharges.	None
Education Planning & Resources	Bishopston Comprehensive School	High	Governance, Management of Delegated Resources, Bank Reconciliations, Collection & Banking of Income, Unofficial Funds, Expenditure, Verification of Employees / Self Employment, Health & Safety, Inventory, Mini Bus Records, Computer Security & Data Protection, Authorisation of Free School Meals.	None
Education Planning & Resources	Bryn Tawe Comprehensive School	High	Governance, Management of Delegated Resources, Bank Reconciliations, Collection & Banking of Income, Unofficial Funds, Expenditure, Verification of Employees / Self Employment, Health & Safety, Inventory, Mini Bus Records, Computer Security & Data Protection, Authorisation of Free School Meals.	None
Education Planning & Resources	Pentrehafod Comprehensive School	High	Governance, Management of Delegated Resources, Bank Reconciliations, Collection & Banking of Income, Unofficial Funds, Expenditure, Verification of Employees / Self Employment, Health & Safety, Inventory, Mini Bus Records, Computer Security & Data Protection, Authorisation of Free School Meals.	None
Financial Services & Service Centre	Capital Accounting 2021/22	High	Recording of Assets including Policies, Movements and Classification, Valuation including Reconciliation, Title Deeds and Housing Stock, The review of the Authority's Capital Programme, Information Security.	None
Planning & City Regeneration	Rights of Way (Countryside Access Team)*	High	Expenditure, Purchase Cards, Cash / Credit Income, Grants, Inventory and Stock, Officers' Travelling Expenses, Personnel Records, Vehicle Records, GDPR & Data Retention	None
Highways & Transportation	Highways & Transportation - Tender and Evaluation*	Substantial	Tendering & Award, Interim Payments, Final Account, Monitoring and Records, Liquidation Damages.	Contract information was only available for two of the four NEC (industry standard) Short Contracts that we were advised were in place (MR). Final Certificates (expected for construction contracts showing cumulative payments and final account) were also not available for any of the contracts selected in the

MONITORING REPORT Q2 2021/22 - SUMMARY OF SCOPE OF AUDITS FINALISED

Education Planning & Resources	Pontarddulais Comprehensive School	Substantial	Governance, Management of Delegated Resources, Bank Reconciliations, Collection & Banking of Income, Unofficial Funds, Expenditure, Verification of Employees / Self Employment, Health & Safety, Inventory, Mini Bus Records, Computer Security & Data Protection, Authorisation of Free School Meals.	Repeated use of the non-order facility to process payments/invoices where no order had been created in advance. Repeated recommendation from previous audit (MR). Also a significant number of Low Risk / Good Practice Recommendations.
Highways & Transportation	Fleet Hire - Spot Hire	Substantial	Contract Hire: Procurement of vehicles, Payment of invoices, Maintenance of Operators Licence, Recharges made to services. Spot Hire: Vehicle Requests, Driver checks, Procurement of vehicles, Payment of invoices, Maintenance of Operators Licence, Recharges made to services, GDPR & Data Retention.	A sample of contract hire suppliers with a cumulative spend over £10k was reviewed. Testing found that that contracts or waivers were not in place for two suppliers. Repeat recommendation (MR). A sample of ten spot hires was selected and it was found that a check on the driving licence of individuals collecting the vehicles was not being carried out (MR). Sample testing of cumulative spend over £10k with spot hire suppliers revealed two suppliers that were on the National Procurement Service framework had been used but no contract award had been completed. Repeated recommendation

MONITORING REPORT Q2 2021/22 - SUMMARY OF SCOPE OF AUDITS FINALISED

Cultural Services	Glyn Vivian Art Gallery*	Substantial	<p><i>Expenditure – Oracle and Purchase Cards, Income Collection, Exhibitions, Gallery Shop, Workshops, Room Rental & Digital Images, Grants, Inventory, Stock Records, Accessions Register, Insurance, Petty Cash, Employee Records, Officers’ Travelling Expenses, Vehicle Records, Security and Health & Safety, GDPR.</i></p>	<p><i>It was confirmed with the Insurance Section and the Documentation Officer that all items in the Gallery are recorded on the current insurance policy. A yearly valuation is done on new acquisitions added to the collection. New items acquired after this time will be valued during the next annual check due to the cost of the valuation process. It was confirmed that if a high value ‘one-off’ item were to be acquired during the year then the Insurance Section would be informed immediately. However, it was found that the last full valuation of assets was undertaken nine years ago in 2012. (MR) Additional Low Risk and Good Practice recommendations also noted.</i></p>
Highways & Transportation	Clydach - Plant Hire	Substantial	<p><i>Procedures and Guidelines, Expenditure, Orders and Issue of Plant, Recharges, Security of Plan, Fuel</i></p>	<p><i>Testing of a sample of ten issues of Plant (four sourced externally, six from internal stock) was carried out to confirm that all had an authorised requisition. Of the six cases where plant had been sourced internally from stock, requisitions could not be found in two cases. Repeated recommendation (MR). Additional Low Risk and Good Practice recommendations also noted.</i></p>
Financial Services & Service Centre	Employee Services (Payroll) 2021/22	Substantial	<p><i>Procedures, Starters, Leavers, Overpayments, Deductions, Other Pay and Amendments, Occupational Sick Pay, Career Breaks, Pay Bandings, System Interfaces and Control Accounts, BACS Payments, Other Payments, Parameters, Business Continuity and Data Back Ups, Other, Covid Payments, GDPR.</i></p>	<p><i>A review of the BACS output reports run between July and November 2020 was undertaken to ensure the transmissions balanced to the Payment Summary Report and that adequate division of duties were in place. It was found that the approval for the Teachers’ BACS run for August 2020 had been overlooked and was not approved at the time the payment run took place. (MR) Additional Low Risk and Good Practice recommendations also noted.</i></p>

MONITORING REPORT Q2 2021/22 - SUMMARY OF SCOPE OF AUDITS FINALISED

Housing & Public Health	East Area District Housing Office (Morrison DHO)	Substantial	Lettings, End of Tenancies, Void Properties, Transfers, Mutual Exchanges, Decoration Allowance (Paint Packs), Security & Safety Arrangements/Inventory /Controlled Stationery, Inventory & Controlled Stationery, Miscellaneous Income, Estate Management, Expenditure, Purchase Cards (P-Card), Officers Expenses, Employee Records - Flexitime/Sickness/Annual Leave, GDPR and Record Retention	A sample of lettings was reviewed to confirm that they had been made in accordance with the Council's Policy. One tenancy agreement for a property at Caerphilly Avenue had not been signed by the Neighbourhood Officer. (MR). Additional Low Risk and Good Practice recommendations also
Adult Services	Learning Disability Recharges*	Substantial	Swansea Bay University Health Board recharges, Out of County recharges, Unpaid/disputed invoices, GDPR	A review of the approval of a sample of new and existing service users was undertaken to ensure that formal authorisation of care and funding had been received from SBUHB. It was found that i) a) A Funding Impact and Request Management document (FIRM) could not be located for two service users (MR) and, ii) Ratification Letters from SBUHB confirming the funding agreement could not be located for five service users (MR). It was also noted that the Manager's GDPR Checklist had not been completed by the Principal Officer Mental Health & Learning Disabilities and had not been returned to the Data Protection Officer (MR).
Waste Management & Parks	Cleansing Operations	Substantial	Employees, Vehicles, Expenditure, Stock, Income, Travel Expenses, Inventory, Purchase Card, GDPR.	Our enquiries revealed that an Inventory record of equipment belonging to the service was not being maintained. (MR). Additional Low Risk and Good Practice recommendations also noted.
Partnership & Achievement Service	Music Service*	Substantial	Expenditure, Assisted Instrument Purchase Scheme, Collection & Banking of Income, Inventory, Officers Travelling Expenses, Employee Records, GDPR & Data Retention.	The GDPR Manager's Checklist had not been completed and returned to the Data Protection Officer. The Head of Swansea Music Service had reviewed the requirements and is in the process of seeking advice on completion (MR). Additional Low Risk and Good Practice recommendations also noted.

MONITORING REPORT Q2 2021/22 - SUMMARY OF SCOPE OF AUDITS FINALISED

Planning & City Regeneration	Swansea Mobility Hire*	Substantial	<i>Expenditure, Purchase Cards, Income, Membership, Inventory, Petty Cash, Employees, Hire of Equipment, GDPR & Data Retention.</i>	<i>A review was carried out to check the procedures for the storage of cash, to confirm that any unbanked income was held in accordance with the Council's cash holding limits. Further enquiries revealed that it was not possible to have a division of duty between the collection and banking of income due to staffing levels at the site. We were informed that income records are forwarded to the City Centre project officer for an independent check to be performed, however testing revealed that these checks were not being undertaken (MR). Additional Low Risk and Good Practice recommendations also noted.</i>
Adult Services	Community Alarms Service	Moderate	<i>Expenditure, Purchase Cards, Income Collection & Recharges, Refunds and Cancellations, Stock, Service User Databases, Repairs, Maintenance & Service Resilience, GDPR & Data Retention</i>	<i>Please see the narrative in the body of the report.</i>
Adult Services	Community Equipment Service	Moderate	<i>Joint Working Arrangements, Expenditure, Purchase Cards, Stock of Equipment, Testing of Lifting Equipment, Vehicles, Inventory, Employees, Income (Vending Machine), Petty Cash, Trustee Meetings / Charity Returns, GDPR and Data Retention</i>	<i>Please see the narrative in the body of the report.</i>

Audit Title	Risk Rating	Status as at 30/09/2021	Corporate Priority	Days
Level 1 – Cross Cutting Reviews – Council Governance & Control				
Partnerships	Med/High	Draft Issued	Cross Cutting	15
Corporate Governance	Med/High	Allocated	Cross Cutting	15
General Data Protection Regulations	Med/High	In Progress	Cross Cutting	10
Corporate Performance Management	Med	Planned	Cross Cutting	15
Local Government and Elections (Wales) Bill	New	Allocated	Cross Cutting	10
FOI / SAR/ EIR Review	New	Allocated	Cross Cutting	15
Wellbeing of Future Generations Act	New	Allocated	Cross Cutting	10
Achieving Better Together – Recovery & Refocus	New	In Progress	Cross Cutting	10
Achieving Better Together – Transformation (inc. workforce strategy and savings delivery)	New	Planned	Cross Cutting	15
Assurance Framework	New	Allocated	Cross Cutting	20
Level 2 – Fundamental Systems - Section 151 Officer Assurance				
Financial Services & Service Centre				
Employee Services	Med/High	Final Issued	Section 151 Assurance	30
Pensions Admin	Med/High	Final Issued	Section 151 Assurance	20
Teachers Pensions	Med	Final Issued	Section 151 Assurance	15
Accounts Receivable	High	Planned	Section 151 Assurance	35
Business Rates (NNDR)	Med	Planned	Section 151 Assurance	20
Pension Fund Investments	Med/High	Final Issued	Section 151 Assurance	7
Housing Rents	Med	Allocated	Section 151 Assurance	20
Accounts Payable	Med	Allocated	Section 151 Assurance	35
Housing & Council Tax Benefit	Med/High	Allocated	Section 151 Assurance	40
Capital Accounting	Med	Final Issued	Section 151 Assurance	25
Level 3 – Service Level Audits – Other Assurance				
Education Planning & Resources				
Pentrehafod Comprehensive	Med	Final Issued	Education	10
Bishopston Comprehensive	Med	Final Issued	Education	10
Pontarddulais Comprehensive	Med	Final Issued	Education	10
Ysgol Gyfun Bryn Tawe	Med	Final Issued	Education	10
Ysgol Crug Glas	Med	Not Required	Education	4

School Funding & Information	Med/High	In Progress	Education	15
Catering & Cleaning HQ	Med	Planned	Education	10
SQuid School Income (thematic)	New	Allocated	Education	15
Primary School DBS (thematic)	New	Allocated	Education	15
Achievement & Partnership Service				
School Support Team	Low	In Progress	Education	15
Vulnerable Learner Service				
Behavioural Support Unit	Med/Low	In Progress	Education, Safeguarding & Poverty	20
Education Grants & Other				
Schools Annual Report	n/a	Final Issued	Education, Safeguarding & Poverty	3
Regional Consortia School Improvement Grant	n/a	In Progress	Education, Safeguarding & Poverty	15
Pupil Deprivation Grant	n/a	In Progress	Education, Safeguarding & Poverty	15
Child & Family Services				
Independent Agency Payments	High	Allocated	Safeguarding	10
Discretionary Payments	Med/High	Planned	Safeguarding	10
Nant-y-Felin Children's Home	Med	Allocated	Safeguarding	10
Grants & Contracts	Med/High	Allocated	Safeguarding	10
Adoption Allowances	Med/Low	Allocated	Safeguarding	10
Residential & Outdoor Centres	Med	Allocated	Safeguarding	10
Business Support Team – Child & Family	Med/Low	Allocated	Safeguarding	15
Swansea Children's Centre & Mayhill Family Centre	Med	Planned	Safeguarding	10
Adult Services				
Home Care	Med/High	Allocated	Safeguarding	10
Community Alarm Service	Med	Final Issued	Safeguarding	10
Integrated Community Equipment Service & Suresprung	High	Final Issued	Safeguarding	10
Suresprung Transitional Employer Support Grant	n/a	Final Issued	Safeguarding	5
CREST	Med	Allocated	Safeguarding	10
Supporting People Team – Regional Coordinator Grant	n/a	Final Issued	Safeguarding	3
Supporting People Grant	n/a	In Progress	Safeguarding	10
Enable Support for Independent Living Grant	n/a	In Progress	Safeguarding	10
Commissioning				

Early Intervention Services	Med	In Progress	Poverty	5
Tackling Poverty				
Welfare Rights Service	New	Final Issued	Poverty	10
Building Services				
Heol y Gors – Stores, Admin & Finance, Oracle T&L	Med/High	Planned	Economy & Infrastructure, Safeguarding	20
Heol y Gors – Estimating	Med	Final Issued	Economy & Infrastructure, Safeguarding	15
Day to Day Repairs / Maintenance Section	Med	Allocated	Economy & Infrastructure, Safeguarding	20
Property Services				
Energy Management	Med/Low	Not Required	Economy & Infrastructure	5
Waste Management & Parks				
Domestic Refuse Collection	Med	In Progress	Economy & Infrastructure, Resource & Biodiversity	10
Parks Central Operations – Tree Services Unit	Low	Planned	Economy & Infrastructure, Resource & Biodiversity	5
Cleansing inc. Parks Central Operations, Litter & Beaches	New	Final Issued	Economy & Infrastructure, Resource & Biodiversity	10
Highways & Transportation				
Concessionary Bus Fares	Med	Allocated	Economy & Infrastructure	5
Car Parks	Med/High	Final Issued	Economy & Infrastructure	20
Clydach Depot – Plant	Med	Final Issued	Economy & Infrastructure	10
CTU Fleet Hire / Spot Hire	Med	Final Issued	Economy & Infrastructure	10
Taxi Framework Contract	Med	In progress	Economy & Infrastructure	10
Live Kilometre Support Grant (G)	n/a	Final Issued	Economy & Infrastructure	5
Housing & Public Health				
Morrison DHO	Med	Final Issued	Poverty, Safeguarding	15
Sketty DHO	Med/Low	Final Issued	Poverty, Safeguarding	15
Neighbourhood Support Unit inc. CCTV	Med	Final Issued	Poverty, Safeguarding	7
Affordable Housing	Med	Final Issued	Poverty, Safeguarding	10
Application Controls – Flare System	Med	Allocated	Poverty, Safeguarding	5
Building Regulations	Med	Final Issued	Poverty, Safeguarding	15
Taxi Licencing	Med/Low	In Progress	Poverty, Safeguarding	10
Rechargeable Works	Med	Allocated	Poverty, Safeguarding	15
Cultural Services				
Outdoor Leisure	Med	In Progress	Economy & Infrastructure	15

Sports Development	Med/Low	Final Issued	Economy & Infrastructure	10
Swansea Museum	Med/Low	Allocated	Economy & Infrastructure	10
Central Library	Med	Planned	Economy & Infrastructure	15
Archives	Med/Low	In Progress	Economy & Infrastructure	15
Planning & City Regeneration				
Nature Conservation	Med	In Progress	Economy & Infrastructure, Resources & Biodiversity	10
Land Searches (was Land Charges)	Med	Final Issued	Economy & Infrastructure, Resources & Biodiversity	10
Communications & Marketing				
Civic Admin/Mayoral Service/Mansion House	Med	Allocated	Transformation & Council Development	10
Emergency Planning & Business Continuity	Med	Allocated	Transformation & Council Development	10
Risk Management	Med/High	Allocated	Transformation & Council Development	15
Financial Services & Service Centre				
Cashiers Office – CCI Reconciliation	Med/High	Allocated	Section 151 Assurance	5
Write-Off Requests	n/a	In Progress	Section 151 Assurance	5
Cashiers Write-off's	n/a	Final Issued	Section 151 Assurance	5
Bank Reconciliations	Med	Final Issued	Section 151 Assurance	10
School Bank Reconciliations	Med	Final Issued	Section 151 Assurance	15
Grants Receivable	Med/High	In Progress	Section 151 Assurance	15
Leasing	Med	Allocated	Section 151 Assurance	10
Income Tax – Self Employed	Med	In Progress	Section 151 Assurance	5
Construction Industry Tax Scheme	Med	Final Issued	Section 151 Assurance	10
Residential Care	High	In Progress	Section 151 Assurance, Safeguarding	25
Debt Recovery – Financial Services & Legal Recovery	High	In Progress	Section 151 Assurance, Safeguarding	25
Learning Disability Recharges	Med	Final Issued	Section 151 Assurance, Safeguarding	10
Adult Family Placements	Med	In Progress	Section 151 Assurance, Safeguarding	10
Employee Vetting (DBS)	High	Planned	Section 151 Assurance, Safeguarding	10
Purchase Card Transactions Monthly Review	Med	In Progress	Section 151 Assurance	10
Compliance with CIPFA Financial Management Code	New	Planned	Section 151 Assurance	10
Digital & Transformation				
ICT Administration inc. IT Assets	Med	Planned	Transformation & Future Council Development	15

Oracle Authorisation Limits	Med/High	Final Issued	Transformation & Future Council Development	10
Commercial Services				
Contracts Review – Education	New	Allocated	Section 151 Assurance	10
Chief Transformation Officer Audits				
Contact Centre – Client & Property Finance Payments	Med	Draft Issued	Transformation & Council Development	5
HR Policies	Low	Planned	Transformation & Council Development	10
Employment of Agency Staff	Med/High	Planned	Transformation & Council Development	10
Corporate Learning & Development Team	New	Allocated	Transformation & Council Development	5
Oracle Cloud	New	Planned	Transformation & Council Development	10
Post-Coronavirus pandemic review of Agile Working	New	Planned	Transformation & Council Development	10
Regional Broadband Grant	New	In Progress	Transformation & Council Development	5
Contract Audits				
Highways & Transportation – Business Case, Tendering & Evaluation	Med/High	Planned	Transformation & Council Development	15
CBS Control of Contracts	Med	Planned	Transformation & Council Development	15
Computer Audits				
File Controls	Med/High	Planned	Transformation & Council Development	5
ICT Data Storage	Med/High	Planned	Transformation & Council Development	5
Firewall Controls – Corporate & Education Network	Med	Planned	Transformation & Council Development	5
Internet Controls for Clients – Social Services	Med	In Progress	Transformation & Council Development	5
E-Commerce Controls	Med	In Progress	Transformation & Council Development	7
Disaster Recovery & Business Continuity	Med	Planned	Transformation & Council Development	10
Oracle Change Control	Med/High	Planned	Transformation & Council Development	5
Telephony System	Med	In Progress	Transformation & Council Development	5
Use of Idea - Data Matching NFI	n/a	In Progress	Section 151 Assurance	5
Projects & Special Investigations				
Unpresented Cheques	n/a	In Progress	Section 151 Assurance	5
NFI	n/a	Allocated	Section 151 Assurance	10
Galileo Management System	n/a	In Progress	Section 151 Assurance	5
Annual Plan & Annual Report	n/a	In Progress	Section 151 Assurance	5

Annual Consultation Exercise	n/a	Allocated	Section 151 Assurance	10
Health & Safety Group	n/a	Planned	Section 151 Assurance	3
Recommendation Tracker Exercise	n/a	In Progress	Section 151 Assurance	5
Follow-ups	n/a	In Progress	Section 151 Assurance	20
Miscellaneous Audits				
Western Bay Social Services Training Team	New	Draft Issued	Section 151 Assurance	5
City Deal Review Outcomes - Follow-up	New	Final Issued	Section 151 Assurance	5
Swansea Central Phase 1 Programme	New	Planned	Transformation & Council Development	5

Cross Cutting Audits – 135 days

Section 151 Officer Assurance – 515 days

Corporate Priorities

Safeguarding (Safeguarding People from Harm) – 433 days

Education (Improving Education and Skills) – 167 days

Economy & Infrastructure (Transforming our Economy and Infrastructure) – 230 days

Poverty (Tackling Poverty) – 160 days

Resources & Biodiversity (Maintaining and Enhancing Swansea’s Natural Resources and Biodiversity) – 45 days

Transformation & Council Development (Transformation and Future Council Development) – 197 days

Counter Fraud Action Plan Update

CFP2 No.	ROG No.	Question	Improvements identified	Action	Timescale / Responsible Officer	Progress Update as at 30/09/21
1		Does the top tier demonstrate a commitment to counter-fraud and provide the necessary leadership to fight fraud?				
1.1	R2	Do those charged with governance in the organisation promote a clear message in terms of having a zero tolerance of fraud?	It would be more effective for the CMT to take a proactive role in promoting the consequences of fraudulent behaviour within their service areas	Add to PFM meetings as well as 151 Officer bringing regular update as part of the agenda for CMT - Finance update.	Immediate effect CMT	Chief Finance & S151 Officer to include fraud matters in updates to CMT and to ask CMT to include fraud as a regular agenda item on PFM's. Fraud issues will also be highlighted at DMT as necessary.
1.2	R2	Does the organisation's senior leadership team and management actively promote the importance of a good anti-fraud culture?	SLT set a good tone from the top that fraud will not be tolerated, however they could take a more proactive role in actively promoting the message.	CMT will, through the reporting structure, identify areas where fraud has been identified and where appropriate promote through the various media channels and internally	Immediate effect CMT / Head of Communications and Marketing.	<p>Commentary on fraud work and overarching message in Chief Executive's Blog 25/06/21.</p> <p>Press release issued 07/07/21: Swansea - Council clamps down on fraud</p> <p>Press Coverage: 07/07/21 online Nation.Cymru 07/07/21 online Wales Online</p> <p>Corporate Fraud Function Annual Report 2020/21 presented to Governance and Audit Committee 13/07/21.</p> <p>14/07/21 Evening Post article published</p>

CFP2 No.	ROG No.	Question	Improvements identified	Action	Timescale / Responsible Officer	Progress Update as at 30/09/21
1.3	R6	Are all staff required to attend fraud and ethics awareness training so that roles and responsibilities are clear?	Fraud awareness training is not undertaken on an annual basis.	To consider how this could be introduced as an online e-learning package in collaboration with fraud Team.	Original: September 2021 Revised: December 2021 HR & OD Manger / Corporate Fraud Team	A Chard 26/05/21 – CMT approved additional resource for learning and development. A Chard to look for available fraud awareness training modules/ packages on the market to be agreed with Corporate Fraud before being introduced/ rolled out via training pool. 15/07/21 - Initial materials provided to Fraud Function for consideration and review but information provided was not suitable. Work ongoing to seek appropriate material.
2	Does the organisation have a suitable structure and sufficient skilled resources to prevent and detect fraud?					
2.5	R11	Does the organisation have an annual programme of proactive counter-fraud work (i.e. fraud prevention work) which covers the risks identified in the risk assessment with ring fenced days for proactive work to be undertaken?	There are no ring-fenced days for proactive work to be undertaken given the limited resources much of the work completed is reactive.	As part of developing the forward work programme that identifies proactive work this will be reviewed to see what proactive or how this can be included.	October 2021 Chief Auditor/ Corporate Fraud Team	The Corporate Fraud Function Plan for 2021/22 includes some priority areas for proactive work if time and resource allows. This will be considered throughout the year but is dependent on ongoing pressures within the function to deal with immediate urgent reactive work. NFI 2020 is proactive and is underway. Fraud Update Report is due to be presented in November 2021.
3	Does the organisation have a sound policy framework to support effective counter-fraud arrangements?					

CFP2 No.	ROG No.	Question	Improvements identified	Action	Timescale / Responsible Officer	Progress Update as at 30/09/21
3.1	R5	Does the organisation have a counter-fraud strategy in place to address identified risks which is communicated across the organisation and is overseen by those charged with governance?	It would be more effective to include fraud risk within the corporate risk register to ensure that the risk is highlighted and disseminated across the organisation	Corporate risk Register to be reviewed and risk added.	April 2021 Deputy Chief Executive / Chief Finance Officer	Fraud Risk has been added to the Corporate Risk Register. Completed
3.2	R2	Does the organisation have a code of conduct which sets out clearly for employees and contractors which behaviours are acceptable and unacceptable and includes a section for reporting and addressing conflicts of interests?	There is a limited reference to anti-fraud procedures in the Code of Conduct.	The code of conduct will be amended with a section included on Fraud.	Original: June 2021 Revised: December 2021 HR &OD Manager / CFT / Chris Williams	Anti-Fraud and Corruption Policy is being updated by Chief Auditor, Corporate Fraud Investigators and HROD and expanded to include further details on anti-fraud procedures – once finalised this can be referenced in an updated version of the Code of Conduct. Ongoing.
4	Does the organisation undertake an effective fraud risk assessment together with appropriate responses to emerging issues?					

CFP2 No.	ROG No.	Question	Improvements identified	Action	Timescale / Responsible Officer	Progress Update as at 30/09/21
4.1	R3	Does the organisation undertake a regular and comprehensive fraud risk assessment which is shared and discussed with the Board/Senior Management Team/Audit Committee?	Fraud risk is not assessed on a Senior Management Level as part of the Corporate Risk Register.	Corporate risk Register to be reviewed and risk added.	April 2021 Deputy Chief Executive / Chief Finance Officer/ Corporate Fraud Team	Fraud Risk has been added to the Corporate Risk Register. Annual Fraud Risk Assessment completed by Corporate Fraud Investigators included in the Fraud Function Annual Plan (March) reviewed by CMT and Audit Committee. Completed
4.2	R4	Does the organisation consider fraud risk as part of the overall risk management process?	The Council have not included fraud risk within the Corporate Risk Register which is overseen by the Senior Management Team	Corporate risk Register to be reviewed and risk added.	April 2021 Deputy Chief Executive / Chief Finance Officer/ Corporate Fraud Team	Fraud Risk has been added to the Corporate Risk Register. Annual Fraud Risk Assessment completed by Corporate Fraud Investigators included in the Fraud Function Annual Plan (March) reviewed by CMT and Audit Committee. Completed
5	Does the organisations internal control environment support effective arrangements for preventing and detecting fraud?					

CFP2 No.	ROG No.	Question	Improvements identified	Action	Timescale / Responsible Officer	Progress Update as at 30/09/21
5.2	R4	Does internal audit look at fraud risks and test controls designed to prevent and detect fraud as part of its annual programme of work?	There is no specific reference to fraud risk detection in the internal audit work programme	The current testing of controls does cover this but it is not specifically stated in the audit programme. All tests are designed to ensure controls are effective and hence preventing fraud.	Chief Auditor to consider this during the year.	<p>Drive to increase awareness of aspects of fraud within the Internal Audit Team by distribution of all relevant fraud bulletins and newsletters received by the Corporate Fraud Function as and when these are received.</p> <p>Audit staff encouraged to consider possible fraudulent activity when undertaking reviews.</p> <p>Fraud risk in specific areas highlighted by bulletins / newsletters received by Corporate Fraud is distributed to all audit team members and wider Council Officers as required.</p>
5.4	R12 / R13	Does the organisation regularly use data analysis/matching (outside NFI) to validate data and detect potentially fraudulent activity?	The Benefits team use Data Tank to establish any fraud risk. No other data analysis/ matching exercise is used.	Review of system to be undertaken and identify if any other analysis / matching would be beneficial	<p>Original: October 2021</p> <p>Revised: December 2021</p> <p>Chief Finance Officer</p>	To be completed.
6	Does the organisation have an appropriate response to fraud?					
6.1	R5	Does the organisation have an appropriate fraud response plan that is communicated to all staff which makes clear that all allegations of fraud will be investigated?	There is no specific fraud response plan in place at Swansea Council	Development and implementation plan to be developed mapped out details and timescales and any additional resource required to deliver a fraud response plan	<p>Original: August 2021</p> <p>Revised: December 2021</p> <p>Chief Auditor/ Corporate Fraud Team</p>	Currently being considered as part of the update of the Anti-Fraud and Corruption Policy and other policy and guidance documents.

CFP2 No.	ROG No.	Question	Improvements identified	Action	Timescale / Responsible Officer	Progress Update as at 30/09/21
6.2	R5	Does the organisation take action to ensure that allegations of fraud, including anonymous allegations are assessed in line with the fraud response plan?	No set policy in place about how the investigation will take place	Development and implementation plan to be produced mapping out details and timescales and any additional resource required to deliver a fraud response plan including investigation policy	Original: August 2021 Revised: December 2021 Chief Auditor / Chief Finance Officer/ Corporate Fraud Team	Currently being considered as part of the update of the Anti-Fraud and Corruption Policy and other policy and guidance documents.
6.3	R5	Does the organisation have documented procedures in place for conducting fraud investigations which follow proper professional practice?	The Council have no documented procedures in place for conducting fraud investigations which follow proper professional practice	Development and implementation plan to be produced mapping out details and timescales and any additional resource required to deliver investigation policy for conducting fraud investigations	Original: August 2021 Revised: December 2021 Chief Auditor / Chief Finance Officer/ Corporate Fraud Team	Currently being considered as part of the update of the Anti-Fraud and Corruption Policy and other policy and guidance documents.
6.4	R5	Does the organisation effectively investigate allegations of fraud in line with their procedures?	The Council have no documented procedures in place for conducting fraud investigations which follow proper professional practice	Development and implementation plan to be produced mapping out details and timescales and any additional resource required to deliver investigation policy for conducting fraud investigations	Original: August 2021 Revised: December 2021 Chief Auditor / Chief Finance Officer/ Corporate Fraud Team	Currently being considered as part of the update of the Anti-Fraud and Corruption Policy and other policy and guidance documents.

CFP2 No.	ROG No.	Question	Improvements identified	Action	Timescale / Responsible Officer	Progress Update as at 30/09/21
7	Does the organisation have proper reporting and scrutiny in place to ensure its counter-fraud culture and framework is operating effectively?					
7.3	R7	Does the organisation provide an appropriate level of information to an Audit Committee to enable it to discharge its duties in relation to counter-fraud?	The Audit Committee should take a more proactive role in helping to promote a good anti-fraud culture.	The audit committee and chair to be made aware of opportunities throughout the year	Ongoing Chief Auditor / Corporate Fraud Team	Corporate Fraud Function Annual Report 2020/21 presented to Governance and Audit Committee 13/07/21. 14/07/21 Evening Post article published Mid-year Counter-Fraud report has been added to the Governance and Audit Committee work plan, scheduled for November 2021.
Key to recommendation or question numbers:						
CFP2 = Counter Fraud Phase 2 Question Hierarchy Responses						
ROG = Raising Our Game – Tackling Fraud In Wales						

Agenda Item 5



Governance and Audit Committee – 9 November 2021

Response to the Community Equipment Stores & Community Alarms Service Audit Report 2021/22

Purpose:	To provide an update and response to the 2021/22 internal audit of Community Equipment Stores and the Community Alarms Service.
Report Author:	Helen St John (Head of Integrated Community Services)
Finance Officer:	Ben Smith
Legal Officer:	Debbie Smith
Access to Services Officer:	Rhian Millar
For Information	

Service response to the internal audits of Community Equipment Stores and the Community Alarms Service.

1. Introduction

- 1.1 As a result of internal audits on the Community Equipment Stores and Community Alarms service both were issued an assurance level of 'Moderate'
- 1.2 This report offers additional information and summary response on recommendations across both audits focusing specifically on the 2 x High Risk (HR); 4 x Medium Risk (MR).
- 1.3 An action plan covering all recommendations has been developed in response to the findings and responsibilities assigned for implementation and is appended to this report.

2. High Risk and Medium Risk Recommendations of Internal Audit – Additional Information and summary Service Response

- 2.1 High Risk Recommendation – Stock of Equipment:** Across both audits of Community Alarms and Community Equipment the recommendation was made to review and establish the reason for items of equipment classed as ‘missing in action’. The audits highlighted a need to scrutinise our in house stock control systems and apply more comprehensive controls and thresholds to our tracking of equipment not returned/collected as expected. This is to be taken forward as described in the appended action plan.

During 2020/21 35,000 individual pieces of equipment were delivered to people’s homes, residential care homes and satellite stores across hospital sites in the region. Community Alarms are in the homes/Sheltered accommodation of 4,500 clients across Swansea. This combined total offers some context for the figures provided within the audit report which identifies ‘MIA’ covering a period of 12 years.

If based on current levels of demand the total classed as ‘MIA’ would equate to approximately 1.6% of total community equipment provided for the same period. This level will be reviewed against more recent collection and recycling rates and a threshold established with partners for formal categorisation of non-returned items.

- 2.2 High Risk Recommendation – Service Resilience:** Within the Community Alarms audit report the current level of senior staffing within the service was highlighted. As explained in the action plan a current whole service restructure is underway with partners to address staffing levels across both Community Alarms and Community Equipment Services. In the interim a temporary senior officer has recently been employed within the community alarms service to support the digital switch over programme and wider service delivery.

- 2.3 Medium Risk Recommendation – GDPR Training & Compliance:** Across both Community Alarms and Community Equipment Service the employee training and managers GDPR checklist compliance was highlighted as an immediate action. As detailed in the action plan this is acknowledged by the service and will be completed as a matter of priority. Appropriate access to online training will be sought for non-office based staff and specific training support for the number of supported employees with learning disabilities, visual and/or hearing impairment within the service will be explored with colleagues in Training and employability Services.

- 2.4 Medium Risk Recommendation – Contract Procedure Rules:** Within the Community Equipment Service audit recommendations were made to align all purchases in accordance with contract procedure rules of the Council. As explained within the action plan the service is already reviewing all ‘specialist’ equipment not currently held within one of the 3 frameworks applicable to the pooled fund arrangements of the Community Equipment

Store. This work is ongoing and will provide the necessary assurance and monitoring of any specialist equipment purchases going forward.

The remaining medium risk recommendations around P-card approvals and equipment servicing within Community Equipment Service have been closed as detailed within the updated action plan.

3. Financial Implications

3.1 There are no financial implications other than those set out in the body of the report.

4. Legal Implications

4.1 There are no legal implications other than those set out in the body of the report.

Background Papers: None.

Appendices:

Appendix A - Updated Community Alarms Action Plan.

Appendix B - Updated Community Equipment Service Action Plan.

Appendix C - Integrated Impact Assessment Screening Form – Community Alarm Service.

Appendix D - Integrated Impact Assessment Screening Form – Community Equipment Service.

Classification of Audit Recommendations

Recommendation	Description
High Risk	Action by the client that we consider essential to ensure that the service / system is not exposed to major risks .
Medium Risk	Action by the client that we consider necessary to ensure that the service / system is not exposed to significant risks .
Low Risk	Action by the client that we consider advisable to ensure that the service / system is not exposed to minor risks .
Good Practice	Action by the client where we consider no risks exist but would result in better quality, value for money etc.

Audit Assurance Levels

Assurance Level	Basis	Description
High Assurance	Recommendations for ineffective controls affecting the material areas of the service are not High or Medium Risk. Any recommendations are mainly Good Practice with few Low Risk recommendations.	There is a sound system of internal control designed to achieve the system objectives and the controls are being consistently applied.
Substantial Assurance	Recommendations for ineffective controls affecting the material areas of the service are not High Risk. Occasional Medium Risk recommendations allowed provided all others are Low Risk or Good Practice.	There is a sound system of internal control but there is some scope for improvement as the ineffective controls may put the system objectives at risk.
Moderate Assurance	Recommendations for ineffective controls affecting the material areas of the service are at least Medium Risk.	The ineffective controls represent a significant risk to the achievement of system objectives.
Limited Assurance	Recommendations for ineffective controls affecting the material areas of the service are High Risk.	The ineffective controls represent unacceptable risk to the achievement of the system objectives.

Appendix A – Community Alarms Audit Action Plan Update

REPORT REF	RECOMMENDATION	CLASS (HR; MR; LR; GP)	AGREED ACTION/ COMMENTS	RESPONSIBILITY FOR IMPLEMENTATION	IMPLEMENTATION DATE
Expenditure					
2.1.1	A purchase order should be created before all goods and / or services are procured.	LR	Agreed - MMW to discuss further with finance to ensure processes are being followed.	MMW/DN	COMPLETED
Purchase Card					
2.2.1	All purchases should be approved by the cardholder's line manager.	LR	Agreed – this process should be followed as a matter of course.	DN/SP	COMPLETED
Stock					
2.4.3	A review should be undertaken to establish the reason that 4,000 items are classed as "Missing in Action" or "To be Investigated".	HR	<ul style="list-style-type: none"> TBI and MIA categories - these categories are currently being investigated, when resource is available. This will be an on-going task for the foreseeable. Procedures to be written with agreement from Lucy Friday (PO) on value of items to be investigated and the process for writing these items off. MMW to discuss further with CCS (software manufacturer) on the feasibility on moving an item from scrap into stock, if in future the item is returned to the service. Currently, items in MIA are able to be moved back into stock and will retain all of the stocks history. Once an item is scrapped (written off) this history disappears. 	MMW	16 th September 2021 - ongoing
2.4.6	Procedures should be reviewed to ensure low stock warnings on Pro-Cloud are monitored and actioned	LR	<ul style="list-style-type: none"> Low stock warnings are not currently a feature of our stock system. 	MMW	1 st December 2021

Appendix A – Community Alarms Audit Action Plan Update

REPORT REF	RECOMMENDATION	CLASS (HR; MR; LR; GP)	AGREED ACTION/ COMMENTS	RESPONSIBILITY FOR IMPLEMENTATION	IMPLEMENTATION DATE
	when the Stores & Warehouse Officer is absent.		<ul style="list-style-type: none"> MMW to contact CCS (software Co) to write a stock report to include stock warnings so that these can be easily monitored and actioned when the Stores & Warehouse Officer is absent. MMW to set up monitoring spreadsheet for top 30 items issued to ensure close stock monitoring in the interim. To be issues to HOS on a weekly basis. 		<p>(dependent on response from CCS)</p> <p>COMPLETED: Spreadsheet implemented 15th September 2021 and shared with HOS.</p>
Service User Databases					
Page 38 2.5.2	A weekly data reconciliation should be undertaken between the number of service users recorded on PNC8 and the number recorded on the ICL system.	LR	<ul style="list-style-type: none"> Due to lack of resource, a weekly reconciliation of both systems is unachievable at present. A monthly reconciliation is possible with the assistance of business support/finance. MMW to discuss further with Lucy Friday for assistance from Business support/Finance. 	MMW/DN/LF/SP	1 st November 2021 (dependent on resource availability)
Repairs, Maintenance & Service Resilience					
2.6.5	The knowledge and ability to manage and maintain this service should be shared between at least two senior officers.	HR	<p>The service is currently under review, however, at present, there is only one senior officer who is managing both the CES and CAS. This lack of Resource will be addressed as part of the commissioning review.</p> <p>Interim measure – Temporary Senior Officer recruited (October 21 – March 23) to</p>	LF	31 st March 2022

Appendix A – Community Alarms Audit Action Plan Update

REPORT REF	RECOMMENDATION	CLASS (HR; MR; LR; GP)	AGREED ACTION/ COMMENTS	RESPONSIBILITY FOR IMPLEMENTATION	IMPLEMENTATION DATE
			work alongside existing manager overseeing Community Alarms Service		
GDPR / Data Retention					
2.7.1a	All staff in the service should complete the mandatory GDPR training provided.	MR	<ul style="list-style-type: none"> Agreed, staff to complete asap. Supported employees – guidance to be sort from LF (some staff unable to read/write) Training schedule to be set up for staff who do not have access to Laptops (drivers, support drivers assistants and maintenance engineers) MMW to discuss further with the services Digital Business relations Officer for guidance to arrange for training laptops at the service to allow staff to complete mandatory training. 	MMW/AE/LF	1st December 2021
2.7.1b	All Service Manager's must complete a GDPR Manager's Checklist and return it to the Data Protection Officer.	MR	Checklist to be completed and sent back to Michael Powney/Kim Collis	MMW	COMPLETED
2.7.1c	It should be confirmed that all records are being held in accordance with the Council's official retention policy.	LR	MMW to confirm with Finance officer that all records are being held in accordance with the Council's official retention policy.	MMW/MR/SP	1 st January 2022

Classification of Audit Recommendations

Recommendation	Description
High Risk	Action by the client that we consider essential to ensure that the service / system is not exposed to major risks .
Medium Risk	Action by the client that we consider necessary to ensure that the service / system is not exposed to significant risks .
Low Risk	Action by the client that we consider advisable to ensure that the service / system is not exposed to minor risks .
Good Practice	Action by the client where we consider no risks exist but would result in better quality, value for money etc.

Audit Assurance Levels

Assurance Level	Basis	Description
High Assurance	Recommendations for ineffective controls affecting the material areas of the service are not High or Medium Risk. Any recommendations are mainly Good Practice with few Low Risk recommendations.	There is a sound system of internal control designed to achieve the system objectives and the controls are being consistently applied.
Substantial Assurance	Recommendations for ineffective controls affecting the material areas of the service are not High Risk. Occasional Medium Risk recommendations allowed provided all others are Low Risk or Good Practice.	There is a sound system of internal control but there is some scope for improvement as the ineffective controls may put the system objectives at risk.
Moderate Assurance	Recommendations for ineffective controls affecting the material areas of the service are at least Medium Risk.	The ineffective controls represent a significant risk to the achievement of system objectives.
Limited Assurance	Recommendations for ineffective controls affecting the material areas of the service are High Risk.	The ineffective controls represent unacceptable risk to the achievement of the system objectives.

Appendix B – Community Equipment Service Audit Action Plan Update

REPORT REF	RECOMMENDATION	CLASS (HR; MR; LR; GP)	AGREED ACTION/ COMMENTS	RESPONSIBILITY FOR IMPLEMENTATION	IMPLEMENTATION DATE
Expenditure					
2.2.3	All purchases should be made in accordance with the Council's Contract Procedure Rules.	MR	<p>Our service is jointly funded via a S33 agreement between Swansea Council, Neath Port Talbot Borough County Council and Swansea Bay University Health board. The equipment catalogue is agreed by all three partners, and specialist equipment is selected by the individual organisations. Therefore, in many cases, we are instructed where to purchase an item from.</p> <p>We have been working with Procurement to ensure there are contracts in place however this is an on-going project.</p> <p>There are plans to create a post and Admin/procurement officer in the new structure whose main duty will be to ensure contracts are in place for all items purchased through our service.</p> <p>Our onsite Occupational Therapist is also working with therapists across the partnership to evaluate specialist products in order to reduce the number of companies we purchase specialist items from. This is on-going project, with our next evaluations taking place on slings in late September. The OT plans to carry out evaluations against all specialist products.</p>	MMW/GR Procurement	31 st March 22

Appendix B – Community Equipment Service Audit Action Plan Update

REPORT REF	RECOMMENDATION	CLASS (HR; MR; LR; GP)	AGREED ACTION/ COMMENTS	RESPONSIBILITY FOR IMPLEMENTATION	IMPLEMENTATION DATE
2.2.4	A purchase order must be created before all goods and / or services are procured.	LR	709486 – requested copy invoice from Civic Centre.	MMW	Implemented
Payment Cards (P-Cards)					
2.3.2	All payments made by P-Card must be approved by the cardholder's authorised line manager.	MR	All P-Card approvals are now being completed by the line manager in compliance with the Council's Policy on the Use of Purchase Cards.	MMW	Implemented
2.3.4	The gift vouchers should not be distributed to staff until the decision to approve this expenditure has been made by the Trustees of the fund.	LR	The service followed all the advice and gained the correct approvals before purchasing the gift cards. The cards are secure in a safe at Suresprung. Chris Davies is currently looking into this and will advise when approval has been granted by the Trustees.	MMW/CD/LF	1 st December 2021
2.3.5	A VAT receipt should always be requested at the time of purchase and the VAT shown reclaimed on the P-Card system.	LR	Agreed – VAT receipts will be requested at the time of purchase on P-Card System.	MMW/MR/JW	Completed
Stock of Equipment					
2.4.3	A full review should be undertaken to establish the reason the 6,700 items are classed as "Missing in Action".	HR	These are items that date back over 12 years and are items that have not been able to be located out in the community. There are various reasons why this may happen.	MMW/LF	16 th September 2021 – ongoing.

Appendix B – Community Equipment Service Audit Action Plan Update

REPORT REF	RECOMMENDATION	CLASS (HR; MR; LR; GP)	AGREED ACTION/ COMMENTS	RESPONSIBILITY FOR IMPLEMENTATION	IMPLEMENTATION DATE
			<ul style="list-style-type: none"> ○ Items are issued to clients in the community and in nursing homes and in many instances, are transferred from one patient to another, or to family members without informing the Community Equipment Service. ○ Items issued to Hospital satellite stores are not being correctly updated on the IT system i.e. an item issued against a client's record incorrectly, then the item isn't available for collection so is then recorded as MIA. ○ Very often these item will be returned from a completely separate service user due to the records being updated incorrectly. <p>MIA items and appropriate processes will be established within the service. This will be an on-going task and will be balanced against resource required and value/age of items.</p> <p>The new proposed business structure includes two additional admin staff whose duty will be to investigate items that are existing in MIA and newly returned items that need investigating.</p> <p>Clear procedures to be written with agreement from Lucy Friday (PO) on value of individual items to be investigated (threshold to be agreed) and the process for writing these items off.</p>		

Appendix B – Community Equipment Service Audit Action Plan Update

REPORT REF	RECOMMENDATION	CLASS (HR; MR; LR; GP)	AGREED ACTION/ COMMENTS	RESPONSIBILITY FOR IMPLEMENTATION	IMPLEMENTATION DATE
			MMW to discuss further with CCS (software manufacturer) on the feasibility on moving an item from scrap into stock, if in future the item is returned to service.		
2.4.4	Procedures should be reviewed to ensure low stock warnings on Pro- Cloud are monitored and actioned when the Stores & Warehouse Officer is absent.	LR	<ul style="list-style-type: none"> • Low stock warnings are not currently a feature of our stock system. • MMW to contact CCS (software Co) to write a stock report to include stock warnings so that these can be easily monitored and actioned when the Stores & Warehouse Officer is absent. • MMW to set up monitoring spreadsheet for top 30 items issued to ensure close stock monitoring in the interim. To be issued to HOS on a weekly basis. 	MMW	1 st December 2021 (dependent on response from CCS) COMPLETED: Spreadsheet implemented 15 th September 2021 and shared with HOS.
Page 44					
Servicing of Equipment					
2.5.2	All overdue inspections should be carried out as soon as possible.	MR	Due to the pandemic, some inspections were behind target primarily due to engineers unable to gain access to properties. The Loler team has been focussing on bringing all servicing up to date which is now complete.	JW/GW/RL	COMPLETED
Vehicles					
2.6.1	The central record of vehicle usage should be brought up to date.	LR	Agreed and to be actioned	MMW/SG	1 st November 2021

Appendix B – Community Equipment Service Audit Action Plan Update

REPORT REF	RECOMMENDATION	CLASS (HR; MR; LR; GP)	AGREED ACTION/ COMMENTS	RESPONSIBILITY FOR IMPLEMENTATION	IMPLEMENTATION DATE
2.6.3	The central records for fuel usage should be brought up to date.	LR	Agreed and to be actioned.	MMW/SG	1 st November 2021
2.6.4	The record of driver licence details should be brought up to date.	LR	Agreed and to be actioned	SG	1 st November 2021
Inventory					
2.7.1	A physical check of the Inventory should be carried out annually by an officer who is not responsible for maintaining the Inventory. An Inventory Certificate should then be completed.	LR	Agreed – Inventory Certificates to be readily available and checks to undertaken annually.	MMW	1 st November 2021
2.7.2	An official Disposal Form should be completed and authorised whenever items are disposed of.	LR	Disposal forms to be completed for all items written-off and authorised.	MR/MMW	1 st November 2021
2.7.3	A list of all equipment taken off-site should be maintained.	LR	Actioned and completed	MMW	16 th September 2021
GDPR / Data Retention					
2.12.1a	All eligible staff in the service must complete the mandatory GDPR training provided.	MR	<ul style="list-style-type: none"> Agreed, staff to complete asap. Supported employees – guidance to be sort from LF (some staff unable to read/write) 	MMW/AE/LF	1 ST December 2021

Appendix B – Community Equipment Service Audit Action Plan Update

REPORT REF	RECOMMENDATION	CLASS (HR; MR; LR; GP)	AGREED ACTION/ COMMENTS	RESPONSIBILITY FOR IMPLEMENTATION	IMPLEMENTATION DATE
			<ul style="list-style-type: none"> • Training schedule to be set up for staff who do not have access to Laptops (drivers, support drivers assistants and maintenance engineers) • MMW to discuss further with the services Digital Business relations Officer for guidance to arrange for training laptops at the service to allow staff to complete mandatory training. 		
2.12.1b Page 46	All Service Manager's must complete a GDPR Manager's Checklist and return it to the Data Protection Officer.	MR	Checklist to be completed and sent back to Michael Powney/Kim Collis	MMW	COMPLETED
2.12.1c	It should be confirmed that all records are held in accordance with the Council's official retention policy.	LR	MMW to confirm with Finance officer that all records are being held in accordance with the Council's official retention policy.	MMW/MR/SP	1 ST January 2022

Integrated Impact Assessment Screening Form Appendix C

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

Which service area and directorate are you from?

Service Area: Adult Services

Directorate: People

Q1 (a) What are you screening for relevance?

- New and revised policies, practices or procedures
- Service review, re-organisation or service changes/reductions, which affect the wider community, service users and/or staff
- Efficiency or saving proposals
- Setting budget allocations for new financial year and strategic financial planning
- New project proposals affecting staff, communities or accessibility to the built environment, e.g., new construction work or adaptations to existing buildings, moving to on-line services, changing location
- Large Scale Public Events
- Local implementation of National Strategy/Plans/Legislation
- Strategic directive and intent, including those developed at Regional Partnership Boards and Public Services Board, which impact on a public bodies functions
- Medium to long term plans (for example, corporate plans, development plans, service delivery and improvement plans)
- Setting objectives (for example, well-being objectives, equality objectives, Welsh language strategy)
- Major procurement and commissioning decisions
- Decisions that affect the ability (including external partners) to offer Welsh language opportunities and services

(b) Please name and fully describe initiative here: Improvement to internal practices and procedures in response to the internal Audit of the Community Alarms Service 2021/22

Q2 What is the potential impact on the following: the impacts below could be positive (+) or negative (-)

	High Impact		Medium Impact		Low Impact		Needs further investigation
	+	-	+	-	+	-	
Children/young people (0-18)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Older people (50+)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any other age group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Future Generations (yet to be born)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Race (including refugees)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asylum seekers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gypsies & travellers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religion or (non-)belief	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual Orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gender reassignment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Welsh Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poverty/social exclusion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carers (inc. young carers)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community cohesion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marriage & civil partnership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pregnancy and maternity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q3 What involvement has taken place/will you undertake e.g. engagement/consultation/co-productive approaches?
Please provide details below – either of your activities or your reasons for not undertaking involvement**

The action plan from the internal audit of the Community Alarms service and resulting report presented to audit committee is to describe process/system improvements around stock control, staffing resilience and training programmes/systems to evidence GDPR compliance.

Q4 Have you considered the Well-being of Future Generations Act (Wales) 2015 in the development of this initiative:

- a) Overall does the initiative support our Corporate Plan’s Well-being Objectives when considered together?
Yes No
- b) Does the initiative consider maximising contribution to each of the seven national well-being goals?
Yes No
- c) Does the initiative apply each of the five ways of working?
Yes No
- d) Does the initiative meet the needs of the present without compromising the ability of future generations to meet their own needs?
Yes No

Q5 What is the potential risk of the initiative? (Consider the following impacts – equality, socio-economic, environmental, cultural, legal, financial, political, media, public perception etc...)

High risk

Medium risk

Low risk

Q6 Will this initiative have an impact (however minor) on any other Council service?

Yes No **If yes, please provide details below**

System and process improvements as recommended following the audit will naturally benefit the ongoing sustainability and access to the service for wider Adult Services and Housing services who access community alarms provision.

Q7 What is the cumulative impact of this proposal on people and/or communities when considering all the impacts identified within the screening and any other key decisions affecting similar groups/ service users made by the organisation?

(You may need to discuss this with your Service Head or Cabinet Member to consider more widely if this proposal will affect certain groups/ communities more adversely because of other decisions the organisation is making. For example, financial impact/poverty, withdrawal of multiple services and whether this is disadvantaging the same groups, e.g., disabled people, older people, single parents (who are mainly women), etc.)

Integrated Impact Assessment Screening Form Appendix C

Minor impact as the recommendations largely focus on operational process and system improvements which have not to date had a negative impact on the service provision / service users. However, the recommendations and actions being taken forward will ensure a resilient staffing structure and clearer stock monitoring which will only help to ensure this good service is continued and sustained.

Outcome of Screening

Q8 Please describe the outcome of your screening below:

- **Summary of impacts identified and mitigation needed (Q2)**
- **Summary of involvement (Q3)**
- **WFG considerations (Q4)**
- **Any risks identified (Q5)**
- **Cumulative impact (Q7)**

The screening is for a set of actions that will improve the 'back office' systems and processes for the Community Alarms service. All actions will ensure that the current high level of service is maintained for our customers of the Community Alarms Service.

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

Full IIA to be completed

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

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

Screening completed by:
Name: Lucy Friday
Job title: PO Transformation
Date: 25.10.21
Approval by Head of Service:
Name: Helen St John
Position: Interim Head of Service Integrated Community Services
Date: 27.10.21

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

Integrated Impact Assessment Screening Form Appendix D

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

Which service area and directorate are you from?

Service Area: Adult Services

Directorate: People

Q1 (a) What are you screening for relevance?

- New and revised policies, practices or procedures
- Service review, re-organisation or service changes/reductions, which affect the wider community, service users and/or staff
- Efficiency or saving proposals
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- New project proposals affecting staff, communities or accessibility to the built environment, e.g., new construction work or adaptations to existing buildings, moving to on-line services, changing location
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- Local implementation of National Strategy/Plans/Legislation
- Strategic directive and intent, including those developed at Regional Partnership Boards and Public Services Board, which impact on a public bodies functions
- Medium to long term plans (for example, corporate plans, development plans, service delivery and improvement plans)
- Setting objectives (for example, well-being objectives, equality objectives, Welsh language strategy)
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(b) Please name and fully describe initiative here: Improvement to internal practices and procedures in response to the internal Audit of the Community Equipment Service 2021/22

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Older people (50+)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Future Generations (yet to be born)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Race (including refugees)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asylum seekers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gypsies & travellers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religion or (non-)belief	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual Orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gender reassignment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Welsh Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poverty/social exclusion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carers (inc. young carers)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community cohesion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marriage & civil partnership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pregnancy and maternity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Integrated Impact Assessment Screening Form Appendix D

- Q3 What involvement has taken place/will you undertake e.g. engagement/consultation/co-productive approaches?
Please provide details below – either of your activities or your reasons for not undertaking involvement**

The action plan from the internal audit of the Community Equipment service and resulting report presented to audit committee is to describe process/system improvements around stock control, equipment servicing, purchasing/contract procedures and training programmes/systems to evidence GDPR compliance.

- Q4 Have you considered the Well-being of Future Generations Act (Wales) 2015 in the development of this initiative:**

- a) Overall does the initiative support our Corporate Plan's Well-being Objectives when considered together?
Yes No
- b) Does the initiative consider maximising contribution to each of the seven national well-being goals?
Yes No
- c) Does the initiative apply each of the five ways of working?
Yes No
- d) Does the initiative meet the needs of the present without compromising the ability of future generations to meet their own needs?
Yes No

-
- Q5 What is the potential risk of the initiative? (Consider the following impacts – equality, socio-economic, environmental, cultural, legal, financial, political, media, public perception etc...)**

High risk

Medium risk

Low risk

-
- Q6 Will this initiative have an impact (however minor) on any other Council service?**

Yes

No

If yes, please provide details below

System and process improvements as recommended following the audit will naturally benefit the equipment service provision and functionality which will benefit wider Adult Services and integrated health services across the region.

-
- Q7 What is the cumulative impact of this proposal on people and/or communities when considering all the impacts identified within the screening and any other key decisions affecting similar groups/ service users made by the organisation?**

(You may need to discuss this with your Service Head or Cabinet Member to consider more widely if this proposal will affect certain groups/ communities more adversely because of other decisions the organisation is making. For example, financial impact/poverty, withdrawal of multiple services and whether this is disadvantaging the same groups, e.g., disabled people, older people, single parents (who are mainly women), etc.)

Integrated Impact Assessment Screening Form Appendix D

Minor impact as the recommendations largely focus on operational process, procurement and system improvements which have not to date had a negative impact on the service provision / service users. However, the recommendations and actions being taken forward will only help to ensure this good service is continued and sustained.

Outcome of Screening

Q8 Please describe the outcome of your screening below:

- **Summary of impacts identified and mitigation needed (Q2)**
- **Summary of involvement (Q3)**
- **WFG considerations (Q4)**
- **Any risks identified (Q5)**
- **Cumulative impact (Q7)**

The screening is for a set of actions that will improve the 'back office' systems and processes for the Community Equipment service. All actions will ensure that the current high level of service is maintained for our customers of the Community Equipment Service.

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

Full IIA to be completed

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

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

Screening completed by:
Name: Lucy Friday
Job title: PO Transformation
Date: 25.10.21
Approval by Head of Service:
Name: Helen St John
Position: Interim Head of Service Integrated Community Services
Date: 27.10.21

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

Agenda Item 6



Report of the Chief Auditor

Governance and Audit Committee – 9 November 2021

Internal Audit Recommendation Follow-Up Report Quarter 2 2021/22

Purpose:	This report provides committee with the status of the recommendations made in those audits where the follow-up's has been undertaken in Q2 2021/22, to allow the Governance and Audit Committee to monitor the implementation of recommendations made by Internal Audit.
Policy Framework:	None
Consultation:	Legal, Finance and Access to Services
Report Author:	Simon Cockings
Finance Officer:	Ben Smith
Legal Officer:	Debbie Smith
Access to Services Officer:	Rhian Millar
For Information	

1. Introduction

- 1.1 The Governance and Audit Committee's Performance Review for 2017/18 was completed in June 2018. One of the recommendations arising from the review was in relation to the tracking of the recommendations made by Internal and External Audit.
- 1.2 This report provides an overview of how recommendations made by Internal and External Audit are tracked and followed-up.

2. Standard Follow-up Procedures

- 2.1 An amended internal audit follow-up procedure was introduced in 2014 as a result of concerns being raised over the failure of management to implement audit recommendations.
- 2.2 The current procedures identify two methods of following-up on the implementation of recommendations made as a result of internal audit reviews for the fundamental audits and non-fundamental audits.

3. Fundamental Audits

- 3.1 These audits are undertaken on a yearly or two-yearly cycle. All fundamental audits are subject to a Recommendation Tracker Exercise each year, which is normally completed as at the end of September.
- 3.2 The exercise involves discussion with the client department to go through the agreed Action Plan together with a limited amount of testing to confirm whether the recommendations have been implemented.
- 3.3 The results of the Recommendation Tracker Exercise is reported to Governance and Audit Committee in a separate Recommendation Tracker report.

4. Non-fundamental Audits

- 4.1 All other audits that have been given a 'limited' or 'moderate' level of assurance are reported to Governance and Audit Committee as part of the Quarterly Monitoring Reports. All such audits are subject to a detailed follow-up visit within 6 months of the issue of the final report.
- 4.2 The follow-up visit concentrates on 'high risk' and 'medium risk' recommendations, and will include discussion with the client department and limited testing to confirm implementation.
- 4.3 The results of the follow-up visit are reported to Governance and Audit Committee as part of the Quarterly Monitoring Reports.
- 4.4 Where an audit has been given a 'high' or 'substantial' level of assurance, client departments are asked to confirm the implementation of the recommendations via e-mail.
- 4.5 The results of all follow-up's undertaken are logged and recorded on the Audit Management System (Galileo) to ensure completion is monitored appropriately.

5. External Audit Recommendation Tracking

- 5.1 Whilst it is not practicable to track every external audit recommendation without additional resources and a suitable ICT solution, Scrutiny

Programme Committee will receive WAO audit reports and action plans to address recommendations and proposals and will review progress against recommendations within 12 months of the receipt of the report and action plan as their work plan allows. Governance and Audit Committee will also receive reports and action plans for information and it may decide that it wants to prioritise and track specific proposals / recommendations in addition to the oversight undertaken by Scrutiny. This does not include those WAO reports that would be intended specifically for Governance and Audit Committee.

6. Status of Implementation Update to Committee

- 6.1 The purpose of this report is to allow committee to monitor the implementation status for those audits that have been subject to a follow-up review in the quarter. This will include all follow-ups completed, except for the fundamental audits as the outcome of these follow-up reviews are reported to committee separately.

7 Integrated Assessment Implications

- 7.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.
- Deliver better outcomes for those people who experience socio-economic disadvantage
- Consider opportunities for people to use the Welsh language
- Treat the Welsh language no less favourably than English.
- Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.

- 7.2 The Well-being of Future Generations (Wales) Act 2015 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.

- 7.3 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion,

carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.

7.4 The completion of the Integrated Impact Assessment Screening revealed that:

- The Quarterly Recommendation Tracker Report has a low positive impact across all groups.
- It has been subject to consultation with the Chief Finance & S151 Officer, Legal and Access to Services.
- All Well-being of Future Generations Act considerations are positive and any risks identified are low.
- The overall impact of the Quarterly Recommendation Tracker Report is positive as it will support the Authority in its requirement to protect public funds.

8. Financial Implications

8.1 There are no financial implications associated with this report.

9. Legal Implications

9.1 There are no legal implications associated with this report

Background Papers: None

Appendix 1 – Summary - Recommendations accepted and implemented.

Appendix 2 – Recommendations Not Implemented

RECOMMENDATION TRACKING REPORT Q2 2021/22

Audit Title	Date Final Issued	Date of Follow up	Assurance Rating	Recommendations								Total Recs Acc'd	Total Recs Imp'd	Total Rec Not Imp'd*	Comments
				HR		MR		LR		GP					
				A	I	A	I	A	I	A	I				
Primary Schools - Unofficial Fund Exercise	29/03/21	08/07/21	Substantial Assurance	0	0	1	1	7	7	1	1	9	9	0	
Youth Offending Service	25/03/21	08/07/21	Substantial Assurance	0	0	4	4	6	6	1	1	11	11	0	
Specialist Park Services (incl Singleton Nursery-Botanic)	05/08/20	08/09/21	High Assurance	0	0	0	0	3	3	0	0	3	3	0	
Building Control	18/05/21	09/09/21	High Assurance	0	0	0	0	1	1	5	5	6	6	0	
Corporate Performance Management	20/10/20	09/09/21	High Assurance	0	0	0	0	2	0	2	0	4	0	4	See Appendix 2
Parks Support & Tree Services	15/09/20	10/09/21	High Assurance	0	0	0	0	5	5	0	0	5	5	0	
Streetworks	26/04/21	21/09/2021	Substantial Assurance	0	0	1	1	4	4	2	2	7	7	0	
Tre Uchaf Primary	16/06/21	10/09/21	Substantial Assurance	0	0	1	1	8	8	2	2	11	11	0	
Civil Parking Enforcement	31/01/20	21/09/21	Substantial Assurance	0	0	2	2	7	7	3	3	12	12	0	
Leaving Care Act	16/06/20	11/01/21	Substantial Assurance	0	0	2	2	5	3	1	1	8	6	2	See Appendix 2
Brangwyn Hall	20/10/20	15/03/21	Substantial Assurance	0	0	1	1	10	6	1	1	12	8	4	See Appendix 2
Swansea Market	08/05/19	17/06/21	Substantial Assurance	0	0	3	2	6	4	5	5	14	11	3	See Appendix 2

RECOMMENDATION TRACKING REPORT Q2 2021/22

Primary Schools Procurement - Expenditure Exercise	24/09/20	19/12/20	Substantial Assurance	0	0	2	2	2	2	0	0	4	4	0	
												106	93	13	87.7%

*Further details on the recommendations that have not been implemented are reported in Appendix 2

Key

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

A - Accepted. **I** - Implemented

RECOMMENDATION TRACKING REPORT Q2 2021/22 - REC'S NOT IMPLEMENTED

Audit Title	Date Final Issued	Date of Follow up	Assurance Rating	Recommendations Not Implemented				
				Report Ref	Risk Rating	Agreed Imp. Date	Recommendation	Reason / Comments
Corporate Performance Management	20/10/20	09/09/21	High Assurance	2.4.1	LR	Mar-21	Audit Wales Report Recommendations: If the current monitoring arrangements are altered, a revised procedure should be agreed to ensure all Audit Wales reports are responded to by Service Departments in timely fashion.	Corporate Performance Manager (07/09/21). Monitoring arrangements for Audit Wales reports have not been altered but it's been agreed that the Council will seek to procure a new performance management application and funding has been set aside for this – we're about to receive demos from companies before pursuing the procurement. We want the new application to be able to track actions, including progress meeting auditor recommendations with an in built escalation mechanism. So, we're in the process of meeting the recommendations, which will be met once the application is procured and in place. I would expect that the application would be in place within a 14 month period.
				2.4.2	GP	Mar-21	Audit Wales Report Recommendations: A formal escalation procedure should be established to ensure a consistent process is used when required.	
				2.4.3	LR	Jun-21	Consideration should be given to the introduction of an ICT application to automate the tracking of all external report recommendations and corresponding actions.	
				2.5.3	GP	Jun-21	System Security & Resilience. A disaster recovery / business continuity protocol should be drafted to ensure the section continues to function effectively in the event of an unforeseeable incident.	

RECOMMENDATION TRACKING REPORT Q2 2021/22 - REC'S NOT IMPLEMENTED

Leaving Care Act	16/06/20	11/01/21	Substantial Assurance	2.1.1 b)	LR	Next Finance Commit'	Accommodation Payments: Satement Of Financial Affairs (SOFA) forms should be authorised on PARIS for all Accommodation Payments made.	Principal Officer (Adolescent and Young Peoples Services): There are two outstanding actions to address this which have been postponed due to pressures within the service as a result of Covid-19. Outstanding actions: 1) To create a process map. 2) To design a template for both parts of the service for the managers to complete their financial auditing. These are due to be completed by the end of October 2021.
				2.3.2	LR	Jul-21	Maintenance Payments: SOFA forms should be authorised on PARIS for all Maintenance Payments made.	
Page 60 Brangwyn Hall	20/10/20	15/03/21	Substantial Assurance	2.3.4 b)	LR	Oct-20	An independent check of invoices issued to production companies should be carried out.	Brangwyn Hall Manager: The Brangwyn Hall was only able to trade for 4 months last year. Where possible, changes were implemented. However due to the lack of any events, 2.3.4b, 2.7.1, 2.9.3 could not be implemented due to no events taking place. Events are due to resume from October 2021.
				2.7.1 b)	LR	Oct-20	Income should be banked promptly, in accordance with Accounting Instruction No. 8.	
				2.7.1 c)	LR	Oct-20	An independent reconciliation between income collected and banked should take place regularly.	
				2.9.3	LR	Oct-20	Audited accounts should be requested and compared to the financial information submitted by JR Events Promotions Ltd to ensure they are accurate.	

RECOMMENDATION TRACKING REPORT Q2 2021/22 - REC'S NOT IMPLEMENTED

Swansea Market	08/05/19	17/06/21	Substantial Assurance	2.4.1	LR	When lease agreed	All Tenancy Agreements issued to Market traders should be retained by the service and ensured that the documentation is signed and dated by the Tenants.	This will be completed once new lease negotiations have been completed. This has not been possible to undertake given COVID. The action had initially been postponed until July on the basis that the pandemic, which is ongoing, would be over. Will be completed shortly.
				2.4.3 b)	MR	When lease agreed	The correct agreement should be issued to the Tenant at Stall Number C1&2	
				2.4.3 c)	LR	When lease agreed	The Lease to be completed and signed in pen to ensure the document is legally binding.	

Page 11

Key

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

Agenda Item 7



Report of the Chief Auditor

Governance & Audit Committee – 9 November 2021

Fundamental Audits 2020/21 Recommendation Tracker

Purpose:	This report provides a summary of the recommendations made following the fundamental audits in 2020/21 and identifies whether the agreed recommendations have been implemented.
Policy Framework:	None
Consultation:	Legal, Finance, Access to Services
Report Author:	Simon Cockings
Finance Officer:	Ben Smith
Legal Officer:	Debbie Smith
Access to Services Officer:	Rhian Millar
For Information	

1. Introduction

- 1.1 The Internal Audit Section has defined follow up procedures which are designed to provide assurance that agreed recommendations have been implemented by management within the agreed timescales. For fundamental audits, a Recommendations Tracker exercise is completed each year where the auditor will review the actions taken to implement the agreed recommendations.
- 1.2 The fundamental audits are the systems which are so significant to the achievement of the Council's objectives that they are audited either annually or every two years.

- 1.3 The Recommendations Tracker identifies the actions agreed by management at the end of each fundamental audit and confirms whether the accepted recommendations have been implemented by the agreed date.
- 1.4 This report summarises the position as at 30th September 2021 on the implementation of the recommendations made following the 2020/21 fundamental audits.

2. Recommendations Tracker 2020/21

- 2.1 The following systems are considered to be fundamental and until 31 March 2014 were subject to an annual audit.
- Main Accounting System (2)
 - Fixed Assets (2)
 - Housing and Council Tax Benefit (2)
 - Council Tax (2)
 - NNDR (1)
 - Cash (2)
 - Accounts Payable (1)
 - Accounts Receivable (1)
 - External Investments and Borrowing (2)
 - Pension Fund Investments (2)
 - Employee Services (Payroll) (2)
 - Pensions Administration (2)
 - Teachers Pensions (2)
 - Housing Rents (2)
- 2.2 From 2014/15, a risk based approach was taken to determine the required frequency of fundamental audits. Any audits which had received the highest level of assurance for 3 consecutive years were moved to a 2 year cycle. The number of years between each audit is shown in brackets above and is subject to an annual review as part of the audit planning process. It should also be noted that following the completion of the 2020/21 fundamental audits, 11 out of the 14 audits have received a High Assurance rating, two audits have a substantial assurance rating (NNDR and Accounts Payable) and one has a moderate assurance rating (Accounts Receivable) as at the time of the last audit.
- 2.3 Appendix 1 shows, for each fundamental audit, the number of recommendations made following the 2020/21 audits and whether they have been implemented, partly implemented, not implemented or are not yet due.
- 2.4 The latest position on the 36 recommendations made is summarised in the following table:

Recommendations	Number	%
Implemented	25	70
Partly Implemented	3	8
Not Implemented	5	14
Not Yet Due	3	8
Total	36	100

- 2.5 Ignoring the recommendations which are not yet due for implementation, the percentage of recommendations implemented by 30th September 2021 is 76%.
- 2.5 An analysis of the 8 recommendations, which have been partly or not implemented over the classification of audit recommendations used by the Internal Audit Section, is attached in Appendix 2.
- 2.6 The Appendix shows that of the three recommendations that had been partly implemented, one was classed as high risk, one was classed as medium risk and one was classed as low risk. All of these recommendations are in relation to the Accounts Receivable audit. This audit continues to be completed on an annual basis and as a result the implementation of the outstanding recommendations will be reviewed as part of the 2021/22 audit. Note that the remaining five recommendations that had not been implemented were all classed as low risk and related to the Council Tax and Accounts Payable audits.
- 2.7 Further details on the recommendations which have been partly or not implemented can be found in Appendix 3.

3. Conclusion

- 3.1 Overall the results of the Recommendations Tracker exercise to the 30th September 2021 are positive with 25 (76%) of agreed recommendations due for implementation being implemented.
- 3.2 A small number of recommendations still require work to implement or are due for implementation prior to the end of the financial year. Progress on the implementation of these recommendations will be reviewed during the completion of the next audit.
- 3.3 The Accounts Receivable and the Accounts Payable fundamental audits are completed on an annual basis and the results of the current year audits will be reported to Committee in due course.

4. Integrated Assessment Implications

- 4.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.
- Deliver better outcomes for those people who experience socio-economic disadvantage
- Consider opportunities for people to use the Welsh language
- Treat the Welsh language no less favourably than English.
- Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.

4.2 The Well-being of Future Generations (Wales) Act 2015 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.

4.3 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.

4.4 The completion of the Integrated Impact Assessment Screening revealed that:

- The Fundamental Audit Recommendation Tracker Report has a low positive impact across all groups.
- It has been subject to consultation with the Chief Finance & S151 Officer, Legal and Access to Services.
- All Well-being of Future Generations Act considerations are positive and any risks identified are low.
- The overall impact of the Fundamental Audit Recommendation Tracker Report is positive as it will support the Authority in its requirement to protect public funds.

5. Financial Implications

5.1 There are no financial implications associated with this report.

6. Legal Implications

6.1 There are no legal implications associated with this report.

Background Papers: Fundamental Audit Reports 2020/21

Appendices: Appendix 1 – Implementation of Recommendations

Appendix 2 – Classification of Recommendations

Appendix 3 – Not or Partly Implemented Recommendations

**Fundamental Audits 2020/21
Implementation of Recommendations**

Audit	Recommendations				Total No. of Recs.
	Implemented	Partly Implemented	Not Implemented	Not Yet Due	
Fixed Assets (Capital Accounting)*	0	0	0	0	0
Main Accounting	1	0	0	0	1
Housing & Council Tax Benefit*	0	0	0	0	0
Cash	1	0	0	0	1
NNDR**	0	0	0	0	0
Council Tax	1	0	1	0	2
Accounts Receivable	14	3	0	0	17
Accounts Payable	5	0	4	3	12
Treasury Management - B&I	3	0	0	0	3
Pension Fund Investments*	0	0	0	0	0
Employee Services (Payroll)*	0	0	0	0	0
Pensions Admin*	0	0	0	0	0
Teachers Pensions*	0	0	0	0	0
Housing Rents*	0	0	0	0	0
Total	25	3	5	3	36

Fundamental Audits 2020/21
Classification of Recommendations

Audit	Partly Implemented				Not Implemented			
	HR	MR	LR	GP	HR	MR	LR	GP
Fixed Assets (Capital Accounting)*	0	0	0	0	0	0	0	0
Main Accounting	0	0	0	0	0	0	0	0
Housing & Council Tax Benefit*	0	0	0	0	0	0	0	0
Cash	0	0	0	0	0	0	0	0
NNDR**	0	0	0	0	0	0	0	0
Council Tax	0	0	0	0	0	0	1	0
Accounts Receivable	1	1	1	0	0	0	0	0
Accounts Payable	0	0	0	0	0	0	4	0
Treasury Management - B&I	0	0	0	0	0	0	0	0
Pension Fund Investments*	0	0	0	0	0	0	0	0
Employee Services (Payroll)*	0	0	0	0	0	0	0	0
Pensions Admin*	0	0	0	0	0	0	0	0
Teachers Pensions*	0	0	0	0	0	0	0	0
Housing Rents*	0	0	0	0	0	0	0	0
Total	1	1	1	0	0	0	5	0

* Audits not due in 2020/21

**Due in 2020/21 but unable to audit due to Covid-19

Key

HR - High Risk

MR - Medium Risk

LR - Low Risk

GP - Good Practice

Fundamental Audits 2020/21 - Recommendation Tracker
Not or Partly Implemented Recommendations

Report Ref	Recommendation	Class	Agreed Action/ Comments	Responsibility for Implementation	Implementation Date	Action Taken
Accounts Receivable						
Disputes						
2.2.5	Efforts should continue to be made to address invoices that have been classed as "Dispute". Income should be clawed back from a service if a "Dispute" is not resolved within six months.	LR	Old Dispute Review process will continue to be carried out periodically	MD/LB	Aug-21	Partly Implemented. Not yet completed due to prolonged phase of oracle project. Will be done asap.
Debt Recovery						
3.6.4	All invoices should be escalated on a timely basis in accordance with established protocols. Where debtors have not paid within the timescales allowed, a decision should be made on whether to refer each invoice to Legal, or write it off.	HR	The CM & AR Manager will continue to hold monthly Debt Recovery Activity meetings with AR Team Leader and Debt Recovery Officers. Targets and priorities will be regularly reviewed and set as part of this process until the outstanding debt backlog reduces to a manageable level and normal review processes can be recommenced (Dunning 2 list). Every effort will be made to review and progress debts to Legal Dept in as timely a manner as possible. Given the amount of backlog and the current restricted resource level on the team it is unrealistic to expect this to be completely achieved before the next audit review but it is hoped that a significant improvement can be seen.	MD/LB	Apr-22	Partly Implemented. Work in this area continues to be prioritised as part of the DRA meetings strategies

Fundamental Audits 2020/21 - Recommendation Tracker
Not or Partly Implemented Recommendations

3.6.8	The backlog of invoices should be addressed at the earliest opportunity. (Previous audit recommendation)	MR	As above	MD/LB	Apr-22	Partly Implemented. Work in this area continues to be prioritised as part of the DRA meetings strategies
Council Tax						
2.5.3	The Discount category reviews which were not carried out in 2019 should be undertaken as soon as is practically possible.	LR		Simon John/Martin Webborn	Mar-21	Not Implemented. In respect of the reviews, we could not achieve those by 31/3/21 as we didn't have the resources to manage it whilst working to get back on track with recovery which was all held up due to Covid. However, we are now in the middle of dealing with them.
Accounts Payable						
Duplicate and Erroneous Payments						
2.4.2	Errors and duplicates identified should be reported to, and monitored by, Management. (Previous Audit Recommendation)	LR	Agree – however NP needs to discuss with Sian Williams how this will be reported to Senior Management. Until resolved NP will review PCU Error Log on monthly basis and update SW.	Neil Payne	Jun-21	Not Implemented. Low risk, not prioritised due to workload of Oracle Cloud project.
2.4.7	b) Services should also be reminded that when placing an order that it is raised using the correct supplier.	LR	Agreed – Comms did get sent in 2019/20. Fusion project will cleanse supplier data reducing the risk of selecting incorrect supplier.	Neil Payne	Jul-21	Not Implemented. Low risk, not prioritised due to workload of Oracle Cloud project.
Interface Files						

Fundamental Audits 2020/21 - Recommendation Tracker
Not or Partly Implemented Recommendations

2.15.1a)	A signatory with the appropriate level of authorisation should submit interface files. Where this is not achievable, an officer with the appropriate authorisation limit should be copied into the email request.	LR	Agreed – need to establish new interface approval levels. NP to contact Ben Smith with proposed interface approval limits. I.e Foster Care – 1m, ABAUCS – 5m, Supporting People 1m	Neil Payne	Jul-21	Not Implemented. Interface approvals are being captured as part of Oracle Cloud project. Oracle Cloud is likely to be implemented in Oct22.
2.17.2	The Manager should maintain a record of training dates and ensure that all staff in the team complete the corporate GDPR training course every two years.	LR	Agree – NP to email the training team to obtain the training records of which staff have completed the GDPR course and remind staff who haven't completed it.	Neil Payne	Jun-21	Not Implemented. Low risk, not prioritised due to workload of Oracle Cloud project.



Report of the Chief Auditor

Governance and Audit Committee – 9 November 2021

Internal Audit Section – Corporate Fraud Function Mid-Year Update Report for 2021/2022

Purpose:	This report provides a mid-year update on the work undertaken by the Corporate Fraud Function in 2021/22.
Policy Framework:	None.
Consultation:	Access to Services, Finance, Legal.
Recommendation(s):	It is recommended that : 1) The Committee considers the mid-year progress made against the Corporate Fraud Function Anti-Fraud Plan set out in Appendix 1 and notes the outcomes achieved.
Report Authors:	Jonathon Rogers / Jeff Fish
Finance Officer:	Simon Cockings
Legal Officer:	Tracey Meredith
Access to Services Officer:	Rhian Millar

1. Introduction

- 1.1 The Anti-Fraud Plan for 2021/2022 was presented and approved at Governance and Audit Committee on 20th April 2021.
- 1.2 This report provides a summary of the activities of the Fraud Function for the first half of the year 2021/22 and reviews progress against the outcomes contained in the Fraud Function Anti-Fraud Plan 2021/2022.

2. Mid-Year Review of Outcomes against the Corporate Fraud Function Anti-Fraud Plan for 2020/21

- 2.1 Due to the Covid 19 pandemic, the team continues to operate largely remotely from home but have been able to continue to provide a full service during this period.
- 2.2 Good progress has been made against all eight planned activities contained within the Corporate Fraud Function plan and the team are on target to complete all activities by year end. Appendix 1 provides commentary against these activities.

- 2.3 As noted in the Annual Report for 2020/21, the teams' limited resources and the requirements of reactive work continue to impact the ability to be proactive in certain areas albeit the NFI exercise is considered a proactive exercise.
- 2.4 However, additional staffing resources have been recognised and a new proposed structure is under consideration.
- 2.5 Urgent employee investigations continue to be prioritised and time critical responses and actions are undertaken where Covid protocols allows.
- 2.6 The team continues to receive and evaluate a consistently high level of reports, and it is likely to surpass numbers in previous years.
- 2.7 The team continues to respond to high levels of data requests consistent with previous years.

3. Overview of Other Activities

- 3.1 The following is a brief overview of activities undertaken outside the remit of the Corporate Fraud Function Ant-fraud Plan 2021/22 to date.

3.2 Inter-Agency work and Data Exchange

- 3.2.1 During 2021/22 the team has continued to develop its role in inter-agency working and data exchange.
- 3.2.2 Staff have continued to lead regular meetings, and continued to shape the development of the Welsh Fraud Officers group.
- 3.2.3 Staff have also continued to attend regular online inter agency meetings with other government agencies tackling organised crime and sit on the Local Organised Crime Board.
- 3.2.4 The team are directly involved or assisting in with multi-agency investigations with the Police, DWP Organised Crime, NHS and Immigration.

3.3 Covid 19

- 3.3.1 As previously reported to Governance and Audit Committee, there were a number of emerging fraud risks associated with Covid 19 Grants that diverted significant resources of the team away from planned work in 2020/2021. Processes have now been developed to minimise the risk of fraud in these areas and these have now been adopted as business as usual. As a consequence the level of direct support required has reduced significantly.
- 3.3.2 Post event assurance on a pan Wales level has already commenced, and the large scale post event assurance exercise in relation to the payment of Business Support Grants has been incorporated into the NFI 2020 exercise.

4. Integrated Assessment Implications

- 4.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to: Page 73

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.
- Deliver better outcomes for those people who experience socio-economic disadvantage
- Consider opportunities for people to use the Welsh language
- Treat the Welsh language no less favourably than English.
- Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.

4.1.1 The Well-being of Future Generations (Wales) Act 2015 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the ‘well-being goals’.

4.1.2 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.

The IIA indicated that there are low impacts on any identified group and the Corporate Fraud Mid-Year Update Report applies equally to all. Public consultation and engagement is not required for the report. All Wellbeing and Future Generations Act considerations are positive and the risk identified is low. The overall impact of the report is positive, as it will support the Authority in its requirement to protect public funds. (See Appendix 2 for IIA)

5. Financial Implications

5.1 There are no financial implications associated with this report.

6. Legal Implications

6.1 The Accounts and Audit (Wales) Regulations 2014 require the maintenance of an adequate and effective system of internal audit of the Council’s accounting records and control systems. This is essential to the prevention and detection of fraud and corruption and is a key element of the Chief Finance Officer’s statutory duties as contained in section 151 of the Local Government Act 1972.

Background Papers: None

Appendices:

Appendix 1 – Mid-Year Review of the Corporate Fraud Function Anti-Fraud Plan for 2021/22

Appendix 2 – Integrated Impact Assessment

Appendix 1 – Mid- Year Review of the Corporate Fraud Function Anti-Fraud Plan for 2021/22

Activity	Detail	Target Outcomes	Outcomes Achieved
<p>1. Tackle social housing tenancy fraud</p>	<p>Continue to work in partnership the Housing Department and Legal Section to combat tenancy fraud: from unlawful subletting to bogus succession claims.</p>	<p>Raise awareness of the problem of social housing fraud and the damage that it does.</p> <p>Prevent the unlawful succession to social housing properties by people that do not have a right to succeed the tenancy</p> <p>Reduce the number of properties being unlawfully sub-let.</p> <p>Recover properties where tenancy fraud has been identified.</p> <p>Undertake criminal prosecutions & utilise Unlawful Profit Orders to recover any profit made by offenders, in accordance with the Prevention of Social Housing Fraud Act 2013 and/or the Fraud Act 2006.</p>	<p>Good progress - On target to be achieved.</p> <p>The team have continued to receive a number of referrals from the public and the Housing Department</p> <p>Full investigations have restarted</p>
<p>2. Tackle Council Tax fraud</p>	<p>Utilise internal and external Data Matching products to identify potential discrepancies in Single Person Discounts and other Council Tax discounts, disregards and exemptions.</p>	<p>Recover single person discounts 'incorrectly' claimed.</p> <p>Recover other disregards and discounts 'incorrectly' claimed.</p> <p>Identify cases of council tax evasion through non registration of liability and banding,</p>	<p>Good progress - On target to be achieved.</p> <p>Incorrectly claimed discounts and exemptions, have been identified via individual investigations and via internal & external data matching.</p>

Activity	Detail	Target Outcomes	Outcomes Achieved
3. Tackle Council Tax Reduction fraud	Continue to work with DWP's Counter Fraud Division in countering CTRS fraud.	Sharing information and expertise between the Fraud Function & DWP's Counter Fraud Division: <ul style="list-style-type: none"> • To ensure that the totality of welfare benefit and CTRS frauds tackled in the most efficient and effective manner. • To identify overpayments and excess reductions. • To take sanction action in appropriate cases. Administrative Penalties and prosecutions. 	Good progress - On target to be achieved. The team have continued to receive a number of referrals in this area and provided support. Full investigations have now recommenced including jointly with the DWP.
4. National Fraud Initiative(2020)	Participate in the biannual National Fraud Initiative coordinated by the Cabinet Office. Since	To ensure an appropriate number of matches are examined with particular reference high fraud risk matches To identify processes and procedures that need to be made more robust. To identify overpayments and excess reductions.	Good progress - On target to be achieved. It is anticipated that the NFI20 exercise will be completed in January 2022.

Activity	Detail	Target Outcomes	Outcomes Achieved
		To take appropriate action against offenders.	
5. Internal Employee Matters <ul style="list-style-type: none"> • Abuse of Position • Travel and subsistence • Flexi time/timekeeping • Other matters of misconduct/gross misconduct 	Continue to assist Human Resources & Organisational Development in conjunction with various client departments The Fraud Function will continue to work with internal departments and external organisations in order to undertake risk assessments, and gather intelligence and evidence to point towards or away from fraud and error.	Support disciplinary process Consider as appropriate criminal/civil proceedings. To take appropriate action against offenders Maintain the Council's good reputation	Good progress - On target to be achieved. Urgent employee investigations continue to be prioritised and time critical responses provided where Covid protocols allowed.
6. Tackle other internal and external fraud, examples includes: <ul style="list-style-type: none"> • Procurement fraud • Social Care (Direct Payments) • Blue badge • Income collection and banking • Grants • Payroll • Pensions • Etc. 	During 2021/22, the Fraud Function will continue to investigate various anomalies and referrals. The Fraud Function will continue to work with internal departments and external organisations in order to undertake risk assessments, and gather intelligence and evidence to point towards or away from fraud and error. Subject to available resources, the Fraud Function will consider and investigate any other frauds if it is in	Maintain public confidence by being 'transparent'. Identify fraud, error and overpayments. Assist in the recovery of 'losses', financial or otherwise.	Good progress - On target to be achieved. The team has considered all allegations received.

Activity	Detail	Target Outcomes	Outcomes Achieved
	the best interests of the Council and the public it serves.		
7. Raising Awareness	<p>Continue to raise awareness of the role of the Fraud Function both inside and outside the Council.</p> <p>The aim is to maintain reputation and to encourage the reporting of potential fraud in the belief that action will be taken.</p> <p>To work with HROD to develop bi-annual fraud awareness training for all employees.</p>	<p><u>Staff:</u></p> <ul style="list-style-type: none"> New – A guide to Corporate Fraud is included in Corporate Induction Training provided by Human Resources. Existing – Continue to develop and deliver training as and when required. <p><u>Members:</u> Continue to deliver presentations/ reports to the Audit Committee and other members as necessary.</p> <p><u>Public:</u> Continue to publicise activities, successes, and prosecutions.</p>	<p>Good progress - On target to be achieved</p> <p>The team continue to liaise with HROD on Corporate Induction Training</p> <p>Commentary on fraud work and an overarching message appeared the Chief Executive's Blog.</p> <p>A Press release was issued 7th July 2021: Swansea - Council clamps down on fraud</p> <p>Online press coverage appeared on 7th July 2021 in Nation.Cymru and Wales Online and an Evening Post article published 14th July 2021</p>
8. Policy and Procedure Developments	To work with nominated officers as prescribed in the Action Plan presented to Audit Committee 9 th March 2021 to deliver on the appropriate actions.	To produce the products in-line with the timetable contained within the Action Plan	Good progress - See Internal Audit Q2 Monitoring Report for commentary on progress.

Integrated Impact Assessment Screening Form Appendix 2

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

Which service area and directorate are you from?

Service Area: Resources

Directorate: Finance

Q1 (a) What are you screening for relevance?

- New and revised policies, practices or procedures
- Service review, re-organisation or service changes/reductions, which affect the wider community, service users and/or staff
- Efficiency or saving proposals
- Setting budget allocations for new financial year and strategic financial planning
- New project proposals affecting staff, communities or accessibility to the built environment, e.g., new construction work or adaptations to existing buildings, moving to on-line services, changing location
- Large Scale Public Events
- Local implementation of National Strategy/Plans/Legislation
- Strategic directive and intent, including those developed at Regional Partnership Boards and Public Services Board, which impact on a public bodies functions
- Medium to long term plans (for example, corporate plans, development plans, service delivery and improvement plans)
- Setting objectives (for example, well-being objectives, equality objectives, Welsh language strategy)
- Major procurement and commissioning decisions
- Decisions that affect the ability (including external partners) to offer Welsh language opportunities and services

(b) Please name and fully describe initiative here:

Corporate Fraud Function Mid-Year Update Report 2021/22. Progress of outcomes against the Annual Anti-Fraud Plan 2021/22

Q2 What is the potential impact on the following: the impacts below could be positive (+) or negative (-)

	High Impact		Medium Impact		Low Impact		Needs further investigation
	+	-	+	-	+	-	
Children/young people (0-18)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Older people (50+)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Any other age group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Future Generations (yet to be born)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Race (including refugees)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Asylum seekers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gypsies & travellers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Religion or (non-)belief	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sexual Orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gender reassignment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Welsh Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Poverty/social exclusion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Carers (inc. young carers)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Community cohesion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Marriage & civil partnership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pregnancy and maternity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Integrated Impact Assessment Screening Form Appendix 2

Q3 What involvement has taken place/will you undertake e.g. engagement/consultation/co-productive approaches?
Please provide details below – either of your activities or your reasons for not undertaking involvement

The Internal Audit Corporate Fraud Function Mid-Year Update Report is a financial and internal administration document that does not require engagement/consultation

Q4 Have you considered the Well-being of Future Generations Act (Wales) 2015 in the development of this initiative:

- a) Overall does the initiative support our Corporate Plan's Well-being Objectives when considered together?
Yes No
- b) Does the initiative consider maximising contribution to each of the seven national well-being goals?
Yes No
- c) Does the initiative apply each of the five ways of working?
Yes No
- d) Does the initiative meet the needs of the present without compromising the ability of future generations to meet their own needs?
Yes No

Q5 What is the potential risk of the initiative? (*Consider the following impacts – equality, socio-economic, environmental, cultural, legal, financial, political, media, public perception etc...*)

High risk

Medium risk

Low risk

Q6 Will this initiative have an impact (however minor) on any other Council service?

Yes No If yes, please provide details below

Q7 What is the cumulative impact of this proposal on people and/or communities when considering all the impacts identified within the screening and any other key decisions affecting similar groups/ service users made by the organisation?

The cumulative impact of the report is positive as it will support the Section 151 Officer and the Authority in its requirement to protect public funds and it will equally provide assurance

Outcome of Screening

Q8 Please describe the outcome of your screening below:

Integrated Impact Assessment Screening Form Appendix 2

There are low impacts on any identified group and the report applies equally to all. Public consultation and engagement is not required for the report. All WFG considerations are positive and the risk identified is low. The overall impact of the report is positive as it will support the Authority in its requirement to protect public funds.

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

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

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

Screening completed by:
Name: Jonathon Rogers
Job title: Corporate Fraud Investigator
Date: 20.10.21

Approval by Head of Service:
Name: Ben Smith
Position: Chief Finance Officer and Section 151 Officer
Date: 22.10.21

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

Agenda Item 9



Report of the Head of Communications & Marketing

Governance and Audit Committee – 9 November 2021

Corporate Risk Overview - Quarter 2 2021/22

Purpose: The report presents an overview of the status of Corporate Risk in the Council to provide assurance to the Committee that key risks are being managed in accordance with the Council's risk management policy and framework.

Report Author: Richard Rowlands

Finance Officer: Paul Roach

Legal Officer: Debbie Smith

Access to Services Officer: Rhian Millar / Catherine Window

For Information

1. Background

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

2. Corporate Risk: Quarter 2 2021/22

2.1 The following summarises the status of risks recorded in the Corporate Risk Register as at Quarter 2 2021/22

2.2 There were 6 Red status risks in the Corporate Risk Register as at the end of Q2 2021/22:

- Risk ID 153. Safeguarding.
- Risk ID 159. Financial Control: MTFP aspects of Sustainable Swansea.
- Risk ID 222. Digital, Data and Cybersecurity
- Risk ID 264. COVID-19
- Risk ID 274. COVID-19 Social Services
- Risk ID 296. Supply of construction materials.

- All of the Corporate risks were recorded as having been reviewed at least once during Quarter 2.
- No Corporate risks were deactivated.
- 1 risk was escalated from the Social Services Directorate Risk Register to the Corporate Risk register : Risk ID 274 - COVID 19 Social Services

2.3 The report at Appendix A includes the risks as at 30/09/21 recorded within the Council's Corporate Risk Register. The reports for each risk include the following information:

- *Risk title and description*...to summarize and describe the risk.
- *Risk Identification (ID) number*...to identify and search for the risk in the register.
- *Risk level*...Corporate level risks.
- *Responsible Officer*...the officer responsible for managing the risk.
- *Councillor*...the Councillor whose portfolio the risk relates to.
- *Last update*...when the risk was last updated in the risk register.
- *Historical RAG*...the level of risk assigned historically each month over a 12 month period (Red – High; Amber – Medium; Green – Low).
- *Current Control Measures*...live actions assigned to control or mitigate the level of risk. *Last update*...the date of the last time the Control Measure was updated in the risk register. *Risk response*...how the risk is controlled. *Projected Completion*...the date the Control Measure is expected to be implemented.
- *Closed Control Measures*...Control Measures that have been finalised, e.g. because they have been implemented. *Closure date*...date that Control Measures were closed.
- *Historical impact*...monthly assessment on the level of impact (1 = low; 5 = very high) should the risk come into effect. The graph shows the historical level of impact assigned each month over a 12 month period.
- *Historical likelihood*...monthly assessment on how likely the risk is to come into effect (1 = low; 5 = very high). The graph shows the historical level of likelihood assigned each month over a 12 month period.

3.0 Risk Workshop – Control Measures

- 3.1 Training specifically on Control Measures took place at Leadership Team (Directors, Heads of Service and some other senior managers) as planned on 25 May 2021.
- 3.2 A video based on this was created and uploaded, which is now directly accessible through the risk register along with all other videos provided on risk management and on using the risk register.
- 3.3 The video has also been signposted to all Directors, Heads of Service and responsible officers and reminders to review and revise control

measures in line with the training and video have also been issued each month since June.

- 3.4 The need for responsible officers to review their Control Measures was discussed and reinforced at Corporate Management Team in August and followed-up again in October.

4.0 Internal Control Environment and Risk Reporting

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

5.0 Integrated Assessment Implications

- 5.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.
- Deliver better outcomes for those people who experience socio-economic disadvantage
- Consider opportunities for people to use the Welsh language
- Treat the Welsh language no less favourably than English.
- Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.

- 5.1.1 The Well-being of Future Generations (Wales) Act 2015 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.

- 5.1.2 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.

5.1.3 This report is a 'for information' report and so is not relevant for an IIA.

6.0 Legal Implications

6.1 There are no legal implications.

7.0 Financial Implications

7.1 There are no financial implications.

For Information

Background papers: *None*

Appendices: Appendix A – Corporate Risks as at 30/09/21.

Risk on a Page

Risk Title : Pupil attainment and achievement

Risk ID : 94

Description : 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.

Risk Level : Corporate

Responsible Officer : Helen.Morgan-Rees

Councillor : Robert Smith

Last Update : 30/07/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
	AMBER	AMBER	AMBER		AMBER	AMBER				AMBER		

Page 86

Current Control Measures	Last Update	Risk Response	Projected Completion
Support Pupils To Return Safely To School In Sept 2020 Through The Health, Welfare & Community Education Stream Of The Councils Covid-19 Recovery Plan.	24/07/2020		14/09/2020
Offer Childcare In Schools During Term-Time To Key Workers And The Most Vulnerable Children During The Covid-19 Pandemic.	24/07/2020		14/09/2020
Ensure That Pupils Eligible For Free School Meals Benefit From The Offer Of A Fortnightly Bacs Payment Or Weekly Food Parcel During The Covid-19 Pandemic.	24/07/2020		14/09/2020
Further Enhance The Continuity Of Learning Programme.	16/07/2020		29/10/2020
Commitment To Invest In Education.	10/03/2020		31/12/2024
School Improvement Strategy And Partnership.	21/11/2019		31/12/2024
Attendance Strategy.	21/11/2019		31/12/2024
Strong Leadership Commitment To Influencing The Erw Agenda.	21/11/2019		31/12/2024
New Eotas Strategy & Programme.	21/11/2019		31/12/2024
Commissioning Review On Aln.	21/11/2019		31/12/2024

Current Control Measures	Last Update	Risk Response	Proposed Completion
Education Skills Co-Ordinator Appointed.	21/11/2019		31/12/2020
Dedicated Scrutiny Panel To Scrutinise Education Work And Performance.	21/11/2019		31/12/2024
Strong School Building Programme.	21/11/2019		31/12/2024
Renewed Focus Through The Child Protection Board On The Educational Achievement Of Lac.	21/11/2019		31/12/2024
Effective Partnership Working.	21/11/2019		31/12/2024
Good School-To-School Support.	21/11/2019		31/12/2024
Corporate Priority.	21/11/2019		31/12/2024
Positive Engagement And Support From Cabinet And Council.	21/11/2019		31/12/2024

Closed Control Measures	Closure Date
Schools Have Returned To Normal Operations From 12 April Onwards And Have Been Supported Well To Provide Onsite Teaching And Learning. However, Year Groups Are Still Asked To Self-Isolate Within This Reporting Period. In Order To Mitigate Against The Risk Of Insufficient Evidence To Determine Qualification Grades, Schools Have Contingency Measures To Offer Remote And Blended Learning Opportunities. Swansea Schools Have Been Under Pressure To Evidence And Assess Learner Attainment During A Difficult Covid-19 Period But Have Adapted Well To Put Learners First To Ensure They Get The Correct Grades.	30/07/2021
Professional Learning Networks Continue To Develop A Blended And Remote Learning Offer. Focus On Recovery Of Operations Is Being Developed Via Multi Agency Meetings And Networks. Loss Of Learning Due To Covid Will Be A Key Focus Of Recovery Plans.	14/05/2021
Phased Returns To Face To Face Learning Have Begun And Planning Work Is Refocussing To Recovery.	30/06/2021
{Historical Information Migrated} - Positive Engagement And Support From Cabinet And Council. √ Commitment To Invest In Education. √ Corporate Priority. √ Good School-To-School Support. √ Effective Partnership Working. √ School Improvement Strategy And Partnership. √ New Eotas Strategy & Programme. √ Attendance Strategy. √ Renewed Focus Through The Child Protection Board On The Educational Achievement Of Lac. √ Strong School Building Programme. √ Strong Leadership Commitment To Influencing The Erw Agenda. √ Commissioning Review On Aln. √ Dedicated Scrutiny Panel To Scrutinise Education Work And Performance. √ Education Skills Co-Ordinator Appointed.	01/01/2020
The Current Evidence Suggest That The Continuity Of Learning Plan In Swansea Is Working Well. There Is Evidence That Switching To Remote Learning Or A Blended Learning Offer Has Become Normalised. With Large Number Of Pupils Self-Isolating The Education Offer Has Been Adapted. When Pupils Are In School, Time Is Maximised To Enable Them To Understand How To Switch To A Different Type Of Teaching And Learning.	30/11/2020

Closed Control Measures

Appendix A

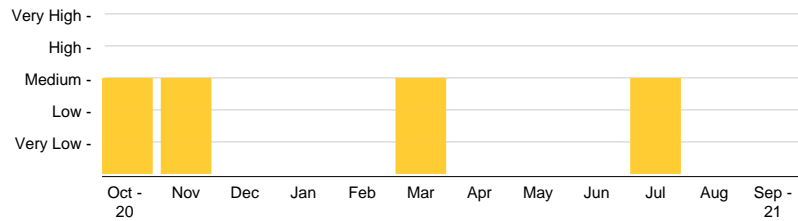
Since The Disruption To Education In March 2020, The Plans For A Safe Return To School Have Matured. As A Result, Around 88% Attendance Rate Seen In The First Three Weeks Of September. Although There A Shorter Term Disruptions For Schools, The Successful Return To Education Means That We Have Minimised Risk To Learning And Education. The Continuity Of Learning Plan And Policy Means That All Schools In Swansea Are Developing Remote Learning And Blended Learning Opportunities.

30/09/2020

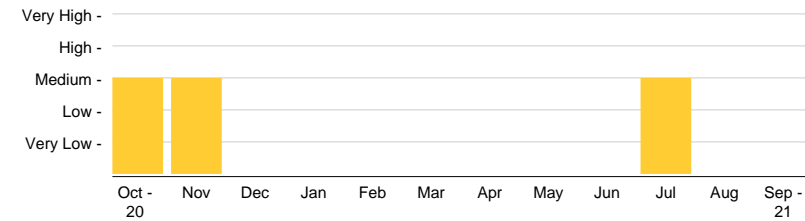
Offer A Safe Return To School For Learners During The Covid-19 Pandemic Through 'Check In, Catch-Up And Prepare' Sessions.

17/07/2020

Historical Impact :



Historical Likelihood :



Risk on a Page

Risk Title : Safeguarding

Risk ID : 153

Description : 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.

Risk Level : Corporate

Responsible Officer : David.Howes

Councillor : Mark Child

Last Update : 16/09/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
	RED	RED		RED	RED	RED	RED	RED	RED	RED	RED	RED

Current Control Measures

Emergency Planning Infrastructure Re-Established As Part Of The Regional Partnership Board, Safeguarding Board And Internally Within The Council To Ensure Prioritisation Of Resources Targeted At Maintaining Care And Support For Those Individuals In Most Critical Need Or At Risk Of Suffering Harm Reprioritise The Council;S The Councils Covid-19 Recovery Plan To Reflect The Impact Of The Third Wave Of Covid On Critical Services
Review Staffing Infrastructure Across The Directorate In Recognition Of A Critical Shortfall In Social Worker And Social Care Staff Capacity And Mitigate Where Possible By Increasing The Number Of Alternatively Qualified Staff

Last Update

16/09/2021

Risk Response

Treat

Projected Completion

31/03/2022

Page 89

Closed Control Measures

Closure Date

Establish And Maintain A Regional Protocol To Provide Secure Covid-19 Care Home Provision, Including Increased Capacity In The Councils In-House Care Homes.

31/08/2021

Reprioritise Workload To Focus On The Most Vulnerable People And Prioritise Services And Contact With Those Individuals During The Covid-19 Response.

31/08/2021

Provide Support To People Who Are At Greater Risk From Domestic Abuse During Covid-19

31/08/2021

Implement The Councils Covid-19 Recovery Plan To Recover Services And Help Deal With Emerging Risks From Covid-19.

16/09/2021

Provide Emotional And Well-Being Support To Children And Young People During Covid-19

31/08/2021

As Part Of A Wider Restructuring Of Adult Services, There Is Still A Plan To Re-Establish A Dedicated Safeguarding Team At The Front Door.

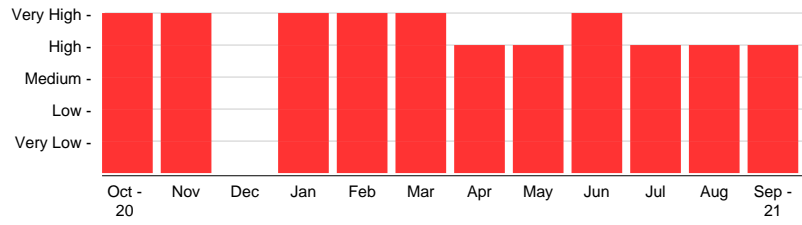
16/04/2021

Closed Control Measures

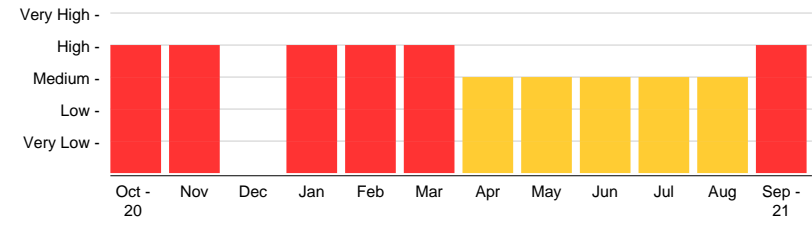
Appendix A

Provide Front-Line Social Care Staff With Ppe During Covid-19.	16/04/2021
Support And Shield Vulnerable People In The Community During Covid-19	16/04/2021
Subgroup Of The Corp. Safeguarding Board Reviewing Additional Safeguards That Can Be Implemented By The Hr Transactions Team.	16/04/2021
Action Plan Being Developed In Response To Recent Audit On Dbs Compliance In Schools.	16/04/2021
Children Services Are Planning To Further Enhance The Multi-Agency Front Door Team With A Dedicated Safeguarding Hub.	06/07/2020
Director Of Social Services To Advise Cabinet And Cmt On Options To Bolster Resilience Of The Workforce In Frontline Child Protection Teams	06/07/2020
¿ Sufficient Numbers Of Trained Adult And Children Services Staff. Principal Officers For Safeguarding Within Social Services	07/07/2020
¿ Corporate Safeguarding Policy And Group.	
¿ Strong Performance Monitoring And Reporting Arrangements.	
¿ Positive Engagement And Support From Cabinet And Council.	
¿ Mandatory Corporate Safeguarding Training In Place For Staff And Members.	
¿ Commitment To Invest In Social Care Is Strong.	
¿ Corporate Priority.	
¿ Regional And Multi-Agency Safeguarding Partnerships.	
¿ Safeguarding Leads Identified Across All Council Services	
¿ Separate Safeguarding Arrangements In Place In Schools, With A Central Education Safeguarding Officer Within The Main Local Authority Directorate	
¿ Two Dedicated Scrutiny Panels In Place To Scrutinize Social Services Work And Performance.	
¿ New And Revised Safeguarding Policy Following A Review Undertaken By The Safeguarding Pddc'	
Update (16/7/2019) - Children Services Have Completed The Restructure Of The Frontline Supported Care Planning Teams.	
First Phase Training For Staff In The Adult Services Practice Model Is Almost Complete.	
Multi Agency Monitoring Of Potential Safeguarding Referrals Is Now In Place At The Front Door Of Adult Services.	
A Process For The Regular Audit Of Safeguarding Cases Has Now Been Established Within Adult Services To Mirror The Equivalent Arrangements For Children Services.	
Update 20/9/19 - Some Concern About Diminished Capacity Within Frontline Child Protection Teams Due To High Levels Of Churn Within The Workforce.	
Update 10/10/19 - Additional Concern Identified Regarding The Operation Of Hr Transactions Processes In Relation To Dbs Checks And Some Other Employment Checks In Regulated Services.	
Update 19/11/19 - Cmt Have Agreed Action Plan To Stabilise Recruitment And Retention Of Frontline Children Services Staff	
Update 6/7/20 Safeguarding Arrangements And Resources Have Had To Be Remodelled To Ensure That This Key Priority Function Within Social Services Can Continue To Be Safely Delivered Despite The Restrictions Imposed As A Result Of Covid. The Planned Implementation Of The Multi Agency Safeguarding Hub Has Progressed Despite Covid And The Required Dedicated Safeguarding Team For Adults Has Been Included In The Modified Restructure Of Adult Services Required As A Result Of Covid.	

Historical Impact : **High**



Historical Likelihood : **High**



Risk on a Page

Risk Title : Tax evasion

Risk ID : 155

Description : If the Council fails to prevent those who act for or on its behalf from knowingly or unknowingly facilitating (including failing to prevent) tax evasion, then the Council will be criminally liable and will face an investigation by HMRC with potential prosecution and unlimited financial liability.

Risk Level : Corporate

Responsible Officer : Ben.Smith

Councillor : Robert Stewart

Last Update : 06/09/2021

Historical RAG :

Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN

Current Control Measures

External Vat Advisors Retained By Council For Specialist Vat Advice Under Contract

Last Update

Risk Response

Projected Completion

Vat Advice Available To Any Staff Via Principal Finance Partner. All Finance Staff Know To Refer Any Reports With Vat Implications Via The Nominated Vat Principal Finance Partner

21/06/2021

Treat

31/03/2022

Accounting Instruction 15 - Vat - Permanently Available Online

27/04/2021

Treat

31/03/2022

Vat Manual And Guide Available On Staffnet Permanently - Refreshed Annually As Needs Be

27/04/2021

Treat

31/03/2022

- ¿ Vat Manual, Guidance Notes And Accounting Instructions.
- ¿ Vat Advice Available Via Principal Finance Partner And External Vat Advisors.
- ¿ Financial Procedure Rules (Fprs) And Contract Procedure Rules (Cprs).
- ¿ Ir35 Guidance And Procedure Notes Available.
- ¿ Procurement Rules And Procedures.
- ¿ Segregation Of Duties.

27/04/2021

Treat

31/03/2022

Covid Disruption

27/04/2021

Tolerate

31/03/2022

Advice And Guidance Issued To Hos And Managers On 16/02/21 Regarding New Construction Industry Domestic Reverse Charge For Vat Reginme. In Order To Comply With New Legislation Coming In 1st March, We Are Requiring Review Of All Ongoing Procured Construction Services To Ensure The Correct Vat Treatment Is Being Applied. Where Cis Is Applicable, We Have A Statutory Obligation To Notify Suppliers Of Our End User Status So They Know Whether Or Not To Charge Us Vat

27/04/2021

Treat

31/03/2022

Closed Control Measures

Strong Personal Working Relationship Maintained With Hmrc Compliance Manager By S151 Officer (Corporate), Principal Finance Business Partner (Vat) And Service Centre Manager (Income Tax, Ni, Ir35, Self Employed Contractors Etc.)

21/06/2021

{Transfer Of Historical Information}

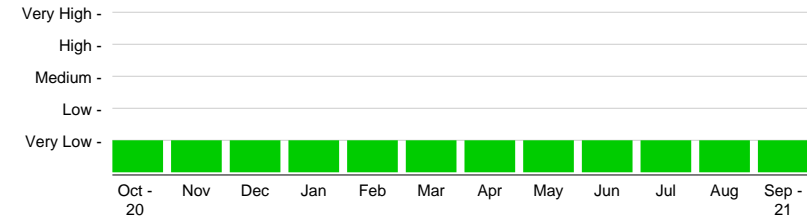
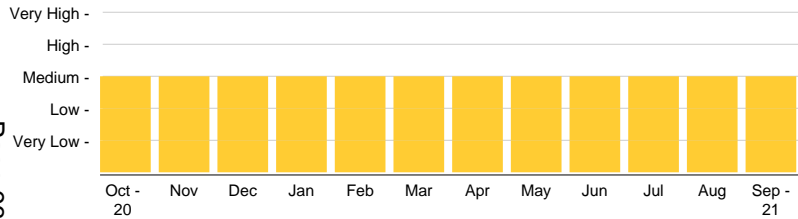
31/03/2020

- ¿ Vat Manual, Guidance Notes And Accounting Instructions.
- ¿ Vat Advice Available Via Principal Finance Partner And External Vat Advisors.
- ¿ Financial Procedure Rules (Fprs) And Contract Procedure Rules (Cprs).
- ¿ Ir35 Guidance And Procedure Notes Available.
- ¿ Procurement Rules And Procedures.
- ¿ Segregation Of Duties.

Historical Impact : Medium

Historical Likelihood : Very Low

Page 93



Risk on a Page

Risk Title : Financial Control - MTFP aspects of Sustainable Swansea

Risk ID : 159

Description : 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.

Risk Level : Corporate

Responsible Officer : Ben.Smith

Councillor : Robert Stewart

Last Update : 06/09/2021

Historical RAG :

Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
RED	RED	RED	RED	RED	RED	RED	RED	RED	RED	RED	RED

Current Control Measures

Pfm (Performance And Financial Management/Monitoring) Process Monthly Is Well Established And Understood By All Officers With Appropriate Escalation Mechanism To S151 Officer, Chief Executive And Cabinet If Non Compliance

Last Update

Risk Response

Projected Completion

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

27/04/2021

Treat

31/03/2022

Extant Spending Restrictions Published To All Staff And Reviewed And Many Controls Continue To Be Directly Exercised By Cmt In Relation To Filling Vacant Posts, Restructures, Regrades And Committing Contract Sums

27/04/2021

Treat

31/03/2022

Covid-19 Recovery Plan : Future Council - Finance - New Mtfp.

27/04/2021

Treat

31/03/2022

Covid Disruption

27/04/2021

Tolerate

31/03/2022

Closed Control Measures

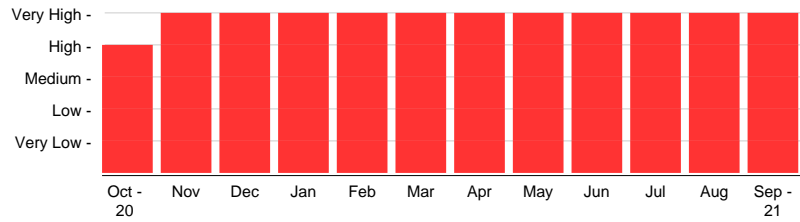
- ¿ An Agreed Plan And A Process For Corporate Level Monitoring In Place.
- ¿ An Agreed Budget.
- ¿ Clear Governance And Reporting In Place.
- ¿ Prevention Strategy.
- ¿ Regular Monthly Monitoring At P&Fms.
- ¿ Reporting, Monitoring And Review At Fstg.
- ¿ Audit Committee Providing Challenge, Oversight And Assurance.
- ¿ Collaborative Officer And Member Budget Setting Process In Place.

Closure Date

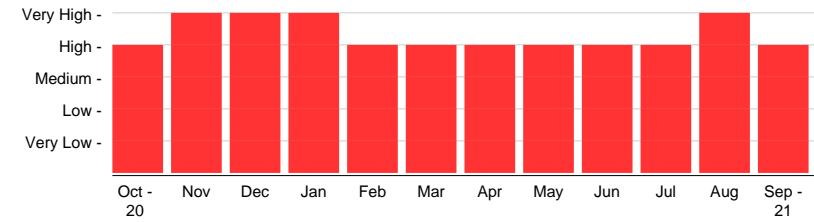
31/03/2020

- ¿ Launch Of Reshaping Board To Further Challenge Delivery/Mirigations For Non Delivery And Accelerate Timescale For Assuring Delivery
 - ¿ Mtfp.
 - ¿ Dedicated Scrutiny Service Improvement And Finance Performance Panel Consider And Scrutinise The Budget On A Quarterly Basis
- All The Above Refreshed For 2019-20 Budget Round Including Launch Of Zero Based Budget As Next Phase Of Sustainable Swansea

Historical Impact : Very High



Historical Likelihood : High



Risk on a Page

Appendix A

Risk Title : New Legislative and Statutory Changes

Risk ID : 180

Description : 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.

Risk Level : Corporate

Responsible Officer : Tracey.Meredith

Councillor : Robert Stewart

Last Update : 29/09/2021

Historical RAG :

Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER		AMBER	AMBER	AMBER

Current Control Measures

	Last Update	Risk Response	Projected Completion
Lobby Welsh Government To Streamline Legislative Requirements, Bureaucracy And Decision Making To Allow A Flexible And Rapid Response To And Recovery From Covid-19.	29/09/2021	Treat	31/07/2022
Legal Implications - Inserted Into Decision Making Reports With Legal And Access To Services Sign-Off.	29/09/2021	Treat	31/07/2022
Policy Briefing - Widely Circulated.	29/09/2021	Treat	31/07/2022
Prepare Action Plan For New Local Government And Elections (Wales) Bill.	29/09/2021	Treat	31/07/2022
Lawyers In Local Government Update On New Legislation, Consultation And Constitutional Matters - Circulated By Chief Legal Officer To Cmt On Regular Basis.	29/09/2021	Treat	31/07/2022

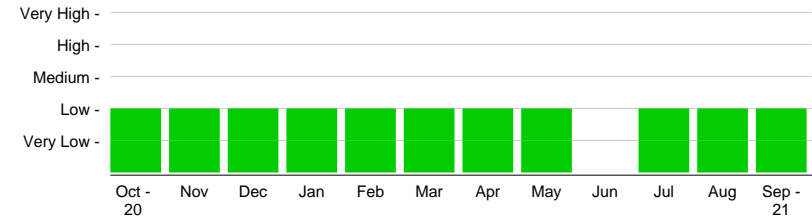
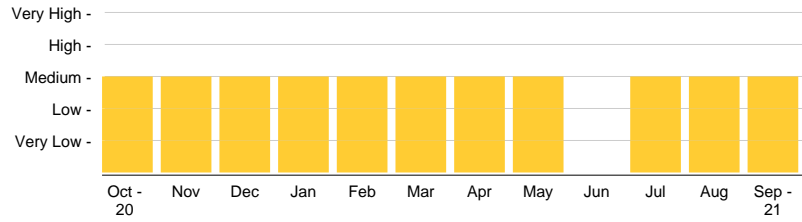
Closed Control Measures

	Closure Date
Legislative Requirements - Built Into Plans And Decision Making.	30/04/2021
Strategic Delivery Unit: Horizon Scan And Give Advice On Our Response To New Legislation And Other Major External Change. ¿ Legislative Duties And Legal Obligations Incorporated Into Reports To Committees And Decision Makers With All Reports Signed Off By Legal And Access To Services. ¿ Embedding Legislative Duties At The Earliest Stages Of Decision-Making Update ¿ Well Being Of Future Generations Guidance To Be Updated To Include Toolkit Which Will Be Referenced In Report Writing New Guidance.¿ Created A Web Page To Provide Information On Well-Being Of Future Generations And To Point Staff And Members To Welsh Government And Future Generation Commissioner Resources To Refer To And To Help Inform The Development Of Any Proposals / Reports At The Earliest Stage. Well Being Future Generations Webpage Updated. Cmt Updated By Monitoring Officer On Legislative Changes/Consultations In Wg From Llg Llg Changes To Legislation Circulated To Cmt No Further Update- Following The Publication Of The Local Government And Elections (Wales) Bill Cmt/Cabinet Awayday Were Presented With	28/06/2021

Contents Of The Bill For Consideration And Call To Evidence From Wg. Separate Risk To Be Considered For The Contents Of The Bill As It Goes Through Assembly.

Historical Impact : **Medium**

Historical Likelihood : **Low**



Risk on a Page

Risk Title : Workforce Strategy

Risk ID : 196

Description : If we do not have a robust workforce strategy in place, then we will not have staff with sufficient capacity and the right knowledge and skills to manage change, deliver transformed services and ensure statutory compliance.

Risk Level : Corporate

Responsible Officer : Sarah.Lackenby

Councillor : David Hopkins

Last Update : 23/08/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
	AMBER		AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER

Current Control Measures

Workforce Strategy For 2021-24 Being Developed To Incorporate Workforce Planning, For Consultation With Cmt And Cabinet In April/ May/ June In 2021.

Last Update

12/08/2021

Risk Response

Treat

Projected Completion

31/12/2021

Closed Control Measures

Workforce Planning

Closure Date

31/03/2021

Workforce Planning
 Corporate Plan
 Sustainable Development Principles Embedded In The Objectives
 Service Planning
 Gender Pay Gap And Project Plan
 Apprenticeship / Traineeships Strategy
 Organisational Development (Od) Strategy And Implementation Plan In Place
 Tracking And Monitoring Of Od Plan And Delivery
 New Reporting Through Revised Cmt/Cabinet Governance
 New Reporting Through Leadership Team

31/03/2021

Service Planning

31/03/2021

Gender Pay Gap And Project Plan

31/03/2021

Organisational Development (Od) Strategy And Implementation Plan In Place.

31/03/2021

Support Staff To Work Remotely At Home During Covid-19.

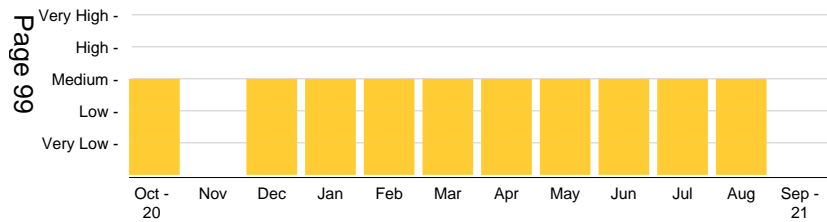
31/03/2021

Closed Control Measures

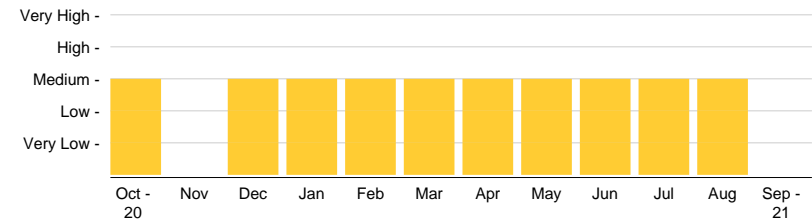
Appendix A

Tracking And Monitoring Of Od Plan And Delivery.	31/03/2021
Workforce Will Be A Key Strand Of The Future Council Workstream In The New Covid-19 Recovery Plan	31/03/2021
Support Staff Health And Well-Being During Covid-19.	31/03/2021
Reporting Through Leadership Team.	31/03/2021
Apprenticeship / Traineeships Strategy.	31/03/2021
Redeploy And Train Staff To Assist With The Covid-19 Response.	31/03/2021
Corporate Plan - Transformation & Future Council Objective.	31/03/2021

Historical Impact :



Historical Likelihood :



Risk on a Page

Risk Title : Digital, data and cyber security

Risk ID : 222

Description : CR86 -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.

Risk Level : Corporate

Responsible Officer : Sarah.Lackenby

Councillor : Andrew Stevens

Last Update : 21/09/2021

	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
Historical RAG :	AMBER	AMBER	AMBER	RED	RED	RED	RED	RED		RED	RED	RED

Current Control Measures

Page 100

	Last Update	Risk Response	Projected Completion
Bullwall Software Purchased To Protect Against Mallware Attacks.	21/09/2021	Treat	30/09/2021
Further Mitigation Includes Live Testing Of Dr Plan - Options Being Reviewed Potentially In Line With Wider Corporate Business Continuity Exercise.	21/09/2021	Treat	31/03/2022
Introduce Simulated Cyber-Attacks On Staff To Measure Their Actions, Identify Weaknesses And Improve Knowledge.	26/07/2021	Treat	30/12/2021

Closed Control Measures

Closure Date

Ms Security Compliance Licences To Be Procured Following Evaluation. This Will Enhance All Security Monitoring Across The Authority For All Users With Swansea Devices.	01/09/2021
Evaluating New Software To Further Support Existing Cyber Security Suite	26/07/2021
Digital Services Working With Internal Audit And Emergency Planning To Further Improve The Ict Disaster Recovery Plan.	01/04/2020
Lrf Cyber Exercise Planned And Revised Siro Training.	31/12/2020
Cyber Security Strategy Created And Ready For Engagement With Staff.	01/01/2021
New Regional Multi-Agency Cyber Cell Meetings Being Attended To Share Intelligence And Actions.	01/10/2019
Embarking On Cyber Essential And Cyber Essentials Plus Accreditation.	03/06/2019

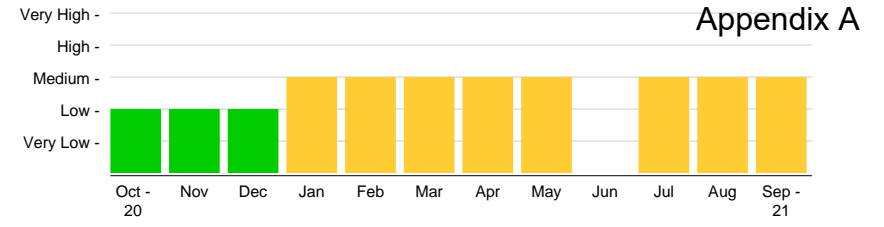
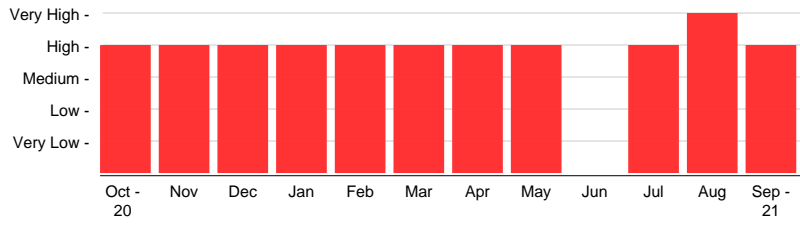
Closed Control Measures

Appendix A

	Closure Date
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.	01/06/2020
Ensure The Councils Covid-19 Recovery Plan Accounts For Increased Risks From Cyber Attacks And Data Fraud Arising From New Working Patterns And Reliance In Technology.	02/11/2020
Cyber Security During Covid Reviewed Alongside Cyber Security Advice From Warp And Psn Compliance, E.G. Use Of Zoom	30/04/2020
Cyber Essentials Accreditation Achieved.	31/10/2019
Psn Certification Achieved.	31/10/2019
Member Of The Cisp (Cyber Security Information Sharing Partnership) Which Is A Joint Industry And Government Initiative Set Up To Exchange Cyber Threat Information.	31/03/2020
Part Of The Wales Warp (Warning Advice And Reporting Point) To Share Cyber Threats And Defences With Other Public Bodies.	31/03/2020
Enhanced Security Layer Provided By Microsoft Office 365.	31/03/2020
Communications Issued To All Staff And Members Following Publication Of A Case Study Detailing The Impact Of A Cyber Attack At Another Council.	31/10/2019
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. Risk Added 27/03/18 Following Review Of Production Of Corporate Plan 2017/22 And Subsequent Review Of Corporate Risks. Supersedes Risk Cr66. Risk Revised 18/09/18 Following Attendance At A Cyber-Event With The Police And Receiving Information From The Wlga Regarding What Local Authorities Should Be Demonstrating As Basic Measures. Gdpr Project Complete Members Of Digital Services, Communications And Emergency Planning Attended A Cyber-Security Training Event With The Police Which Included Senior Officers From Various Local Authorities Interacting In An Event Of A Real Cyber Incident. Part Of The Wales Warp (Warning Advice And Reporting Point) To Share Cyber Threats And Defences With Other Public Bodies. Member Of The Cisp (Cyber Security Information Sharing Partnership) Which Is A Joint Industry And Government Initiative Set Up To Exchange Cyber Threat Information.	31/03/2020

Historical Impact : **High**

Historical Likelihood : **Medium**



Risk on a Page

Risk Title : Emergency Planning, Resilience and Business Continuity

Risk ID : 235

Description : If we do not have sufficient emergency planning, resilience and business continuity arrangements in place, then we will not be able to respond effectively in an emergency, provide the necessary civic leadership or continue to run vital services and ensure compliance with the legal requirements of the Civic Contingencies Act 2004 as a Category 1 Responder.

Risk Level : Corporate

Responsible Officer : Adam.Hill

Councillor : Andrew Stevens

Last Update : 30/09/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
	RED	RED	RED	RED	RED	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER

Current Control Measures

Last Update

Risk Response

Projected Completion

Page 103

Swansea As A Diverse Multicultural/Language Diverse Society, Requires Ready Access To Translators To Support Our Community By Effectively Communicating During An Emergency. To Improve Our Ability To Respond And Support The Community, A Language Survey And Request For Staff Volunteers Has Been Implemented And A Full Database Of Staff With Additional Language Skills Will Be Created And Held Confidentially By The Emergency Management Service	30/09/2021	Treat	31/01/2022
Establish Ems Radio System To Deal With Mobile Network Failure During Major Incident	30/09/2021	Treat	29/10/2021
New Service Delivery 21-22, To Develop Emergency Arrangements For Reservoir Inundation/Breach, Coal/Spoil Tip Landslide/Breach, Felindre Site, And Development Of Additional Rest Centres	27/05/2021	Treat	31/03/2022

Closed Control Measures

Closure Date

Tier 1 Comah Exercise Remotely Via Teams For Hse Legal Compliance, All Blue Light And Cat1 Partners Present	28/09/2021
Covid Compliant Rest Centre Training/Exercise With Brc And Police Planned	03/08/2021
Assistant Emo Post Job Evaluated Dpr For Cmt Approval 9th April For Sign Off And Recruitment	14/06/2021
Ems Staffing And Resilience	26/03/2021
Prepare For Further Covid-19 Or Other Infectious Disease Outbreaks.	26/03/2021

Closed Control Measures

Appendix A

Review And Update Business Continuity Plans.	31/12/2020
Multi Agency Exercising And Training.	31/03/2020
Review Of Mip And Supporting Action Cards Underway	26/03/2021
Offsite Comah Plan & Exercising.	31/03/2020
Emergency Recovery Plan.	31/03/2020
Vehicle Mitigation & Protective Security Advice.	31/03/2020
Commissioned Emergency Control Centre.	31/03/2020
Flood Management Plan.	31/03/2020
Mass Fatality Plan.	31/03/2020
Major Incident Plan.	31/03/2020
Crisis Media Plan.	31/03/2020
Additional Dedicated Ppe Reserve For Responders And Public During Evacuation And Additional Rest Centre Location For Mass Evacuation To Be Established From Bay. Ppe Reserve Now Catalogued With Dedicated Management Spreadsheet	11/09/2020
Rest Centre Plan & Arrangements. Duty Packs Reviewed And Updated Oct 20	31/03/2020
Specific Covid Rest Centre Arrangements Developed And Implemented Complete With Evac Ppe And Hygiene Supplies. Ppe Reserve Catalogued And Issued First Response Supplies To Duty Officers	19/06/2020
Restructure Of Ems To Include Additional Ems Officer And Principle For 12 Months Losses To Ems Officers Through Hr Process Further Dpr And Review Required In November	12/07/2020
Additional Strategic Training To Increase Organisational Resistance Agreed For 3rd November Swlrf Cancelled Gold, However Gold Lie Being Established And Tactical Training Under Development. Action Complete Director Trained Via Gold Lite Package	03/11/2020
Dpr To Recruit Two Ems Officers And Extend Principal Emo Agreed 27th November, Internally And Externally Advertised	22/01/2021
Temporary Mortuary Arrangements.	31/03/2020
Greater Responsibility Allocated To Deputy Ceo From 29 October 2018. Responsible Officer Changed From Phil Roberts To Adam Hill As Per Cmt On 13/02/19.	13/02/2020

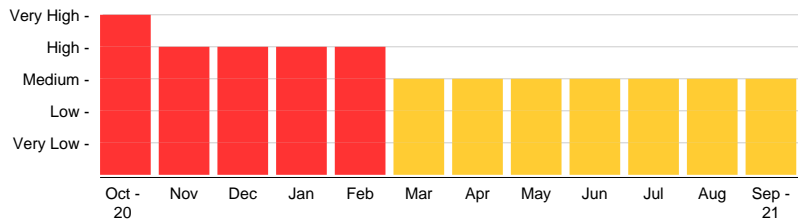
Closed Control Measures

Appendix A

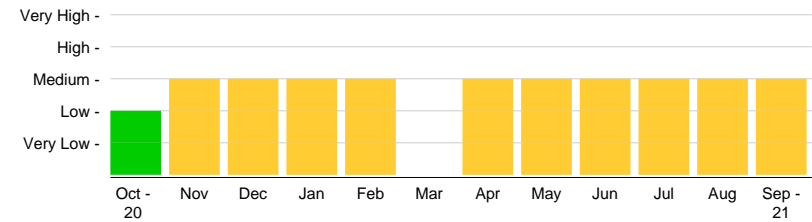
Closed Control Measures	Closure Date
Project Griffin Training.	31/03/2020
Call Out & Activation Protocols/Action Cards.	31/03/2020
Rag Alert System Across H&S, Emergency Management.	31/03/2020
Service And Corporate Business Impact Assessments And Business Continuity Plans.	31/03/2020
Continual Review Of Plans & Protocols.	31/03/2020
Risk Profiling.	31/03/2020
Major Incident Plan	31/03/2020
¿ Flood Management Plan	
¿ Mass Fatality Plan	
¿ Temporary Mortuary Arrangements	
¿ Crisis Media Plan	
¿ Rest Centre Plan & Arrangements	
¿ Recovery Plan	
¿ Offsite Comah Plan & Exercising	
¿ Risk Profiling	
¿ Project Griffin Training	
¿ Vehicle Mitigation & Protective Security Advice	
¿ Multi Agency Exercising & Training	
¿ Call Out & Activation Protocols/Action Cards	
¿ Continual Review Of Plans & Protocols	
¿ Service And Corporate Business Impact Assessments And Business Continuity Plans	
¿ Rag Alert System Across H&S, Emergency Management	

Page 105

Historical Impact : Medium



Historical Likelihood : Medium



Risk on a Page

Risk Title : Health & Safety

Risk ID : 236

Description : 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 consequences

Risk Level : Corporate

Responsible Officer : Adam.Hill

Councillor : David Hopkins

Last Update : 30/09/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER

Current Control Measures

Policy Review Plan For 21-22

Last Update

26/08/2021

Risk Response

Treat

Projected Completion

31/03/2022

Closed Control Measures

Closure Date

With Departure Of Hso Covering Social Services, Dpr To Recruit To Be Submitted By 10th June, Interim Cover Within The Team Established, Recruitment To To Start Estimated 30/07/21

27/09/2021

Dpr For Replacement H&S Training Officer Signed Off By Cmt And Passed To Employee Services For Advertisement 22nd March

14/05/2021

Review Of Corporate Smoking Policy In Line With Regulatory Changes

28/04/2021

Staff Well-Being As Part Of The Future Council Stream Of The Council'S Covid-19 Recovery Plan.

31/03/2021

Provide Stress Management And Counselling And Health & Safety Advice And Support To Staff During Covid-19.

31/03/2021

H&S Staffing To Ensure Service Delivery

08/03/2021

H&S Toolkits.

31/03/2020

Well-Being Policies. New Mental Health Policy Under Consultation To Include Social Isolation And Impacts From Home Working

31/03/2020

Retrospectively Entered, Covid Assessments, Standard Operating Procedures Created For Schools And Premices, Bame And Health Assessment Processes Created And Various Ppe Guidance.

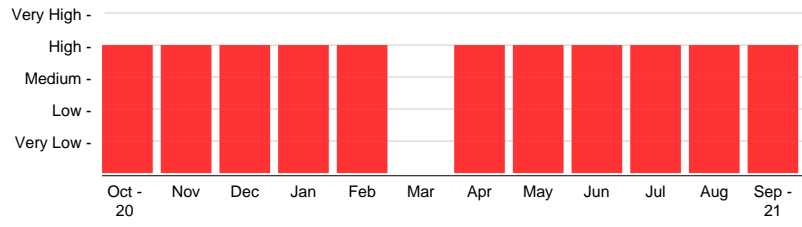
30/07/2020

Closed Control Measures

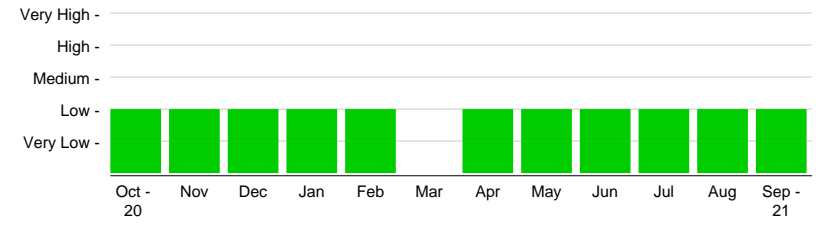
Appendix A

	Closure Date
Due To Service Losses, Available H&S Officers At A Significantly Reduced Level, Particularly With Demand From Schools And Social Care Sector, Dpr On Service Need And Staffing To Be Submitted To Cmt November Dpr Signed Off 30th November	30/11/2020
Additional Guidance On Health Assessments And General Covid Information As Priority Objective	25/09/2020
Early Review Of Lone Working, Dse And Mental Health Policies To Include Impacts And Resources Available From Extended Home Working And Social Isolation	11/12/2020
Review Business Continuity Plans To Prepare For Eu Exit.	16/10/2020
Directors H&S Committees & Sub Safety Groups.	31/03/2020
Member Of British Association Of Counsellors And Psychotherapists (Bacp).	31/03/2020
Noise, Dust, Lighting, Humidity & Vibration Sampling.	31/03/2020
Riddor Procedures For Reportable Incident To The Hse.	31/03/2020
H&S Audit Plan.	31/03/2020
Rag Alert System Across H&S, Emergency Management And Well-Being.	31/03/2020
Health & Safety Policies.	31/03/2020
Health & Safety Mandatory Training And E-Learning.	31/03/2020
Swansea Council Rag Fire Risk Profiling For All Premises.	31/03/2020
Greater Responsibility Given To Deputy Ce From 29 October 2018. Responsible Officer Changed From Phil Roberts To Adam Hill As Per Cmt On 13/02/19	13/02/2020
<ul style="list-style-type: none"> ¿ Health & Safety (H&S) Policies ¿ H&S Toolkits ¿ Riddor Procedures For Reportable Incident To The Hse ¿ H&S Audit Plan ¿ Well-Being Policies ¿ Member Of British Association Of Counsellors And Psychotherapists (Bacp) ¿ Seqosh Accreditation By Faculty Of Occupational Medicine ¿ Noise, Dust, Lighting, Humidity & Vibration Sampling ¿ Directors H&S Committees & Sub Safety Groups ¿ Rag Alert System Across H&S, Emergency Management And Well-Being 	31/03/2020

Historical Impact : **High**



Historical Likelihood : **Low**



Risk on a Page

Risk Title : Regional Working

Risk ID : 259

Description : 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.

Risk Level : Corporate

Responsible Officer : Phil.Roberts

Councillor : Robert Stewart

Last Update : 23/09/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER

Current Control Measures

Playing A Leading And Proactive Role In Major Regional Collaborations.

Last Update

23/09/2021

Risk Response

Treat

Projected Completion

30/04/2022

Maintain Stronger Partnership Working And Relationships Post-Covid-19 And As Part Of The Councils' Covid-19 Recovery Plan And Continue To Make Use Of Microsoft Teams To Ensure Regional Meetings Are More Frequent And Effective.

24/08/2021

Treat

31/03/2022

Consider Through The Erw Joint Committee The Future Collaboration On The Delivery Of School Improvement Services.

24/08/2021

Treat

30/09/2021

Closed Control Measures

Representations Have Been Made To Welsh Government On Reforming The Grant Regime.

Closure Date

31/03/2020

Governance Structures Are In Place For All Major Collaborations.

31/03/2020

Partnerships Have Been Mapped.

31/03/2020

Director Leads For Each Partnership.

31/03/2020

Senior Management Restructure Strengthening Capacity For Regional Working.

31/03/2020

¿ The Senior Management Restructure Approved By Council On 21st June Strengthens The Council¿S Management Capacity To Ensure That The Regional Collaboration Agenda Can Be Taken Forward Proactively By Swansea Whilst Also Allowing The Council To Manage Its Ambitious Programmes Based Around The Corporate Priorities.

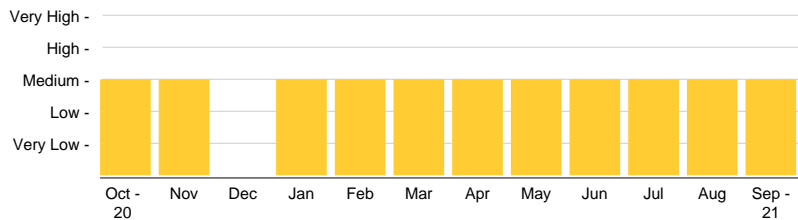
09/03/2020

¿ The New Senior Management Structure Agreed At Council On 21st June 2018 Has Director Leads In Place For Each Partnership.

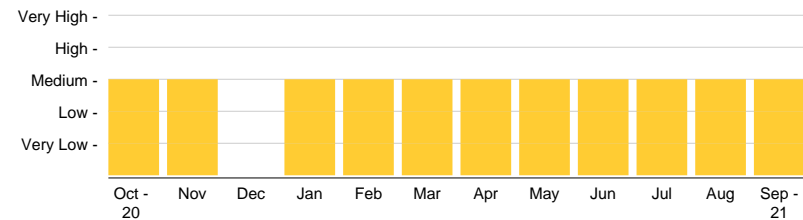
- ¿ The Council Is Playing A Leading And Proactive Role In Major Regional Collaborations.
 - ¿ A Mapping Exercise Has Been Undertaken That Identified The Key Local, Regional And National Partnerships.
 - ¿ Erw Produces Audited And Published Accounts And Are Inspected By Estyn And Has Produced A Document Called Democratic Accountability And Scrutiny, Which Recognises The Role Of Scrutiny In, Amongst Other Things, Monitoring Performance And Budgets. The City Deal Is In The Development Stages Of Practical Formation And Detailed Agreement; It Is Envisaged That The Governance Structure Will Be Similar To That Of Erw.
 - ¿ The Chief Executive Takes The Lead Role For Erw And Western Bay As Well As Being An Executive Member Of The City Deal Joint Committee.
 - ¿ The Leader Of The Council Is The City Region Joint Committee Chair.
 - ¿ The City Deal Has A Joint Working Agreement In Place, Which Was Approved At Council On 26th July 2018.
 - ¿ A Review Of Progress Has Been Undertaken By Ipc On The Western Bay Health & Social Care Collaboration.
 - ¿ The Council Meets Up Regionally With 5 Other Local Authorities To Discuss Collaboration Projects.
 - ¿ The Council Has A Clear Rationale In Place When Collaborating And It Is Clear On The Anticipated Benefits And Costs.
 - ¿ Erw Has Fully Formed Governance Arrangements, Which Includes A Joint Committee, An Erw Service Committee And A Joint Scrutiny Mechanism. A Joint Committee Agreement And Joint Scrutiny Arrangements Were Agreed For The City Deal At Council On 26th July 2018. Western Bay Has A Joint Committee In Place; There Are Scrutiny Arrangements In Place For All Three Partnerships
 - ¿ The Council Is Playing A Leading And Proactive Role In Major Regional Collaborations.
 - ¿ The Council Has A Clear Rationale In Place When Collaborating And It Is Clear On The Anticipated Benefits And Costs.
 - ¿ The Council Understands What It Currently Contributes Directly To Erw, Western Bay And City Region And How Much It Contributes To All Other Partnerships.
 - ¿ The Council Is Rolling Out And Promoting The Use Of Skype As Part Of The Wider Roll Out Of Office 365 Resulting From The Council¿S Digital Strategy And Modernisation Agenda.
 - ¿ The City Deal Is Being Delivered With The Involvement Of The Private Sector. The Western Bay Programme Supports Collaborative Working Between Four Statutory Partner Organisations, Together With The Third And Independent Sectors. Erw Has Independent Members Involved In The Executive Board.
 - ¿ Representations Have Been Made To Welsh Government On Reforming The Grant Regime; For Example Through The Council¿S Response To The Recent Green Paper On Local Government Reorganisation.
- Covid-19 Has Significantly Impacted On The Potential For Increased Regional Collaboration In Two Ways. Firstly The Move To Remote Meetings Via Ms Teams Has Meant That Meetings Are More Structured, More Frequent And More Effective. The Ability To Hold Formal Meetings Using Ict Has Been Enabled By Wg Regulation And This Should Now Become The Norm. Secondly The Collaboration With Npt And Sbuhb Has Accelerated With The Response To The Pandemic Being A Catalyst For Improved Joint Working Which Must Be Maintained Post-Covid.

Page 110

Historical Impact : Medium



Historical Likelihood : Medium



Risk on a Page

Risk Title : COVID-19

Risk ID : 264

Description : 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.

Risk Level : Corporate

Responsible Officer : Adam.Hill

Councillor : Robert Stewart

Last Update : 29/09/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
	RED	RED	RED	RED	RED	RED	RED	AMBER	AMBER	RED	RED	RED

Page 111

Current Control Measures	Last Update	Risk Response	Projected Completion
Work With Partners During The Course Of The Pandemic To Inform And Reassure The Public And Reinforce Health And Social Distancing Messages Through Social And Other Media.	29/09/2021	Treat	31/03/2022
Work With Health And Others During The Course O The Pandemic To Prepare For The Possibility Of Further Covid-19 Outbreaks Through Planning And Providing Information, Support, Equipment, Facilities And Tpp Services.	29/09/2021	Treat	31/03/2022
Provide Help And Support To People And Communities During The Pandemic In Order To Keep Them Safe And To Protect Their Health And Well-Being.	29/09/2021	Treat	31/03/2022
Prepare And Implement A Covid-19 Recovery Plan To Restart, Adapt, Recover And Transform Council Services.	29/09/2021	Treat	31/03/2022
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	22/04/2021	Treat	31/03/2022

Closed Control Measures	Closure Date
Work With Welsh Government And Provide Council-Led To Support To Local Businesses During The Course Of The Pandemic To Enable Them To Continue To Trade, E.G. Advice, Grants And Rate Relief.	30/06/2021
Work With Partners To Help Increase Emergency Bed Provision Through The Conversion Of Buildings Into Field Hospitals.	07/05/2020
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.	16/08/2020

Closed Control Measures

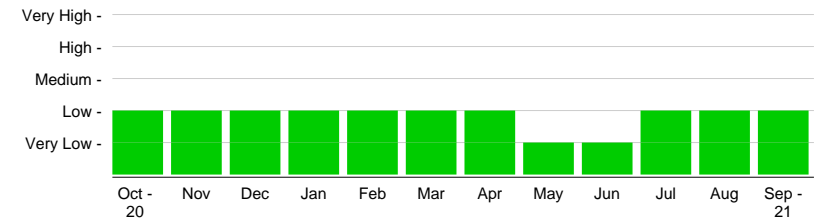
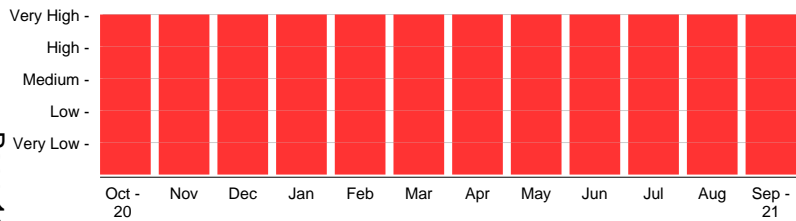
Closure Date
Appendix A

Work With Partners To Prioritise Demand For Key Services, Especially Social Care And Homelessness.	16/08/2020
Work With Partners To Support Education Teams & Schools And Provide Education / Childcare For Key Workers & Food For Children Who Get Fsms.	14/09/2020
Work With Partners To Redeploy Staff And Seek Recruits To Critical Areas, Such As Social Care And Food Distribution To Food Banks.	16/08/2020
Work With Partners To Ensure Resilient Supply Chains, Especially Food And Ppe Supply.	16/08/2020
Work With Partners To Provide Social Care And Other Critical Front-Line Staff With Ppe.	16/08/2020

Historical Impact : Very High

Historical Likelihood : Low

Page 112



Risk on a Page

Risk Title : Local economy and infrastructure

Risk ID : 269

Description : If the local 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.

Risk Level : Corporate

Responsible Officer : Martin.Nicholls

Councillor : Robert Stewart

Last Update : 27/08/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
	RED	RED		RED	RED	RED	RED	RED	RED	RED	RED	RED

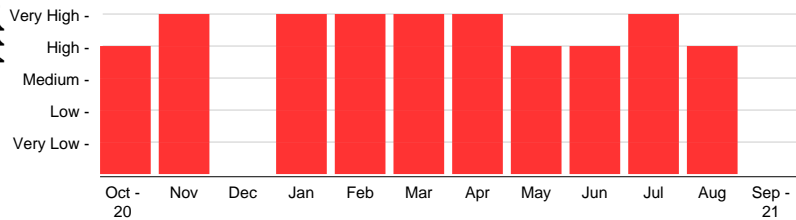
Page 113

Current Control Measures	Last Update	Risk Response	Projected Completion
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.	27/08/2021	Treat	31/12/2021
Attract Sufficient Investment And Development And Regenerate The City Centre. Shaping Swansea Partner Secured	27/08/2021	Treat	31/12/2021
Work With Partners To Deliver The Swansea Bay City Deal And Attract Investment Across The Region To Deliver Highly Skilled And Well-Paid Jobs.	27/08/2021	Treat	31/12/2021
Organise And Facilitate Virtual Meet-The-Buyer Events To Help Local Businesses To Identify Opportunities To Bid For Council Work And Contracts.	27/08/2021	Treat	31/12/2021
Provide Business Advice And Support, Including Administering Uk And Welsh Government Business Grants And Funds, To Assist Them During Covid-19. A Range Of Support Provided.	27/08/2021	Treat	31/12/2021
Assist Tourism Businesses To Reopen Safely Following Closure As A Result Of Covid-19.	27/08/2021	Treat	31/12/2021
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.	27/08/2021	Treat	31/12/2021
Collaborate With Welsh Government On Regional Economic Framework Final Report Being Drafted	17/08/2021	Treat	31/10/2021

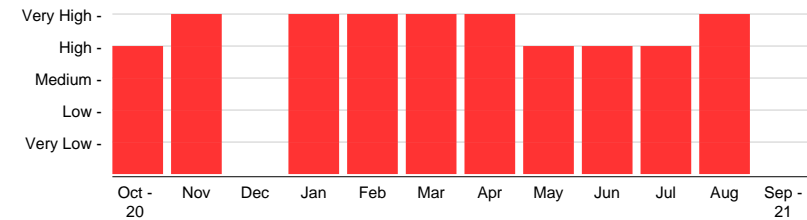
Closed Control Measures

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. A Range Of Support Provided.	17/08/2021
Refresh Regional Economic Regeneration Strategy Replaced By Regional Economic Framework Counter Measure	17/08/2021
Monitor The Supply And Increasing Cost Of Various Building Materials. Maintain An Open Dialogue With The Construction Industry And Government Departments. Transferred To A Separate Corporate Risk.	17/08/2021
Carry Out A Re-Purposing Feasibility Study To Examine Options To Re-Balance And Revitalise The City Centre Following The Impact Of Covid-19 On Retail, Leisure And Office Uses. Draft Report Prepared.	17/08/2021
Develop A Covid Economic Recovery Plan	31/03/2021

Historical Impact :



Historical Likelihood :



Risk on a Page

Risk Title : Covid-19 Risk

Risk ID : 274

Description : 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

Risk Level : Corporate

Responsible Officer : David.Howes

Councillor : Mark Child

Last Update : 16/09/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
		RED		RED	RED	RED	RED	RED	RED	RED	RED	RED

Current Control Measures

Last Update

Risk Response

Projected Completion

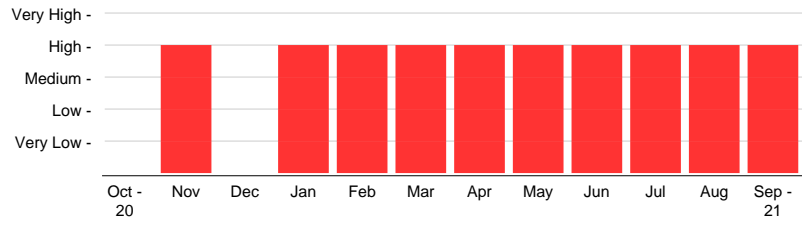
Service Adaptation And Recovery Plans In Place Across All Social Services.
 Multiagency Emergency Planning Infrastructure In Place Via The Regional Health And Social Care Partnership Board Which Undertakes Dynamic Risk Assessment On A Twice-Weekly Basis.
 Council Has Stepped Back Up Its Internal Emergency Planning Infrastructure
 Additional Surge Beds Across Health And Care System Are Being Utilised Flexibly To Support Step Down From Hospital Or Step Up From Community
 Adult Services Has Been Restructured To A Functional Model To Ensure Maximum Resilience For The Most Critical Services.
 Additional Funding From Wg Is Being Prioritised To Try And Expand Critical Areas Of Workforce Both In Council Services And In Externally Commissioned Services
 Families, Carers, Communities And The Third Sector Are Being Asked To Help Mitigate The Impact Of A Lack Of Formal Care And Support For Individuals Where Possible
 A Rag Rating Approach Is Being Utilised To Prioritise Care For Those In Most Critical Need.
 Staff Contracted Hours Have Been Extended On A Voluntary Basis
 Additional Workforce Support Arrangements Have Been Established With Dedicated Corporate Resource And Additional Investment In The Service To Cover Sickness Absence Management, Welfare Support And Recruitment And Retention Activity
 Emergency Care Home Support Arrangements Have Been Reinitiated Across The Region.
 External Agency Support Is Being Sought For Critical Areas Or To Help Cover Backlogs

16/09/2021

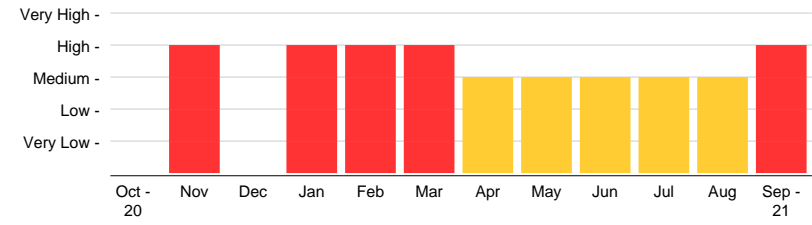
Treat

03/12/2021

Historical Impact : **High**



Historical Likelihood : **High**



Risk on a Page

Risk Title : Achieving Better Together - Recovery

Risk ID : 276

Description : 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

Risk Level : Corporate

Responsible Officer : Adam.Hill

Councillor : Andrea Lewis

Last Update : 20/09/2021

Historical RAG :

Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER

Current Control Measures

Undertake Monthly Meetings Of The Organisation, Cross Cutting & Transformation Steering Group And Ensure That Workstream Leads Report Progress And Risks At This Meeting Highlighting Any High Risks/Issues For Escalation To The Monthly Meetings Of The Recovery, Reshaping & Budget Strategy Board. The Recovery, Reshaping & Budget Strategy Board Will Ensure That Actions And Plans Are Progressing And Challenge And/Or Address Anything Which Is Not Being Achieved Or Is A Risk To The Authority.

Last Update

20/09/2021

Risk Response

Treat

Projected Completion

31/01/2022

Page 117

Closed Control Measures

Closure Date

Monitoring Capacity

01/06/2021

Robust Governance And Recovery Plan Monitoring And Reporting

29/06/2021

Monthly Review Of Actions, Updates And Risks Undertaken At The Steering Group And The Board. Any Risk Identified Or Red Rag Rating Will Be Escalated As Pe The Governance Framework.

29/06/2021

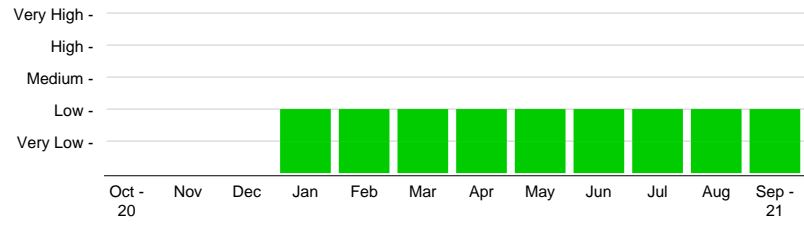
Monthly Review Of Action Plans By Workstream Area, Updates And Risks Also Reviewed At The Steering Group And The Board. Any Risk Identified With An Amber Or Red Rag Rating Will Be Escalated To Board Or If Identified At Board A Plan Of Action Will Be Created With Smart Targets.

26/05/2021

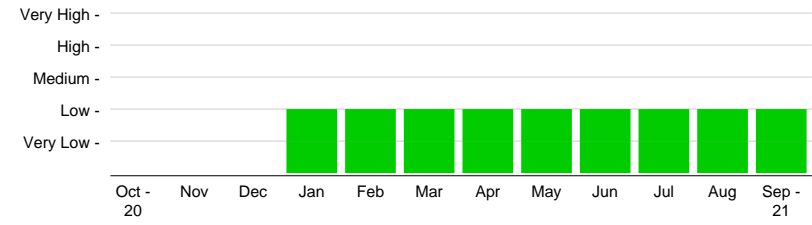
Monthly Review Of Actions, Updates And Risks Undertaken At The Steering Group And The Board. Any Risk Identified Or Red Rag Rating Will Be Escalated As Pe The Governance Framework.

23/04/2021

Historical Impact : **Low**



Historical Likelihood : **Low**



Risk on a Page

Risk Title : Achieving Better Together - Transformation

Risk ID : 277

Description : If the Council does not transform effectively it will not be sustainable and financially resilient in the longer term

Risk Level : Corporate

Responsible Officer : Adam.Hill

Councillor : Andrea Lewis

Last Update : 20/09/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER

Current Control Measures

Align The Transformation Activities And Projects In The Achieving Better Together Programme Plan With The Medium Term Financial Plan Through The Recovery, Reshaping & Budget Strategy Board To Ensure Future Financial Sustainability.
(Amended From: Transformation Activities In The Programme Plan Must Align With The Mtfp To Ensure Future Financial Sustainability) June 21

Last Update

20/09/2021

Risk Response

Treat

Projected Completion

01/10/2021

Develop An End Of Programme Report From The Previous Transformation Programme And Use The Lessons Learnt Following A Review At Scrutiny In Jan 22 To Re-Shape The New Swansea - Achieving Better Together From Recovery Programme.
(Amended From: Learning From The Previous Transformation Programme, Sustainable Swansea Adapted Into The New Programme Following Final Report To Scrutiny In August 2021) June 21

20/09/2021

Treat

31/01/2022

Closed Control Measures

Programme Documents Need To Be In Place: Programme Plan (Milestones And Deadlines), Governance, Benefits Realisation Plan, Raid Log, Change Plan

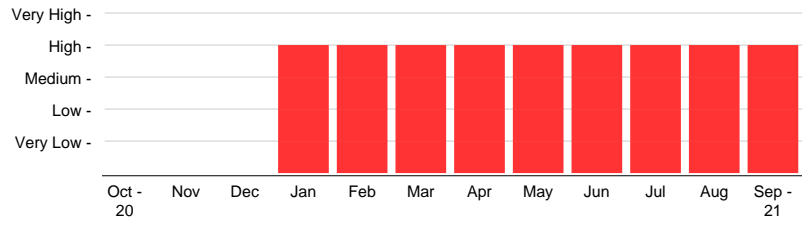
Closure Date

29/06/2021

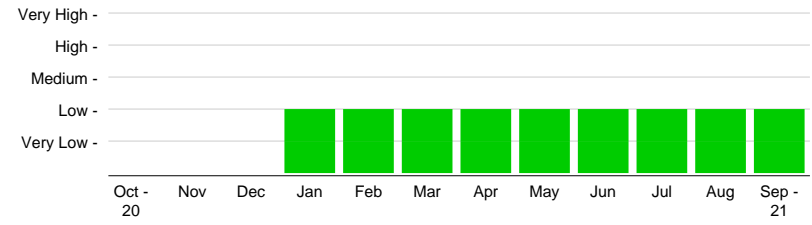
Monthly Meeting Of The Steering Group And Board To Ensure The Actions And Plans Are Progressing And Challenging And Addressing Anything Which Is Not Being Acgieved.

26/05/2021

Historical Impact : **High**



Historical Likelihood : **Low**



Risk on a Page

Risk Title : Post-EU Exit

Risk ID : 282

Description : 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.

Risk Level : Corporate

Responsible Officer : Adam.Hill

Councillor : Robert Stewart

Last Update : 29/09/2021



Current Control Measures

Monitor Each Month The Local Impact Following The End Of The Eu Transition Period Via The Post-Brexit Steering Group And Wlga To Identify And Respond To Any Risks And Opportunities Arising.

Last Update

23/08/2021

Risk Response

Tolerate

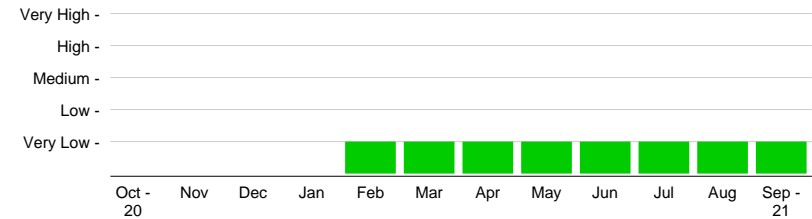
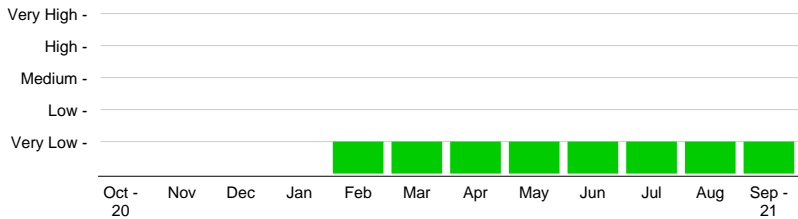
Projected Completion

31/03/2022

Page 121

Historical Impact : Very Low

Historical Likelihood : Very Low



Risk on a Page

Risk Title : Reducing and tackling Fraud

Risk ID : 289

Description : 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.

Risk Level : Corporate

Responsible Officer : Ben.Smith

Councillor : Robert Stewart

Last Update : 01/09/2021

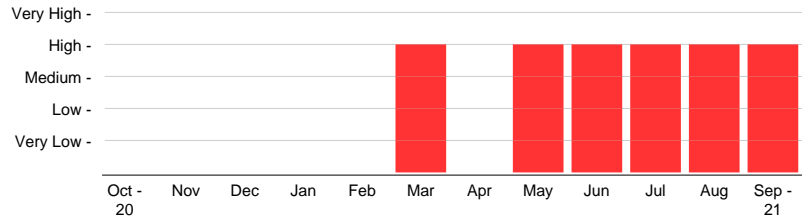
Historical RAG :

Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
					AMBER		AMBER	AMBER	AMBER	AMBER	AMBER

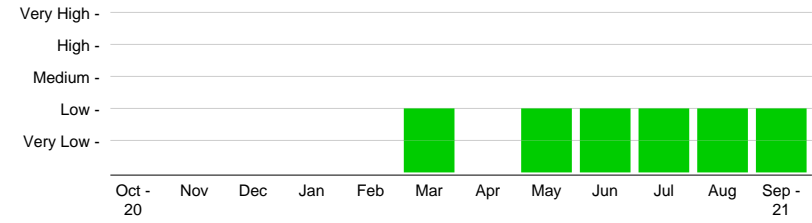
Current Control Measures

	Last Update	Risk Response	Projected Completion
Review Annually And Remind Staff Every 6 Months Of The Financial Procedure Rules And Contract Standing Order And Procurement Rules Frameworks For Staff To Follow.	06/07/2021	Treat	30/11/2021
6 Monthly Reports To The Audit Committee And Cmt On Work Undertaken By The Counter Fraud Team.	06/07/2021	Treat	30/11/2021
Annual Report On Counter Fraud To Presented To Audit Committee - To Raise Awareness And Amount Of Work Undertaken.	31/03/2021	Treat	31/03/2022
On Receipt, Disseminate Fraud Intelligence Alerts From Law Enforcement Agencies To Appropriate Staff And Stakeholders.	31/03/2021	Treat	31/03/2022
Independent Assurance From Internal And External Audit On The Effectiveness Of Governance, Risk And Control.	31/03/2021	Treat	31/03/2022
Audit Committee Review And Assess The Risk Management, Internal Control And Corporate Governance Arrangements Of The Authority At Least Annually.	31/03/2021	Treat	31/03/2022
Dedicated Team Of Professionally Trained And Experienced Investigators To Prevent Deter And Detect Fraud Against The Council	31/03/2021	Treat	31/03/2022
Annual Review Of Relevant Policies And Procedures To Ensure They Are Fit For Purpose.	31/03/2021	Treat	31/03/2022
The Council Communicates A Zero Tolerance Approach To Fraud, Bribery And Corruption A Minimum Of Twice A Year.	31/03/2021	Treat	31/03/2022

Historical Impact : **High**



Historical Likelihood : **Low**



Risk on a Page

Risk Title : Supply of construction materials

Risk ID : 296

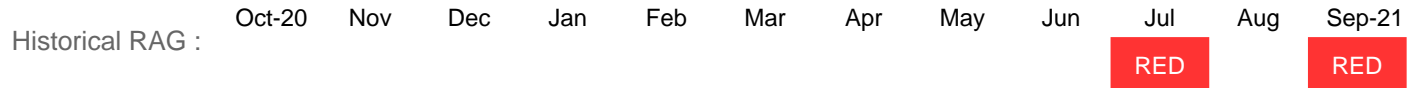
Description : If the supply of construction materials continue to be delayed, and in short supply, then this will impact negatively on the cost and programme for the delivery of capital programme projects.

Risk Level : Corporate

Responsible Officer : Martin.Nicholls

Councillor : Robert Stewart

Last Update : 15/09/2021



Current Control Measures

Discuss & Monitor The Situation With The Various Project Teams Monthly And Escalate As Required. (Ph)
 Increasing Our Stock Levels When Materials Become Available.(Nw)
 Considering Alternatives Where Possible.(Nw)

Last Update

15/09/2021

Risk Response

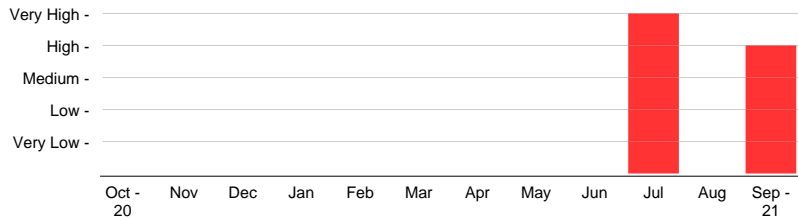
Treat

Projected Completion

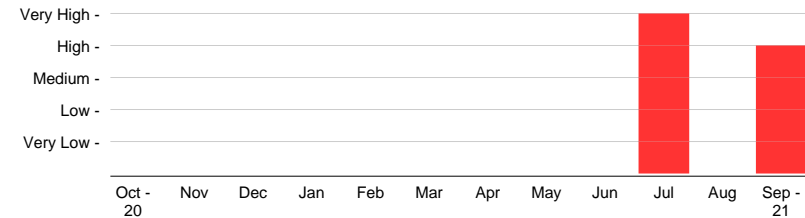
21/07/2022

Page 124

Historical Impact : High



Historical Likelihood : High





Report of the Director of Social Services

Governance & Audit Committee – 9 November 2021

(Directorate): Internal Control Environment 2021/22

Purpose:	The report presents the (Directorate) control environment, including risk management, in place to ensure: functions are exercised effectively; there is economic, efficient and effective use of resources, and; effective governance to secure these arrangements.
Report Author:	David Howes
Finance Officer:	Chris Davies
Legal Officer:	Tracey Meredith
Access to Services Officer:	Rhian Millar
For Information	

1. Background

- 1.1 The social services directorate is responsible for either delivering or commissioning care and support for adults, children and families across Swansea. As such, the directorate is the main vehicle through which the Council meets its responsibilities under the Social Services and Well Being Act and the All Wales Safeguarding Procedures. The Social Services and Wellbeing Act complements the Future Generations Act in requiring a refocus on wellbeing, prevention and early help. Consequently, in recent years the Directorate has assumed responsibility for the direct delivery of the bulk of the Council's prevention and tackling poverty services. The Directorate is also responsible for Youth Offending Services and hosts the West Glamorgan Health & Social Care partnership.
- 1.2 The net result of all of the above is that the Social Services Directorate has the highest gross and net spend within the Council. It delivers the bulk of the Council's required savings within the medium term financial plan. It is the highest income generator. It is the most regulated area

with the highest number of statutory performance indicators. It manages the highest levels of risk as business as usual activity. It takes lead responsibility for two of the Council's corporate priorities – safeguarding and tackling poverty.

- 1.3 In order to manage and safely deliver against all of the above, the internal control environment within the Directorate has to be highly sophisticated and particularly effective.

2. Risk Management and business continuity

- 2.1 It is worth acknowledging that the bread and butter work of a social services department is dominated by the effective management of risk through its work in managing children protection and adult safeguarding.
- 2.2 It could also be argued that given the widely acknowledged fragility of the social care sector across the UK even prior to the pandemic that the Directorate operates a permanent state of business continuity.
- 2.3 Never has that been more true than during the past 18 months when Covid has tested the resilience of health and care systems beyond anything that anyone had envisaged. Despite the dreadful impact on our population and the extreme stress caused for our staff both in the Council and the wider sector, our capacity and resilience to managing catastrophic circumstances and ever changing and escalating levels of risk stood up remarkably well.
- 2.4 One of the lessons from Covid was that at a Corporate and Directorate level, the risks that we were and are managing needed to be refocussed on the most critical areas of concern. By way of illustration, it makes no sense to be focussed on the potential failure of a single care home when what we were facing was the potential complete collapse of the residential care market. There was also useful learning for the effective use of the risk register to focus on risks that either could not be fully mitigated or where mitigation was unlikely to have an impact in the short term. Again by way of illustration, during Covid, emergency actions often needed to be implemented same day or certainly within a week to avoid arrangements breaking down completely. Documenting all those risks and mitigations within the corporate risk register would have been an exercise in futility and the time wasted would have undermined actually getting on with the job in hand. However, all of those risks and agreed actions both locally and regionally were all captured and documented as part of the regional health and care Gold and Silver emergency planning infrastructure. The Corporate risk register has continued to be used to capture the highest level risks, those that are most pressing at any given time and particularly to provide transparency about risks that cannot be wholly mitigated.

- 2.5 Some risks will feature permanently on the risk register. The most obvious example is the risk for safeguarding. The consequences of a failure of the Council to meet its safeguarding responsibilities are dire both for the individual and the Council as a whole. However, the control measures that are in place as business as usual including the additional controls put in place to reflect the impact of Covid leave us as confident as we can be that the Council will continue to exercise its functions effectively but there is never room for complacency.
- 2.6 The overall risk relating to the impact of Covid has for the time being subsumed other risks relating to capacity to provide care, excessive demand etc. That ongoing impact of Covid remains the single biggest risk to business continuity across health and care despite that we have moved to alert level zero in terms of national planning. Indeed such are the current pressures on particularly domiciliary care, the emergency regional Silver and Gold planning infrastructure has been stepped back up since July 2021.
- 2.7 Risks that are captured on the corporate risk register are managed by individual risk owners across the Directorate and then monitored at the monthly Directorate P&FM. The risks on a page (see appendix) are shared with the responsible Cabinet Members on a monthly basis. The P&FM meeting makes the decision about whether Directorate risks should be escalated to CMT for consideration as to whether they should become a corporate risk.
- 2.8 Given that the Directorate's capacity and resilience to managing risk and business continuity has been tested to a degree that would have been considered inconceivable 18 months ago, the fact that arrangements have stood up well provides considerable assurance.

3. Performance management / KPIs

- 3.1 Adults, childrens, tackling poverty services and YOS all have a substantial and well-established list of KPIs that reflect statutory requirements, grant award conditions, the corporate performance report and most importantly the requirements to both effectively deliver and make improvements in the most crucial services that the Council provides for its most vulnerable residents.
- 3.2 All four services have an extensive individual performance report that is produced on a monthly basis. Those reports feed the monthly Directorate P&FM and are provided to the responsible Cabinet Members. The reports for adults and childrens services are received by CMT on a quarterly basis. The YOS report is received by the YOS management board (a statutory multi agency Board) on a quarterly basis. The childrens and adults reports are taken to dedicated scrutiny performance panels on a quarterly basis. Selective information is extracted from these reports to inform the Councils overall quarterly

performance report against the corporate plan. Care Inspectorate Wales are provided the reports on a quarterly basis. Safeguarding information is pulled from the reports and provided quarterly to the regional safeguarding board. Welsh Government are provided end of year information from these reports to meet the Council's statutory reporting requirements. Information from the reports is extracted to inform regional planning priorities across health and care through the regional partnership board. The Director uses the end of year information to inform his Statutory Report to Council on an annual basis.

- 3.4 More importantly than all of the above, live and contemporary performance information is used by frontline teams across the Directorate to inform service delivery and practice on a day to day basis. Swansea's use of performance data to inform and improve day to practice across social care, to support both service planning and improvement and transformation is widely recognised as sector leading.
- 3.5 We should acknowledge that Swansea is in the process of implementing the All Wales Community Care Information System. This has and will continue to cause some short term disruption to all of the above arrangements but the end goal of a single system across health and social care in Wales is worth some short term pain.
- 3.6 The Director of Social Services also takes a lead in supporting the Council's cross cutting approach to corporate safeguarding. The work of the corporate safeguarding group jointly chaired by the Director and responsible Cabinet Member reports on an annual basis to scrutiny. The cross Council work plan overseen by the board incorporates any recommendations from internal or external scrutiny or audit activity. There is a recognised need to improve some of the Council's corporate reporting capability and capacity. It is anticipated that the implementation of oracle fusion will address some of the current limitations.
- 3.7 Notwithstanding the current work to implement WCCIS, the fact that performance management arrangements in the Directorate are considered sector leading, the high levels of internal and external scrutiny and processes in place that ensure performance and management drives strategic and operational improvement indicates a very high level of assurance in this area.

4. Planning and decision making.

- 4.1 Planning for the effective delivery of social care is inextricably linked with the planning of the effective delivery of health care. This has been recognised by Welsh Government and prompted the establishment of regional partnership boards. The West Glamorgan regional partnership board provides the infrastructure through which the high level planning

priorities across health and social care are determined. However the statutory partners retain sovereign responsibility. The Director of Social Services advises the Cabinet Members, Cabinet and Council on the exercise of its statutory duties and ultimately Cabinet signs off on local delivery against both the regional priorities and local service delivery.

4.2 Each service within the Directorate has an annual transformation/ improvement plan (service plan) which sets out the steps that will be taken to deliver against agreed priorities. These plans are informed by all of the above and new Council policies, new statutory requirements, the latest performance information, any savings requirements set out within the Council's medium term financial plan and recommendations from internal or external audit (in particular the Care Inspectorate for Wales).

4.2 Over the past 18 months, the infrastructure at both a regional and local level to ensure effective and coherent planning and decision making in the most extreme circumstances continued to work particularly well and again provides considerable assurance.

5. Budget and resources management

5.1 The Directorate is supported by a dedicated finance partner who is part of the corporate finance team.

5.2 The finance partner works closely with the Directorate's budget officers who themselves sit within a wider planning and commissioning hub. The finance partner provides independent scrutiny and challenge of the Directorate's financial plans, including direct advice to the statutory Director and the Council's S151 officer.

5.3 The planning and commissioning hub work closely with the corporate procurement team to ensure that our arrangements to commission tens of millions of pounds of care and other services from the independent and third sector is done so in a way that both supports good outcomes and is cost effective. The planning and commissioning hub also works closely with education and housing colleagues to promote a people's approach to commissioning and procurement of cross cutting services and support.

5.3 The commissioning hub also manages applications for tens of millions of pounds worth of additional grant income and ensures ongoing compliance with grant conditions.

5.4 Charging of organisations that use Council care services, including making sure full cost recovery is applied, is managed by the budget officers within the commissioning hub. However, the financial assessment and charging of Swansea residents for their care and support is managed by the corporate finance and charging team.

- 5.5 The Director chairs a monthly meeting of the commissioning hub to ensure cross Directorate and cross Council collaboration.
- 5.6 The Director also chairs a monthly finance and charging meeting to ensure effective cross Council charging and income generation is maintained.
- 5.7 Overall financial oversight of the Directorate's fiscal position and delivery against the medium term financial plan takes place in the monthly P&FM and any issues are escalated to CMT and the S.151 officer. The Cabinet members receive a monthly finance report. The s151 officers quarterly outturn report is informed by the Directorate's finance report.
- 5.8 Analysis of demand, costs of new statutory requirements or policy commitments, delivery against savings targets, inflationary pressures, new income opportunities are all routinely monitored through the above arrangements and then provided to CMT and Cabinet to inform the annual budget setting process.
- 5.9 In recent years, despite having the largest savings targets in the Council, the Directorate has been particularly successful in achieving a balanced budget. Whilst it remains widely accepted that the overall funding model for social care is not fit for purpose, the Directorate's proven effectiveness in managing demand led budgets and delivering against challenging savings targets provides strong assurance.

6. Fraud and financial impropriety

- 6.1 The Directorates systems of internal controls have been designed in accordance with the Accounting instructions. Compliance is monitored through regular internal audits of the establishments and functions. Suspicions of impropriety are referred to internal audit and Human resources.
- 6.2 These internal control measures have been shown to be effective on a couple of occasions in recent years as they have led to the initiation of formal investigations which themselves have prompted improvements to Directorate and Corporate systems.

7. Compliance with policies, rules and regulatory requirements

- 7.1 The functions of the social services department are highly regulated and subject to high levels of internal and external scrutiny and audit consistent. The main regulator is the Care Inspectorate of Wales (CIW) which inspects both at a local authority level and each individual regulated service e.g. individual care homes or domiciliary care service. This high level of external scrutiny complements our internal

quality assurance frameworks and the oversight of two dedicated scrutiny panels. Any recommendations for improvement whether externally or internally generated are incorporated into annual service and improvement plans.

- 7.2 CIW has recently undertaken an assurance visit reviewing the local authority's compliance with meeting its statutory responsibilities during the pandemic. CIW concluded that the authority's arrangements remained strong and effective throughout this extremely challenging period. Reassuringly, any areas for improvement had already been identified by the Directorate and included in existing service improvement plans.

8. Programme and project assurance

- 8.1 The overarching transformation of health and social care programmes are facilitated through the infrastructure of the regional partnership board. There is a dedicated regional transformation team hosted by Swansea Council which facilitates the monitoring and delivery of that programme. Plans and projects are monitored by three transformation boards chaired at Director level and ultimately report to the partnership board with senior representation of the statutory partners.
- 8.2 Overall progress with Swansea elements of that programme is monitored via Swansea's cross cutting Council transformation and recovery board and specific elements linked to service improvement captured and monitored in individual service plans..
- 8.3 A robust and consistent project management methodology is adopted at both a regional, local, directorate and service level with dedicated specialist resources allocated to ensure project initiation, delivery against intended outcomes, risk management and transition to business as usual is properly managed.
- 8.4 Regional and local investment in project management capacity has demonstrably paid off and proved particularly valuable in supporting rapid change to health and care services to mitigate the extreme impacts of the pandemic.

9. Internal controls

- 9.1 All officers have clear roles and responsibilities. Authorisation processes whether Oracle, HR or financial are clear and in place. Annual review of authorisation levels are carried out. Spending restrictions in place with appropriate escalation up to HOS and Director level as appropriate. Risk assessments are in place for buildings and services.
- 9.2 The resilience of both internal control arrangements and the Directorates workforce have been severely tested in recent times. The

ability to flex resource and safely respond to priorities that could change on a weekly, sometimes daily, basis indicates strong assurance.

10. Data security

- 10.1 The Directorate manages high levels of personal information for citizens and statutory requirements are such that this information must routinely be used to inform reports, assessments and plans that must be shared in writing with users of our services.
- 10.2 The combination of these two factors means that the risk of an inadvertent data breach are high and the consequences are always serious.
- 10.3 The processes for monitoring and reporting breaches are well established across the Directorate, as are the processes for learning from any such a breach.
- 10.4 Arrangements to improve compliance with mandatory training on data security are in place and being monitored at P&FM, as are the details of any breaches or near misses.
- 10.5 The number of breaches that have taken place have reduced significantly as a result of the above activity.

11. Partnership / collaboration governance

- 11.1 The main partnership in which the Directorate is a key partner is the regional partnership board as referred to previously. The governance arrangements for this board are set out in statute. The region and the Council complies with the required Governance requirements in full.
- 11.2 All recommendations of the regional partnership board must be taken through the individual organisations governance mechanisms for final endorsement. Cabinet is the ultimately decision making body for the Council.
- 11.3 Pre-pandemic, partnership arrangements were considered particularly strong in this region. If anything, the pandemic has strengthened those arrangements further with the statutory partners and other stakeholders even more committed to shared objectives and the delivery of transformed services at pace.

12. Integrated Assessment Implications

- 12.1 The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.
- Deliver better outcomes for those people who experience socio-economic disadvantage
- Consider opportunities for people to use the Welsh language
- Treat the Welsh language no less favourably than English.
- Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.

12.1.1 The Well-being of Future Generations (Wales) Act 2005 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.

12.1.2 Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion, carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.

12.2 There is no direct impact associated with this report on the relevant groups considered within the IIA itself; but assessing long-term trends and preventing risks from becoming issues are key aspects of risk management. Sustainable ways of working are incorporated within the Council's risk management policy and framework.

13. Legal Implications

13.1 There are no legal implications.

14. Financial Implications

14.1 There are no financial implications.

Background papers: *None*

Appendices:

Appendix A (Directorate) Corporate and Directorate Risks on a page Report

Appendix B (Directorate) Assurance Map updated

Risk on a Page

Risk Title : Safeguarding

Risk ID : 153

Description : 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.

Risk Level : Corporate

Responsible Officer : David.Howes

Councillor : Mark Child

Last Update : 16/09/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
	RED	RED		RED	RED	RED	RED	RED	RED	RED	RED	RED

Current Control Measures

Emergency Planning Infrastructure Re-Established As Part Of The Regional Partnership Board, Safeguarding Board And Internally Within The Council To Ensure Prioritisation Of Resources Targeted At Maintaining Care And Support For Those Individuals In Most Critical Need Or At Risk Of Suffering Harm Reprioritise The Council;S The Councils Covid-19 Recovery Plan To Reflect The Impact Of The Third Wave Of Covid On Critical Services
Review Staffing Infrastructure Across The Directorate In Recognition Of A Critical Shortfall In Social Worker And Social Care Staff Capacity And Mitigate Where Possible By Increasing The Number Of Alternatively Qualified Staff

Last Update

16/09/2021

Risk Response

Treat

Projected Completion

31/03/2022

Page 134

Closed Control Measures

Establish And Maintain A Regional Protocol To Provide Secure Covid-19 Care Home Provision, Including Increased Capacity In The Councils In-House Care Homes.

Closure Date

31/08/2021

Reprioritise Workload To Focus On The Most Vulnerable People And Prioritise Services And Contact With Those Individuals During The Covid-19 Response.

31/08/2021

Provide Support To People Who Are At Greater Risk From Domestic Abuse During Covid-19

31/08/2021

Implement The Councils Covid-19 Recovery Plan To Recover Services And Help Deal With Emerging Risks From Covid-19.

16/09/2021

Provide Emotional And Well-Being Support To Children And Young People During Covid-19

31/08/2021

As Part Of A Wider Restructuring Of Adult Services, There Is Still A Plan To Re-Establish A Dedicated Safeguarding Team At The Front Door.

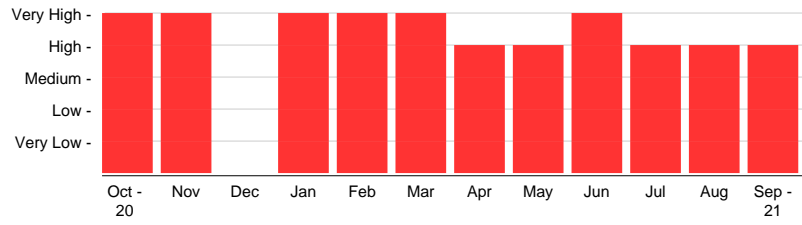
16/04/2021

Closed Control Measures

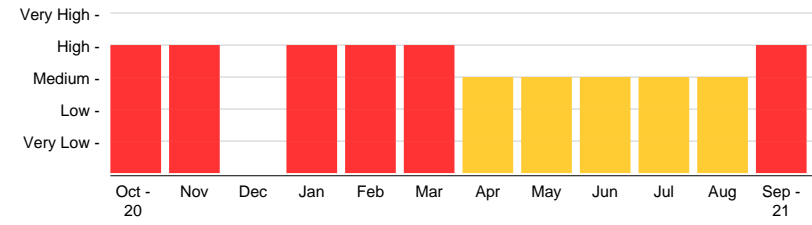
Appendix A

Provide Front-Line Social Care Staff With Ppe During Covid-19.	16/04/2021
Support And Shield Vulnerable People In The Community During Covid-19	16/04/2021
Subgroup Of The Corp. Safeguarding Board Reviewing Additional Safeguards That Can Be Implemented By The Hr Transactions Team.	16/04/2021
Action Plan Being Developed In Response To Recent Audit On Dbs Compliance In Schools.	16/04/2021
Children Services Are Planning To Further Enhance The Multi-Agency Front Door Team With A Dedicated Safeguarding Hub.	06/07/2020
Director Of Social Services To Advise Cabinet And Cmt On Options To Bolster Resilience Of The Workforce In Frontline Child Protection Teams	06/07/2020
¿ Sufficient Numbers Of Trained Adult And Children Services Staff. Principal Officers For Safeguarding Within Social Services	07/07/2020
¿ Corporate Safeguarding Policy And Group.	
¿ Strong Performance Monitoring And Reporting Arrangements.	
¿ Positive Engagement And Support From Cabinet And Council.	
¿ Mandatory Corporate Safeguarding Training In Place For Staff And Members.	
¿ Commitment To Invest In Social Care Is Strong.	
¿ Corporate Priority.	
¿ Regional And Multi-Agency Safeguarding Partnerships.	
¿ Safeguarding Leads Identified Across All Council Services	
¿ Separate Safeguarding Arrangements In Place In Schools, With A Central Education Safeguarding Officer Within The Main Local Authority Directorate	
¿ Two Dedicated Scrutiny Panels In Place To Scrutinize Social Services Work And Performance.	
¿ New And Revised Safeguarding Policy Following A Review Undertaken By The Safeguarding Pddc'	
Update (16/7/2019) - Children Services Have Completed The Restructure Of The Frontline Supported Care Planning Teams.	
First Phase Training For Staff In The Adult Services Practice Model Is Almost Complete.	
Multi Agency Monitoring Of Potential Safeguarding Referrals Is Now In Place At The Front Door Of Adult Services.	
A Process For The Regular Audit Of Safeguarding Cases Has Now Been Established Within Adult Services To Mirror The Equivalent Arrangements For Children Services.	
Update 20/9/19 - Some Concern About Diminished Capacity Within Frontline Child Protection Teams Due To High Levels Of Churn Within The Workforce.	
Update 10/10/19 - Additional Concern Identified Regarding The Operation Of Hr Transactions Processes In Relation To Dbs Checks And Some Other Employment Checks In Regulated Services.	
Update 19/11/19 - Cmt Have Agreed Action Plan To Stabilise Recruitment And Retention Of Frontline Children Services Staff	
Update 6/7/20 Safeguarding Arrangements And Resources Have Had To Be Remodelled To Ensure That This Key Priority Function Within Social Services Can Continue To Be Safely Delivered Despite The Restrictions Imposed As A Result Of Covid. The Planned Implementation Of The Multi Agency Safeguarding Hub Has Progressed Despite Covid And The Required Dedicated Safeguarding Team For Adults Has Been Included In The Modified Restructure Of Adult Services Required As A Result Of Covid.	

Historical Impact : **High**



Historical Likelihood : **High**



Risk on a Page

Risk Title : Data Breaches of Confidentiality

Risk ID : 218

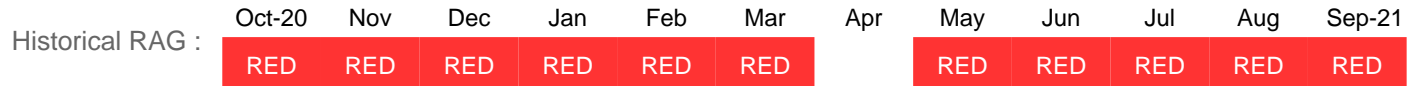
Description : If a data breach occurs then this will result in a breach of confidentiality for an individual and the ICO will have to be notified potentially incurring significant fine for the Authority.

Risk Level : Directorate

Responsible Officer : David.Howes

Councillor : Mark Child

Last Update : 21/09/2021



Current Control Measures

If A Data Breach Occurs Then They Are Reported To P&Fm Which Takes Place On A Monthly Basis. Staff Who Have Also Completed Data Breach Training Is Reviewed, Captured And Reported To P&Fm On A Monthly Basis.

Last Update

09/08/2021

Risk Response

Treat

Projected Completion

03/01/2022

Page 137

Closed Control Measures

Igu Officers Attending P&Fm To Highlight Any Issues Of Non Compliance With Breach Panel Recommendations - Completed

Closure Date

27/12/2020

Adult Services Action Plan And Child And Family Services Action Plan To Counteract Breaches And To Prevent Them Taking Place.

04/12/2020

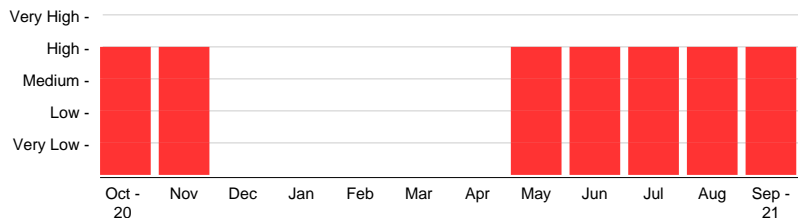
A Data Protection Impact Assessment (Dpia) Has Been Completed

Po For Resources Attends All Breach Panels And Communicates Lessons Learned.

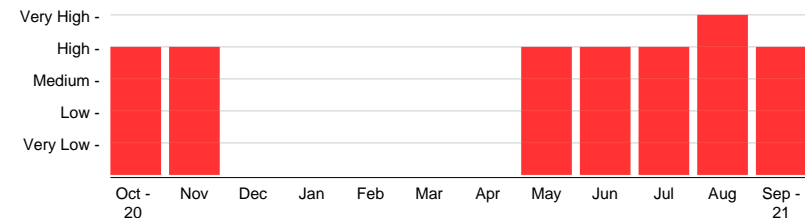
Communication On Keeping Data Safe Has Been Circulated Via May'S Edition Of The Staff Newsletter In Both Adult & Children'S Services.

All Staff To Complete Data Protection Training

Historical Impact : High



Historical Likelihood : High



Risk on a Page

Risk Title : Availability of Domiciliary Care

Risk ID : 221

Description : 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.

Risk Level : Directorate

Responsible Officer : David.Howes

Councillor : Mark Child

Last Update : 21/09/2021

Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
	RED	RED		RED	RED	RED		RED	RED		RED	RED

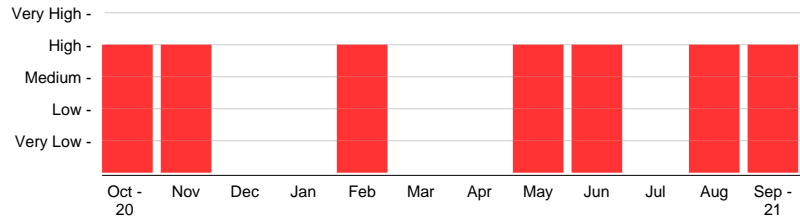
Page 138

Current Control Measures	Last Update	Risk Response	Projected Completion
Increased Number Of Contracted Providers To 22 - Current Data Suggests Increase In Demand Resulting In Capacity Pressures	24/08/2021	Treat	31/03/2022
Daily Management Of Waiting Lists And Contact With Care Providers To Prioritise Access To Services.	24/08/2021	Treat	31/03/2022
Implement Hospital To Home Services To Alleviate Hospital Pressures And Reduce Escalation Of Care And Support Needs.	24/08/2021	Treat	31/03/2022
Repurpose Third Sector Services To Support Hospital Discharge	24/08/2021	Treat	31/03/2022
Pilot Dom Care Services From 1 Res Care Provider	24/08/2021	Treat	31/03/2022
Creating Adaptable Respite Services That Can Flex To Address Long Term Care Needs If Required.	24/08/2021	Treat	31/03/2022
Promote Alternative Services To Dom Care	24/08/2021	Treat	31/03/2022

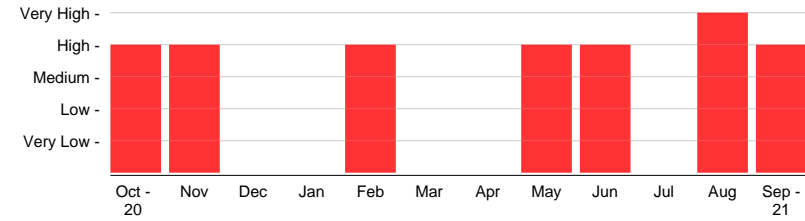
Closed Control Measures	Closure Date
Review Direct Payments Rates	01/03/2021
Re-Procured Services At Higher Cost, With Improved Terms And Conditions For Dom Carers And More Efficient Geographical Coverage, To Enhance Provider Capacity To Deliver Services And Recruit And Retain Staff.	11/01/2021

Revised Direct Payments Strategy To Incentivise Take Up And Reduce Burden On Commissioned Services.
Daily Management Of Waiting Lists And Contact With Care Providers To Facilitate Access To Services.
Piloting Of Hospital To Home Initiatives To Alleviate Hospital Pressures And Reduce Escalation Of Care And Support Needs.

Historical Impact : **High**



Historical Likelihood : **High**



Risk on a Page

Risk Title : Staff Emotional Wellbeing

Risk ID : 283

Description : IF staff turnover and sickness absence does not reduce and staff continue to be required to solely work from home, THEN it is likely the mental and emotional well-being across the wider CFS and Adult Services workforce will deteriorate due to higher caseloads, staff isolation and the conflicts and pressures of trying to manage work and home demands, leading to even higher staff sickness and shortages and preventing the service from being delivered effectively.

Risk Level : Directorate

Responsible Officer : Julie.Davies10

Councillor : Elliott King

Last Update : 20/09/2021

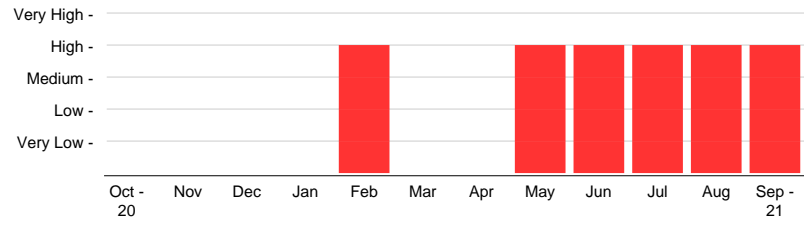
Historical RAG :	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
					RED	RED		RED	RED	RED	RED	RED

Page 140

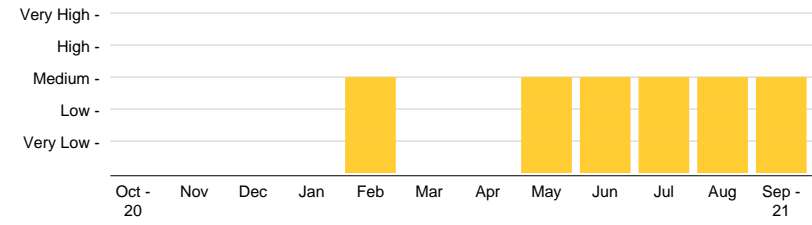
Current Control Measures	Last Update	Risk Response	Projected Completion
Daily Communication And Providing Virtual/Emotional Support As Flexibly As Needed.	20/09/2021	Treat	31/12/2021
Teams And Managers Supported With Regular Check Ins And Catch Ups With Staff	20/09/2021	Treat	31/12/2021
Implementing A C&Fs Recruitment & Retention Strategy Group Meet Monthly To Review Progress	20/09/2021	Treat	31/12/2021
Active Promotion Of The Cfs Well-Being Strategy; This Is Regularly Reviewed As Part Of Sub Groups This Is An Ongoing Control Measure	20/09/2021	Treat	31/12/2021

Closed Control Measures	Closure Date
Lobbying Welsh Government To Prioritise The Children'S Workforce To Receive The Covid Vaccination.	23/04/2021

Historical Impact : **High**



Historical Likelihood : **Medium**



Risk on a Page

Risk Title : Withdrawal of Grant Funding in Social Services

Risk ID : 298

Description : IF grant funding ceases to flow from Welsh Government (in the main), THEN the Directorate will not be able to deliver the range of services as effectively as it would like to in order to ensure service continuity and to safeguard preventative activities for the economic, social, environmental and cultural well-being of residents of Swansea

Risk Level : Directorate

Responsible Officer : David.Howes

Councillor : Mark Child

Last Update : 16/09/2021

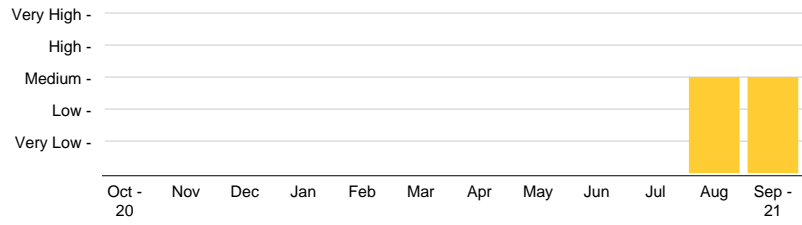
	Oct-20	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep-21
Historical RAG :											AMBER	AMBER

Current Control Measures

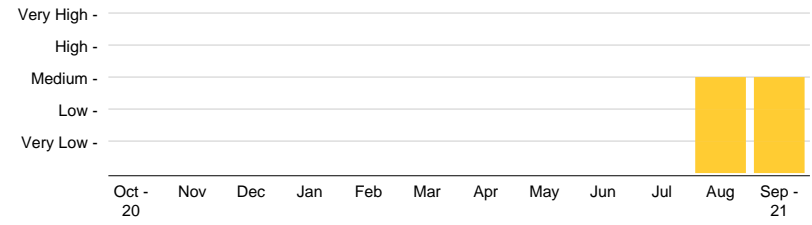
Page 142

	Last Update	Risk Response	Projected Completion
Clear Financial Governance In Place To Account For The Range Of Grant Made Available To The Directorate	16/08/2021	Treat	31/03/2022
Close Working With Grant Recipient Bodies To Understand Likelihood Of Changes In Grant Allocations	16/08/2021	Treat	31/03/2022
Monthly Discussion In Each Service Area To Work Through These Arrangements And Manage Risk	16/08/2021	Treat	31/03/2022
Analysis And Monitoring Of Impact On Service Delivery With The Directorate And Wider With 3rd Parties Also In Receipt Of The Grant Via Contractual Arrangements	16/08/2021	Treat	31/03/2022
Analysis Of Amount Of Staff Who Are Grant Funded Within The Directorate Understood So We Can Manage And Mitigate Risk	16/08/2021	Treat	31/03/2022
Analysis And Monitoring Of The Range Of Different Grants We Receive And Rag Status Of Those Which Are Of Greater Risk Of Ending (Circa 50 Million)	16/08/2021	Treat	31/03/2022

Historical Impact : **Medium**



Historical Likelihood : **Medium**



Business Risk	2 Month Overall RAG	Previous Overall RAG	Current Overall RAG	Level and Source of Assurance						Internal Audit Needs	Planned Internal Audit Work	Audit Plan Area	
				Level 1	Level 2			Level 3					
				Management Assurance	Other <u>Internal</u> Assurance			Other <u>Independent</u> Assurance					
					Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies				External Audit
Corporate Risk Register													

Risk ID 153 Risk Title Safeguarding Risk Level Corporate Risk Category Strategic Responsible Officer David Howes Updater Angela Morgan Last updated 07/01/21	<p>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.</p> <p>Risk added 27/03/18 following review of production of Corporate Plan 2017/22 and subsequent review of Corporate Risks. Supersedes risk CR45.</p>	n/a	Red	n/a	<p>>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.</p> <p>>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</p> <p>>Support and Shield vulnerable people in the community during Covid-19</p> <p>>Provide emotional and well-being support to children and young people during Covid-19.</p> <p>>Provide support to people at greater risk from domestic violence during Covid-19.</p> <p>>Provide frontline social care staff with PPE during Covid-19</p>	<p>>Director of Social Services to advise Cabinet and CMT on options to bolster resilience of the workforce in frontline child protection teams.</p> <p>>Planned engagement and support from Cabinet and Council.</p>	<p>>Two dedicated Scrutiny Panels in place to scrutinise Social Services Work and Performance .</p> <p>>People PDC in place.</p>	<p>>Establish and maintain a regional protocol to provide secure Covid-19 care home provision including increased capacity in in-house care homes.</p> <p>>Council Covid-19 Recovery Plan to recover services and deal with emerging risks</p> <p>>Corporate Safeguarding Board</p> <p>>Principal Officers for safeguarding within Social Services.</p> <p>>Corporate Safeguarding Policy and Group</p> <p>>Mandatory Corporate Safeguarding Training in place for Staff and Members.</p> <p>>Corporate Priority</p> <p>>New Safeguarding</p>	<p>> Internal Audit of Safeguarding</p> <p>>Internal audit of DBS</p>	<p>>Regional and multi-agency safeguarding partnerships</p> <p>> CIW</p>	<p>> Audit Wales</p>	<p>>Currently included as part of standard rolling audit schedule, repeated based on audit risk score.</p>		
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Business Risk	2 Month Overall RAG	Previous Overall RAG	Current Overall RAG	Level and Source of Assurance					Internal Audit Needs	Planned Internal Audit Work	Audit Plan Area	
				Level 1	Level 2			Level 3				
				Management Assurance	Other <i>Internal</i> Assurance			Other <i>Independent</i> Assurance				
Council/ Cabinet	Scrutiny	Other	Internal Audit		Other Bodies	External Audit						
Corporate Risk Register												

Page 145				<p>>Prioritise workload to focus on most vulnerable and prioritise services and contact with those during Covid-19 response.</p> <p>>Children Services to further enhance the multi-agency Front Door Team with a dedicated safeguarding hub.</p> <p>>Action plan being developed in response to recent audit on DBS compliance in schools.</p> <p>>Corporate Safeguarding Board reviewing additional safeguards to be implemented by HR Transactions Team.</p> <p>>Sufficient numbers of trained Adult and Child Services staff.</p> <p>>String performance monitoring and reporting arrangements.</p> <p>>String commitment to invest in Social Care</p> <p>>Safeguarding Leads identified across all Council services.</p> <p>>Separate safeguarding arrangements in place in schools and Central</p>			Policy following review by PDDC in 2019	>CMT approved action plan to stabilise recruitment and retention of frontline Children Services staff						
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Business Risk	2 Month Overall RAG	Previous Overall RAG	Current Overall RAG	Level and Source of Assurance						Internal Audit Needs	Planned Internal Audit Work	Audit Plan Area	
				Level 1	Level 2			Level 3					
				Management Assurance	Other <i>Internal</i> Assurance			Other <i>Independent</i> Assurance					
Council/ Cabinet	Scrutiny	Other	Internal Audit		Other Bodies	External Audit							
Corporate Risk Register													

				Education Safeguarding Officer in main directorate. >As part of a wider restructuring of Adult Services there is still a plan to re-establish a dedicated Safeguarding Team and the Front Door.									
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Agenda Item 11



Joint Report of the Cabinet Member for Adult Social Care & Community Health Services and Director of Social Services

Governance and Audit Committee – 9 November 2021

Annual Report – Corporate Safeguarding 2020-21

Purpose:	This is the latest annual report on the Council's corporate safeguarding arrangements, which reviews the work programme of the Corporate Safeguarding Group during 2020/21. The report acts as a comprehensive review of the implementation of the Council's Corporate Safeguarding policy, which promotes a "Safeguarding as everyone's business" approach. Safeguarding people from harm is a corporate priority in Swansea Council's Corporate Plan.
Report Author:	Simon Jones - Social Services Strategy & Performance Improvement Officer
Finance Officer:	Chris Davies
Legal Officer:	Lucy Moore
Access to Services Officer:	Rhian Millar
For Information	

1. Background

- 1.1 At the Governance & Audit Committee held on 13th July 2021, the meeting resolved that an update report be provided to the Committee which gives assurances on a number of matters, including:
 - action plan dates are being met
 - clarity is provided regarding the terms of reference / responsibilities of the various groups supporting the Corporate Safeguarding group.The items raised about the potential risk with school procurement / monitoring contracts and future training provision for Councillor School Governors are not directly addressed by this report.
- 1.2 It is recommended that the Governance & Audit Committee considers this Annual Report for information only, as an additional follow up on

progress arising out of the Audit Wales review of Swansea Council arrangements for the corporate safeguarding of children.

- 1.3 The Annual report was prepared after consultation with the Corporate Safeguarding Group, and then presented to Scrutiny Programme Committee on 19th October 2021 by lead Cabinet Member and the Director of Social Services.
- 1.4 This Annual Report - Corporate Safeguarding 2020/21 (attached as Appendix 1) is an important part of this reporting cycle. The Annual Report aims to update on the work undertaken in relation to corporate arrangements for Safeguarding across the whole Council during the year 2020/21, covering seven key areas of activity. It also identifies work for the year ahead. It is a regular report to the Scrutiny Programme Committee for awareness and comment on progress, achievements and implementation of policy.
- 1.5 At the Scrutiny Programme Committee held on 19th October 2021 Cabinet Member Mark Child and the Director of Social Services, David Howes were questioned on the following topics:
 - Current pressures and impact on safeguarding work
 - Access to safeguarding training by external providers/ persons, and compliance
 - DBS policy and systems- improvements for ensuring DBS checks for contractors are completed in line with new policy
 - Volunteers – Who is overseeing / monitoring whether those working in a voluntary capacity.

2. Corporate Safeguarding group

- 2.1 Swansea Council's Corporate Safeguarding Group was first set up in 2014 to lead on development and of corporate safeguarding policy, monitoring of policy implementation. This Group has met regularly - chaired by Director of Social Services, and attended by the lead Cabinet Member, with lead representatives from all services areas across the Council. The remit of the corporate safeguarding group covers both safeguarding children, and vulnerable adults from harm.
- 2.2 Regular progress reports are provided to Corporate Management Team on safeguarding performance. The Cabinet Member for Adult Social Care & Community Health Services, the Scrutiny Programme Committee and relevant Scrutiny Performance Panels also expect to receive regular information regarding safeguarding and on the work of the Corporate Safeguarding Group.
- 2.3 The annual report also acts as a comprehensive review of the implementation of the Council's Corporate Safeguarding policy, which promotes a "Safeguarding as everyone's business" approach.

Safeguarding people from harm is a corporate priority in Swansea Council's Corporate Plan.

3. Action Plan/ Work programme

3.1 Swansea Council's model for effective safeguarding arrangements effectively covers 7 key areas of activity (see appended report), and these are managed within a work programme, with leads reporting into the Corporate Safeguarding group. Safe practice and safe partnership are reporting jointing to reflect on multi agency work undertaken on behalf of children and adults.

3.2 The progress reports provided by lead set out the following headings:

- main aim of working group:
- scope of work to be carried out:
- main actions to be taken:
- progress to date:
- risks identified:

Note that leads have been requested to provide indicative timescales for future progress reports.

3.3 The annual report as provided picks up highlights from these progress reports, whilst placing what we have achieved in the wider context of the strategic work of the Council, and across the range of services we provide based on the annual review of performance, particularly in the steps taken towards achieving the corporate priority of safeguarding vulnerable people.

3.4 Swansea Council's Corporate Safeguarding group requested that an annual Section 135 audit be carried out this year to gain further assurances that arrangements are robust in all the Council's main service areas, and to identify any additional improvements needed.

3.5 A first exercise using a new regional tool, strives to develop our understanding of how well each service area within the Council manages their own corporate safeguarding responsibilities. Findings from this audit are now included in this annual report (see section on Delivering Safe Performance). Also, the main findings are set out within Swansea Council's section 135 Summary Report, delivered via the Council's Safeguarding Leads to the West Glamorgan Regional Safeguarding Board, and reported on an exception basis.

3.6 The Annual Report for Corporate Safeguarding intends to reflect more on the feedback of the Section 135 self -assessment in future years. Improvements identified from this year's exercise, and within the summary report to the Regional Safeguarding board, are incorporated into the revised corporate safeguarding group work programme, as within the Annual Report appended to this report.

4 Integrated Assessment Implications

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

An Integrated Impact Assessment Screening Form has been completed, with the agreed outcomes as follows:

- Summary of Impacts (Q2) Impacts are positive and low on specific groups due to the nature and purpose of the report as explained above.
- Summary of involvement (Q3) Swansea Council works closely with Swansea Bay University Health Board, Third Sector organisations, Social Care providers and the West Glamorgan Regional Partnership Boards. The Councils also works co-productively on what matters most to people, how services are developed and within commissioning plans. This collaborative, co-productive approach and the involvement of others has been involved in his report.
- WFG considerations (Q4) Well-being of Future Generation forms part of the overall plan and as part of the corporate plan and Council's transformation programmes, which are working towards safe, sustainable approaches to

corporate safeguarding. Health, social care and wellbeing is a significant part of the local and regional economy of Swansea, and the report focused on the range of services and other organisations which form part of this economy. A skilled, qualified public sector workforce is vital to improving wellbeing outcomes for vulnerable people. The report shows how we are looking to the future by ensuring that we are well placed to recruit, retain and better support employees in their professional development, in their duty to report on safeguarding concerns, and how we can help them be the best that they can be in their work with Swansea citizens.

- Any risks identified (Q5) The work programmes referred to within this report is risk managed closely. Any risks identified within one or all of the Council services, are agreed, mitigated and checked as routine at service, directorate and corporate levels, for example through monthly Social Services Performance and Financial Monitoring meeting and the Corporate Safeguarding group. Risks are then escalated accordingly through to appropriate corporate and political structures. Some of the wider impacts for example those emerging during the Covid pandemic, and their associated risks have been, and will continue to be, managed through the regional partnership structures.

- Cumulative impact (Q7) There is a positive impact on the wellbeing of Swansea citizens through corporate safeguarding of our most vulnerable people, including children, and the benefits this brings to the local area, economy and workforce.

The screening exercise concluded it is not necessary to complete a full Integrated Impact Assessment on this report.

4.3 The annual report of corporate safeguarding sets out progress towards the Council's corporate objective on safeguarding people from harm, as described in the Corporate Plan 2020-22, as required by the Well-being of Future Generations (Wales) Act 2015 and associated statutory guidance.

4.4 The Annual Report takes into account the United Nation Convention on the Rights of the Child (UNCRC) by outlining how Swansea Council is committed to taking forward these rights forward through the Children and Young People Strategic Partnership Board, and action plan.

4.5 The Council's approach to corporate safeguarding, and practice across all functions and services, has to be comply with Welsh Language Standards.

5. Legal Implications

5.1 There are no legal implications.

6. Financial Implications

6.1 There are no financial implications.

Background papers:

None.

Appendices:

Appendix A - Annual Report – Corporate Safeguarding 2020/21.

Appendix B – IIA Assessment Form.



Annual Report – Corporate Safeguarding 2020/21

Report of the Director of Social Services & Cabinet Member - Adult Social Care & Community Health Services on behalf of the Corporate Safeguarding Group

1. Introduction

- 1.1 **Purpose** - this annual report aims to update Scrutiny Programme Committee on the work undertaken in relation to corporate arrangements for Safeguarding across the whole Council, during the year 2020/21.
- 1.2 **Corporate Safeguarding** - Swansea Council expects that vulnerable people in Swansea are kept safe and protected from abuse and neglect. Safeguarding vulnerable adults and children is both a corporate priority, and well-being strategic outcome within the Corporate Plan (2020-22). This is now widely understood as “everyone’s business”, by our leaders and elected members and our workforce,, partner organisations and the individuals who are carrying out work on behalf of the Council,
- 1.3 **Corporate arrangements**- - by implementing a corporate wide approach to safeguarding vulnerable people the Council has to ensure there are clear lines of responsibility and accountability in all service areas of the Council, and that we are involving representatives of partner organisations in this work. We have to be clear of how ‘Spot it, Report it!’, and how we work together in response.
- 1.4 **Covid Response**- 2020-21 has undoubtedly been a most challenging period for Swansea citizens, the Council, the workforce, the health and social care system and public services. There are so many good examples of how we have faced down these challenges by working together in safeguarding communities and the most vulnerable people. However there has been an impact on the work we intended to do, and this report reflects on this.

Social Services and Education, in particular, have faced some major challenges this year during the Covid-19 pandemic. How in the face of these challenges, our remarkable health and social care, schools and the wider public facing workforce in Swansea have shown great resilience, commitment and humanity to support our most vulnerable citizens during these extraordinarily difficult of times. All workers, whether employed directly by the Council, in the independent

Appendix A

and third sectors, all the unpaid carers, volunteers and other members of the community who help coproduce our services have made a vital contribution to meeting the care and support needs within communities. Throughout these unprecedented times, the Director of Social published a informing, reassuring and appreciative blog, daily in the critical early stages, moving to weekly in more recent time. Aside from the strategic meetings with partners, the Director and Cabinet member have held regular discussions with staff to hear first- hand their experiences, and to direct support. The wellbeing of our workforce has been and continues to be a priority.

[Coronavirus---Covid-19-Social-Services](#)

- 1.5 **Corporate Safeguarding Policy** – Swansea Council’s updated policy has a greater focus on prevention and duty to report placed on all public service officers. The policy aims to make sure our work covers the full extent of potential, contextual safeguarding risks and concerns posed to vulnerable people, such as child sexual exploitation, modern slavery, radicalisation, etc. Reflected in the new corporate safeguarding policy are the key elements needed to ensure **safeguarding remains "everyone’s business”**
- 1.6 **Wales Safeguarding procedures** – Swansea’s corporate safeguarding arrangements and procedures are based on the revised national guidance (Sept. 2020). Our Swansea model approach is set towards driving continuous improvement in key policy areas. Named safeguarding officers from all service areas of the Council are trained and come together regularly to share learning from their experiences in carrying out this work, overseen by the Corporate Safeguarding group: <https://safeguarding.wales/>
- 1.7 **Swansea Council’s model for effective safeguarding arrangements** effectively covers **7 key areas** of activity (Fig. 1), and these are managed within a work programme, with leads reporting into the Corporate Safeguarding group. This annual report picks up highlights from these reports, whilst placing what we do in the wider context of the work of the Council and across the range of services we provide based on the annual review of performance, particularly in the steps taken towards achieving the corporate priority of safeguarding vulnerable people.

Appendix A



Figure 1 Swansea Model *“Doing nothing is not an option – Spot it, Report it!”*

- 1.8 **Safeguarding as Everyone’s Business** - Our corporate safeguarding policy continues to promote “a “Safeguarding as everyone’s business” approach, and this applies to:
- our employees
 - elected members
 - volunteers
 - contractors (specific conditions may also apply within contracts)

The Social Services and Wellbeing (Wales) Act 2014 was implemented in April 2016. This Act and recently revised guidance has brought about changes in safeguarding arrangements, in particular the introduction of a 'Duty to Report', placed on all Council staff, and this wider public responsibility is reflected in corporate safeguarding policy, accompanied by new, revised mandatory training programme.

- 1.9 **Working in partnerships-** Clearly in order to address the new statutory requirements, and the wider range of safeguarding issues and concerns now present in our communities, it is necessary to ensure that the whole workforce, elected members, volunteers and partners are each informed and made aware of their public duty, and what is expected of us. By working together as a whole Council, we can ensure that all our activities and services are carried out by elected representatives, paid staff, partners, volunteers and providers who are all fully up to date and aware of their safeguarding roles and responsibilities to help protect our most vulnerable citizens.

Appendix A

1.10 **Updated key documents** - This annual report, with the accompanying appendices, intends to act as a full summary record of our progress in implementing a corporate approach to safeguarding our most vulnerable people from harm, which applies across the whole Council. Appended to this report are:

- **Appendix A.** Corporate Safeguarding Governance arrangements
- **Appendix B.** Terms of Reference for Corporate Safeguarding group
- **Appendix C.** Work programme –Corporate Safeguarding group
- **Appendix D.** Swansea Council's Named Safeguarding officers

2. Progress made during 2020/21

This next section considers progress within in the seven key areas of activity as set out in the Swansea model (Fig. 1).

2.1 Safe Governance

2.1.1 **Corporate Leadership** - As mentioned, Safeguarding is seen as everyone's business and as our number one corporate strategic priority. As a Council, we are confident that have a set of robust, arrangements for responding to and managing safeguarding concerns. This does not automatically mean a culture of safeguarding exists, work across the whole organisation and continues to improve. We have to ensure we have strong, effective corporate leadership in place to ensure that all staff know, understand and can apply what they know about safeguarding in all circumstances. In Swansea, we demonstrate safe leadership by having this clear policy framework, effective structures, lead roles across the whole Council and most of all by taking action as and when needed. Safe governance must operate across the whole Council and all structures, including Cabinet, Corporate Management Team, Scrutiny boards and partnership structures (see Appendix A).

2.1.2 **Swansea Council and Cabinet** - the Council has further strengthened governance and Management arrangements to drive forward safeguarding vulnerable people. Cabinet Member portfolios have been reviewed-with changes recently agreed by Council (November 2020). As a statutory requirement, the Council must have the opportunity to consider the Director of Social Services Annual Report.

2.1.3 **Corporate Management Team**—all Corporate Directors, Chief Officers and Heads of Service – through their Management Teams – are jointly responsible for ensuring that all the statutory requirements in terms of safeguarding and promoting the welfare of children and vulnerable adults receive due consideration. Each Director must ensure there is a named safeguarding officer

Appendix A

in their service area, who regularly attends the corporate safeguarding group and ensures the quality, content and frequency of training provided to their own staff, and by maintaining a sufficient staff training record. Also the named safeguarding officers are expected to ensure all statutory duties are carried out with regard to the duty to report within the Council, and Swansea's corporate safeguarding policy is being implemented.

- 2.1.4 **Corporate Safeguarding Group** - An effective corporate safeguarding culture requires strong, visible, leadership presence, ensuring that senior officer and their workforce receives positive, professional and consistent backing in carrying out Council activities. This has been evident during this most difficult, challenging period, and though the vast range of actions taken in keeping people safe and well. All named safeguarding officers are working effectively together under the direction of a Corporate Safeguarding group, which meets quarterly, and is jointly chaired by the Director of Social Services David Howes and the Cabinet Member for Adult Social Care & Community Health Services – Cllr. Mark Child.
- 2.1.5 **Scrutiny Performance Panels** - Child and Family Services Scrutiny Performance Panel receives the Monthly Child and Family Services Performance report, and has a Work Programme to look in more depth on key issues. Similarly, Adult Services Scrutiny Performance Panel receives the Monthly Adult Services performance report, and also has a Work Programme to cover off key issues
- 2.1.6 **Regional Safeguarding** <http://www.wgsb.wales/>
Swansea Council is working within effective regional safeguarding board arrangements. Regional Safeguarding board publishes an annual plan setting out priority areas for the coming year. There is shared accountability for this plan across a range of partners, with targeted focus on preventative approaches, improving quality, performance reporting and learning lessons from practice reviews. [WGSB Annual Plan 20-21](#)
Swansea Council supports a range of campaigns and events, in particular during National Safeguarding Week.
- 2.1.7 **Governance & Audit Committee**- the Council's Governance Audit Committee is a requirement under the Local Government (Wales) Measure 2011, chaired by a lay member. Under the new Local Government and Elections Act Amongst the committee's duties is to review and assess the risk management, internal control and corporate governance arrangements of the Authority. Reports from Internal Audit on their work programme, and Corporate Business Performance on risk management, have been taken to recent Audit Committees. The enhanced role of Governance & Audit Committee provides an additional level

Appendix A

of scrutiny and challenge, and Senior Managers are now expected to attend regularly to present on the risk and issues they are facing.

2.1.8 **Findings from Audit Wales Follow up review-** a number of proposals for Improvement were made by Audit Wales in their recent report on Swansea Council : [AuditWales FollowUpReview Swansea Feb2020](#)

Audit Wales found that Swansea Council has addressed most of the recommendations in our previous national and local safeguarding reports, but that we should strengthen some aspects of its corporate safeguarding arrangements: Broadly speaking, many of the issues highlighted in the most WAO report conclusions have already been addressed, or are being worked on by work groups set up on behalf of the Corporate Safeguarding group. This report to Scrutiny Programme Committee provides additional detail on the progress made on these proposals for improvement.

2.1.9 **Follow up report to Governance & Audit Committee-** a report setting out a full summary of how Swansea is responding to the Audit Wales report's recommendations, and where progress is being made against the areas of improvement needed was presented to Child and Family Services Performance panel in and more recently to Governance & Audit Committee in July 2021: [Governance&AuditReport_July2021](#)

2.1.10 **Section 135 Audit** - Swansea Council's Corporate Safeguarding group has requested that an annual Section 135 audit be carried out to gain assurance that arrangements are robust in all the Council's main service areas, and to identify improvements needed. The first exercise using a new regional tool, strives to develop our understanding of how well each service area within the Council manages their own corporate safeguarding responsibilities. Findings from this audit are now included in this annual report (see section on Delivering Safe Performance). Also findings are reported via the Council's Safeguarding Leads to the West Glamorgan Regional Safeguarding Board on an exception basis.

2.2 **Safe Employment**

The Safeguarding Vulnerable Groups Act (2006) still applies in England and Wales. This Act aims to prevent those deemed unsuitable to work with children and vulnerable adults, from gaining access through work (whether paid or unpaid). The Act aimed to solve the failures identified by the 2004 Bichard Inquiry.

2.2.1 **Safe Recruitment and Selection** - In working safely with Swansea citizens, the Council has a Recruitment and Selection Policy and staff handbook. which are currently being reviewed. The review ensures that the revised national safeguarding guidance is fully embedded into our procedures, where

Appendix A

appropriate. Safeguarding roles and responsibilities are now reflected with all Job Descriptions

2.2.2 Commissioning and Procurement –we expect all contractors, companies and individuals, carrying out work on behalf of the Council, to confirm that they comply with Swansea Council Safeguarding Policies, and this applied to their staff or their sub-contractors. All such employees must be made aware of their safeguarding responsibilities and duties, and when required provided with safeguarding awareness raising training. We now have developed a Safeguarding policy specifically for Contractors of the City and County of Swansea to detail the Council's expectations of partners and providers, and annexed to the contract. Safeguarding clauses are placed in all social care contracts and inserted into other contracts where there are seen as relevant, together with a suitability questionnaire to ensure that all expectations are fully understood.

2.2.3 Disclosure and Barring Service (DBS) policy - The DBS Policy has recently been reviewed and updated and is awaiting agreement; alongside this, work is underway reviewing the procedure guide and letters for Managers/Schools. work in this area is carried out within the Council by a dedicate service centre, to assist Council managers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. Safeguarding policy expects that job requirements for all new starters to the, for each position to be filled, are risk assessed to ensure a DBS check is completed where a requirement has been identified. A sub group is looking at improvements for ensuring DBS checks for contractors are completed in line with new DBS Policy and Risk Assessment.

2.2.4 DBS Service Centre/ helpdesk – in early 2020, the Service Centre Helpdesk took over all ID applications and verifications previously carried out in the contact centre. Alongside this, there is daily monitoring of compliance to ensure that verifications are tracked to completion. Monthly reports are sent to HR&OD Business Partners to raise any queries/issues directly with the business areas and to School Challenge Advisors.

2.2.4 Volunteers – the Council's Volunteer guidance has also been reviewed, and updated for all central departments, Volunteer starter forms have been updated to include corporate safeguarding duties. People Policy Development Committee are supporting work on a broader Council strategy for volunteering building on the success of the community response to the Pandemic. We will have to ensure that volunteers can access the appropriate level of safeguarding training.

Appendix A

2.2.5 Work identified for year ahead:

- Promoting safeguarding and the duty to report as everybody's business in all recruitment materials, and job descriptions in line with the current corporate safeguarding policy,
- Continue to review all our staff and employment policies including a Council safe recruitment policy and staff handbook are up to date
- By ensuring that all work roles and responsibilities are risk assessed and, where necessary, DBS compliant.

2.3 Safe Workforce

2.3.1 **New Workers** - all staff employed by Swansea Council , including new staff are expected to have an awareness and understanding of their own corporate safeguarding role, as a Council employee, and as a citizen. On commencement of employment, all Council employees have to undertake a corporate induction and mandatory corporate safeguarding training, and be ready to prevent or report their concerns of possible abuse, when they work for the Authority or work on its behalf.

2.3.2 **Communications** -

Council employees have access to Safeguarding information and resources via StaffNet: <http://www.swansea.gov.uk/staffnet/safeguarding>
All Council staff are made aware of their duty to report concerns, through Staff Handbook and all staff are expected to be aware of the Named Safeguarding Persons in their respective service area (see Appendix D). These lead officers provide support to their staff teams in helping them identify, discuss and raise any signs of potential abuse, and to access the training and support they need.

2.3.3- **Training Programme – Staff**

Our safeguarding awareness training offer has to include face to face, e-learning and class based training approaches to meet the needs of a diverse workforce, for example to staff that do not have regular PC access. Staff are required to attend these mandatory courses a minimum of every 3 years. A senior manager has been deployed to carry out robust training needs analysis for the specific roles within the Council and to develop a comprehensive training programme. Again the Covid pandemic impacted on the capacity to plan, develop and provide the revised training programme, as many officers were redeployed to fill service gaps. The programme has now resumed virtually, and the courses available to include:

a) E-Learning

- Safeguarding adults: this e-Learning module looks at different elements that contribute to keeping vulnerable adults safe, and how to recognise and report concerns.

Appendix A

- Safeguarding and protection of children: this e-Learning course helps staff learn how to recognise when a child may be suffering from abuse or neglect and what you can do to help.
- b) **Training Levels 1 to 3** - mandatory safeguarding training has been developed across 3 levels to meet role specific requirements. All training materials across all levels has been updated to fully reflect new policy and the latest national guidance (in development. Child Protection Level 2 has been jointly delivered between Social Services and Education.
- c) **Named Safeguarding Lead Training** – this programme is vital to Swansea’s approach in supporting service areas leads to gain knowledge and know- how which can be passed through to their own teams. This training has now been transferred to virtual training and will be delivered from October 21.
- d) **Violence against women, domestic abuse and sexual violence (VAWDASV)** training within a National Training Framework is one of the key mechanisms for delivering the VAWDASV (Wales) Act 2015. As part of this act, the Council has a duty to train all our workforce, which is also a mandatory expectation on staff and elected members. As with safeguarding training, Swansea facilitates meeting this target with a combination e-learning face-to-face sessions to meet the range of needs

2.3.3- Training Programme – Elected Members

Through the Council’s corporate policy on safeguarding, we aim to ensure all elected members, and support staff who encounter children on a regular basis complete as a minimum the eLearning awareness training on safeguarding /child protection issues, safeguarding adults and Domestic Abuse. The policy expectation is that each councillor, including new councillors, completes this level of training within each electoral cycle. A Master Training Record of all elected members who complete the training is maintained, on behalf of the lead Cabinet Member.

2.3.4 Reporting on compliance

Swansea’s approach is that managers are responsible for compliance in how many of their staff are completing mandatory training within their own teams There are issues in how we report compliance across the whole Council as there have been other systems in use, for example in social services and Education to support regional approaches and national demands. Any system requires timely data input and routine quality checks for reporting on staff training records to be accurate. This will require the further development of self service and real time data management, which the proposed, next generation Oracle Fusion Electronic Resource Planning (ERP) system can support.

Appendix A

2.3.5 Oracle Fusion

Oracle is the Council's system for managing staff employment and training records, together with other resources such as budgets and assets. As there been ICT resources needed to support Agile working during recent months, A decision was taken in April 2020 to delay implementation of the new Cloud based ERP system (Oracle Fusion) to support real-time record reporting and review of staff training and data checks. We therefore took the difficult decision to pause the programme. The change programme was relaunched in February 2021, and the team are currently planning a new go-live date in 2022.

2.3.6 Work identified for year ahead:

- Ensure named safeguarding officers and service areas are represented at the Corporate Safeguarding group meetings
- Continue roll out of revised mandatory training across Council through hybrid programme of e-learning, virtual and face to face options to meet diverse needs of service areas and employees
- To work with Fusion team to ensure safe and accurate transfer of current staff records and to look at solutions to tackle the reporting issues highlighted above

2.4 Safe Practice

2.4.1 Safeguarding as “everyone’s business” -Swansea Council expects that vulnerable people in Swansea are kept safe, and protected from abuse and neglect. To best achieve this, safeguarding vulnerable adults and children is seen as “everybody’s business” Safeguarding practice has to be delivered timely and effectively, to expected standards and with consistency in practice. The Council can be assured that effective safeguarding arrangements are in place, and that all safeguarding practice within the wider workforce (including partners, providers and volunteers) is continuously improving and working towards enhancing the lives well-being and safety of Swansea citizens.

2.4.2 Person at the centre of each concern- In Swansea, safeguarding practice aims to be focused on the child or person at the centre of the concern, and working towards a set of agreed safe outcomes. By working collaboratively to identify and prevent abuse and neglect, where possible. To ensure all agencies, services and individuals can give timely and proportionate responses, in circumstances when possible occurrences of abuse or neglect of children and adults at risk has noticed.

2.4.3 How we implement Safe Practice in Swansea

2.4.3a Rights of a Child- the Council is committed to the 1945 Declaration of Human Rights, and the UN Convention on the Rights of a Child.

Appendix A

The Social Services and Well-being (Wales) Act (2014) has recently reviewed national guidance on safeguarding practice in Wales to ensure that children are safe and protected, and vulnerable people are able to live their lives fully, and to achieve their own wellbeing outcomes..

2.4.3b **Work with Children, Young People and Families**

In Child and Family Services, the Signs of Safety Practice Framework is a whole systems approach embedded across the service, whilst adhering to the prescriptive requirements of the Wales Safeguarding Children practice guidance.

In an effort to further embed our strengths-based approach, as planned children services underwent a full scale restructuring this year, through which we implemented a reclaiming social work design, introducing for example practice leaders as a separate function from team managers. Undergoing inspection during period of major restructure was an extraordinary challenge. The Inspection findings and feedback from the review team was both positive and constructive and further influenced our transformation plans.

2.4.3c **Contextual Safeguarding**

Contextual Safeguarding -the lives of hundreds of young people are being made safer, thanks to the Contextual Safeguarding pilot led by our service, but involving a whole range of partners. Swansea Council are working with Bedford University on Contextual Safeguarding Risk to improve our child exploitation work and practice, in the area of risks to children outside of the family (such as criminal or sexual exploitation). The Covid-19 lockdown has not stopped the project from pressing ahead with preventing exploitation and disrupting criminal networks and behaviour within the context in which the harm occurs.

A contextual approach to safeguarding requires us to look beyond the family to assess neighbourhood and peer group factors in considering risks to children and young people. Swansea's Contextual Missing Exploitation Trafficking multi-agency forum (CMET) tackles referrals, which can potentially impact on hundreds of young people. Youth workers have been doing vital outreach harnessing their skills to identify contextual risks and potential solutions.

2.4.3d **Rights of Adults**

The embedding of human rights as part of the Council's approach. This can be demonstrated by our commitment to the Dublin Declaration which requires a whole Council approach to involvement, engagement and coproduction. The Pandemic means that more thought needs to be given to how we live and how we safeguard our wellbeing both as individuals and within communities. We are continuing to work closely with the Older

Appendix A

Person's Commissioner's Office and CADR at Swansea University to ensure meaningful mechanisms for engagement of citizens 50+ within the "Live Well, Age Well Forum". Similar to work on engagement with Children and Young People, we have reflected upon our learning from engagement during the pandemic and refined the focus of our work on partnerships, rights-based policy the and involvement of stakeholders.

2.4.3e **Collaborative Communication**

A 'What matters to you' conversation is now central to how we work, across social service. Through a warm front door we can help promote wellbeing and prevent rapid escalation of needs. In Adult Services there is the Common Access Point (CAP), which is set up to help people explore what they need to enhance their personal wellbeing, taking in their strengths as well as risks in their situation, and the outcome they are looking for.

Access and Information Assistants in the CAP can also

- signpost to community-based services, such as local groups or charities.
- give information and Advice relating to care and support and assistance in accessing care and support
- Advise on how the care and support system operates in the local authority
- Advise on types of care and support available
- Explain how to access the care and support available
- Advise how to raise concerns about well-being of a person who appears to have needs for care and support.

2.4.3f **Adult Safeguarding**

A full review of safeguarding arrangements has been undertaken in Adult Services with the establishment of a dedicated safeguarding team to be incorporated into the temporary management structure in Adult Services. The changes are in their early stages though they have already received positive feedback from Care Inspectorate Wales (CiW) . The new Adult Safeguarding team are working hard to ensure that all concerns are addressed at the earliest opportunity, risks are managed effectively with partners using our practice approaches that place the person at the centre, with full involvement and engagement. More cases are being closed and Safeguarding concern investigations are now more likely to be followed through to conclusion, and where necessary supporting police to achieve a conviction.

2.4.3g **Deprivation of Liberty Safeguards** – The Deprivation of Liberty Safeguards were introduced in 2009 to protect against arbitrary deprivations of liberty in hospitals and care homes. These safeguards provide a legal framework that helps to ensure that human rights are protected once notified by a Managing Authority the Local Authority has a duty to assess

Appendix A

whether the restrictions are necessary in order to prevent harm to the person and proportionate to their needs. Swansea has significantly improved performance in relation to Deprivation of Liberty Safeguards (DoLS) through implementing dedicated team arrangements. Feedback suggests this has not only improved professional knowledge but is driving up standards and response times.

2.4.4 Case Examples

Safeguarding and protecting our most vulnerable citizens whilst ensuring their own voice is at the centre of our work remains a priority. Within a sustainable model of social care, we have to target our efforts are to where there is significant risk of harm and abuse and that we are working in a timely way, with the vulnerable person at the centre.

The following case studies reflect how by working in partnership and in new ways, the Council is in a stronger position to focus resources on more preventative and contextual approaches:

Case Example (1): Domestic Abuse

Following the onset of the Covid-19 pandemic hit, there were frequent reports in the media of heightened domestic abuse rates, however this was not reflected in number of police reports or referrals into specialist services. Domestic abuse helplines were seeing record numbers of contacts, but this was not reflected locally and there were concerns was that victims of domestic abuse were ‘staying put’, or feared that the ‘stay at home’ messaging would prevent them from leaving. In response to this, we prioritised awareness raising campaigns with a strong message that help was available and we developed multimedia campaigns linking to national campaigns and signposting to local support services. We also ensured that large-scale posters were on display in supermarket car parks and other public areas. Our Specialist Lead has worked with Microsoft to develop the first domestic abuse ‘Chatbot’ in Wales, which allowed professionals and members of the public to access round the clock information, advice and details of local support services in an interactive, anonymous way. We also secured funding to provide IT equipment and SMART phones to families affected by domestic abuse and additional target hardening equipment to reinforce the safety of the homes of high risk domestic abuse victims. We work closely with the with the Welsh Government, the Police and Crime Commissioner’s office and other partners to identify funding opportunities and alternative ways to increase resilience of projects, including training wider staff to assist and opportunities to increase resource.

This year we have re-structured our early help offer in Swansea, which includes representation from South Wales Police as part of the Early Action Together programme and representatives from Health and Education. The aim of our early help offer is to ensure that children and young people are able to access the right support at the right time, from the right service to prevent escalation of need. We have continued to offer Domestic Abuse training to our staff. More than 1,000

Appendix A

members of staff have completed our training on Domestic Abuse awareness training and we have developed a new draft Special Leave policy for staff who have suffered from Domestic Abuse

Case Example (2) Child and Family Early Help Hubs launched in April 2020

Early Help Hubs have been implemented in an interim format from 1st April 2020. to strengthen capacity and minimise the level of statutory intervention needed. There are now five co-located, multi-agency hubs, making use of the Signs of Wellbeing framework. The offer involves a multi-agency 'what matters' conversations at the front-door. The enhanced service also incorporates:

- Integrated Safeguarding Hub
- Access to YOS Services to improve behaviours and prevent family breakdown
- Use of multi-agency panels supporting preventative approaches

These Hubs strengthen partnership links to support joined up working and better step-down arrangements. The services is trialling the use and development of electronic 'auto-bot' responses to support queries around domestic abuse. Overall demand at social services social services front door (IIAA) is reduced as demand is re-directed to Early Help Hubs.

2.4.5 Work identified for year ahead:

- To ensure quality audits on cases are completed within child and family and adult services, as well involving leads from all Council Departments within the next Section 135 audit cycle.

2.5 Safe Partnerships

2.5.1 Working in partnership Only by working together with citizens, and other agencies, can we support children, their parents, carers and vulnerable adults to achieve the best possible outcomes. Collaboration is vital in promoting child, young person, adult and older adult safety and well-being. Good interagency, partnership, and multi-disciplinary working, is now firmly embedded within Swansea Council approaches to practice, and our work with other organisations is seen as central our robust, effective corporate safeguarding arrangements.

2.5.2 Covid Partnerships - Swansea Council and the West Glamorgan Regional Community Silver Command Group has overseen a coordinated, regional response to the Covid-19 crisis over the past 18 months. Many staff regionally and locally within the Council have volunteered for new roles and key tasks to meet the range of challenges, often working in partnership with colleagues from the Local Authorities, Swansea Bay University Health Board and the third sector. Colleagues from building services have supported Social Services to ensure provision of the PPE required for health and social care staff in providing direct care to people living in their own homes, or in care homes. Corporate colleagues have worked with social services to ensure routine testing of care and support staff, and within Contact & Tracing, A large number of staff from

Appendix A

across the Council have been involved in providing direct support to our most vulnerable citizens on a local basis, within communities.

2.5.3 Safer Swansea strategy

Harm is sometimes more related to place than people, and this also requires a more joined up approach. Harm, exploitation or victimisation may target or impact on the most vulnerable in our communities and the Council has access a range of approaches from prevention, duty to report, and possible criminal investigation. Swansea Housing Service are working in partnership with social services, the police, community safety and other housing providers to safeguard the vulnerable by highlighting issues, concerns and taking necessary action as asset out in our Safer Swansea Strategy 2018-21.

2.5.3a Hate Crime - the prevention and reduction of Hate Crime and Community Tension Monitoring is one the five strategic priorities identified, which aims to prevent Hate Crime, support victims and improve a multi-agency responses to the problem. Our Hate Crime Stakeholder Action Plan' continues to be managed and monitored through the Hate Crime Stakeholder Group and the Safer Swansea Partnership Steering Group.

2.5.3b Victim Support- the Council continued to support Hate Crime awareness week in October 2020 and signed up to Victim Support's Charter. The Charter sets out in detail the rights of victims, and the commitments of organisations such as the Council in tackling Hate Crime, providing support and information for victims, and raising awareness of Hate Crime.

2.5.3c PREVENT Our PREVENT strategy and interventions programme target support to vulnerable individuals who may be at risk of radicalisation or being drawn into extremism. This is managed through a multi-agency (channel) partnership made up of organisations that have a legislative duty under the Counter Terrorism Act 2015

2.5.4 Regional Safeguarding - Swansea Council is working to ensure there is effective regional safeguarding board arrangements, established for the new West Glamorgan region, to replace the Western Bay boards. The Board will have a clear business plan setting out objectives and shared accountability across a range of partners, with targeted campaigns, promoting preventative approaches, performance reporting and learning lessons from practice reviews

2.5.5 Case Examples- some other examples of safe partnerships working across the Council:

Case Example (1) Education

Appendix A

Within Education, there is a rolling programme of child protection and safeguarding training delivered to all staff and school governors. There is a dedicated Education Child Protection and Safeguarding Officer. Safeguarding Audit visits are carried out with schools being re-visited on a three year rolling programme basis. Each school has a completed analysis of the visit with an action plan of issues that are identified in the visit. Through effective monitoring, education can provide a regular report on Education Safeguarding issues. Education and social services are now jointly delivering Level 2 Safeguarding Child/ Protection training

Case Example (2) Mayhill Response
Whilst there is an independent review taking place, Multi agency teams across adult and children’s services, Tackling poverty, Local Area Coordinators have worked tirelessly alongside Place workers to provide a supportive, community based response to the recent Mayhill Incident.
This work takes place alongside consideration of the unexpected death of a young adult under 21, the practice review involving partner agencies is already looking at potential improvements to practice

2.5.6 Work identified for year ahead:

- To invite leads in all service areas outside of social services to discuss how they review safe practice in their areas to help inform further improvements, and in readiness for next Section 135 audit.

2.6 Safe Voice

2.6.1 Making safeguarding personal – In all of the above examples of service developments and safe practice, Swansea is aiming to ensure individuals have a “safe voice” on safeguarding matters by providing stronger voice, meaningful control over the support they receive and remove any barriers to achieving their wellbeing outcomes.

2.6.2 Quality Assurance- Child and Family Services are implementing a quality assurance framework that articulates the high standards of service we expect in all work with children and young people Recognising that we need to focus on understanding the lived experience of our children, young people and families who receive a service. To achieve this, Child and Family Services are expanding how we get information both qualitative and quantitative to help identify improvements.
For example, by identifying best practice through our child protection and crisis work, using appreciative enquiries with children and families This framework is designed to ensure that all our safeguarding action is proportionate and timely, and that we built a culture committed to continual learning, checking by audits and professional development. Similar approaches are also taken place in Adult Services.

Appendix A

2.6.3 Looked after children

Children and Young People are benefitting from the work of the Safe LAC Reduction Operational Group (SLOG) and the staff that support the group's work. Everyone involved has been praised by the Head of Service, POs and Senior Management Team as it has achieved a month on month reduction in the LAC population since July 2020. This programme was set up last year to enable a whole service approach to getting children back with their families or otherwise achieving genuine permanence, safety and security until they reach adulthood. It was in response to escalating LAC numbers. The SLOG comprises of members from Permanence, SQU, SCP, FAFFT, Bays+ and has the facility to call in additional expertise as and when needed. It provides a unique forum of experts to support practitioners to address barriers and obstacles to support the development of care and support plans that can achieve permanence for our looked after children.

2.6.4 Case Examples

Case Example (1) – Best life project Corporate Parenting Board and Care Experienced Children and Young People (CYP) have recently developed what the key areas of a best life are, the main areas for development for each area, and who is going to take accountability for improving services around those themes. The next stage will be sub-groups unpicking the “hows” and reporting back to our care experienced population what we have done, what difference they should see and what we haven't been able to do

Case Example (2) - Voice & Control –Children and Young People

Covid-19 has meant new national guidance to staff, and huge challenges posed by the lockdown period have, at the same time, created opportunities to adapt and improve ways of working.

These themes are reflected within the Big Conversation.

Moving to digital platforms presented challenges for county-wide, and cross-county working with large numbers of children and young people. This period has enabled dialogue to review how this is facilitated in the future, e.g. how operations for listening to children and young people, and to ensure the policies refined to ensure they are fit for purpose and encompass new ways of working, e.g. Children's Rights Scheme

2.6.5 Work identified for year ahead:

- Checking out how Swansea is 'Making safeguarding personal' by carrying out case audits within Quality Assurance framework
- Development of advocacy offer and independent support to promote citizen rights and best interest decision within safeguarding and deprivation of liberty safeguards

Appendix A

- Working within families, communities and schools to promote safeguarding awareness

2.7 Delivering Safe Performance

The aim of this work area is to maintain a performance framework to support a full range of improvement activities in relation to Corporate Safeguarding.

2.7.1 Performance Framework

Swansea Council has a strong corporate performance framework to drive through continuous improvement. Our approach to safeguarding makes full use of a range of embedded approaches:

- Corporate Plan / Annual Review of Performance against each wellbeing objective
- Service Planning
- Corporate Risk Management
- Scrutiny Performance Panels
- National Performance/ Quality standards
- Corporate Performance reporting
- Self-assessment (section 135 audit)

2.7.2 Annual Review of Performance (ARP) – a statutory requirement that requires the Council to look in detail about how the Council is taking steps to achieve each of the corporate priorities, including safeguarding people from harm, and the progress made. Latest ARP is being finalised and the section on safeguarding covers a broader range of corporate activities than this

2.7.3 Service Planning - Service Planning is carried out annually by all Heads of Services. Service Plans are expected to demonstrate links to corporate priorities, and policy commitments, including safeguarding people from harm.

2.7.4 Corporate Risk Management- safeguarding is identified as a corporate risk (Risk id 153), and detailed within the new corporate risk register, with actions to mitigate reviewed monthly, within Social Services Finance and Performance Monitoring meetings, and updated. As mentioned earlier, Internal audit has a work programme, aligned to the work of the. Governance and Audit Committee, to include consideration of areas such as corporate risk management and corporate governance.

2.7.5 Role of Scrutiny Performance Panels

Child and Family Services and Adults Scrutiny Performance Panels receive and give robust consideration to regular performance reports from their respective service areas including safeguarding and protection work, and each panels has a Work Programme to look in more depth on key issues.

Appendix A

2.7.6 Corporate Performance Reporting - Corporate Management Team receives regular reports on key performance measure and operational issues concerning safeguarding children and adults. The full Corporate Performance Management Annual Monitoring Report 2020/2021, including results within the section on Safeguarding, was presented to Cabinet in July this year.

2.7.7 National Social Services Performance Framework

The committee are advised that Welsh Government are implementing changes to the Quality Standards (Key Performance Indicators) which provide the basic benchmark of performance for local authorities who deliver care and support to the people of Wales.

2.7.8 Other areas to note:

2.7.8a Director of Social Services Annual Report- this report - a statutory requirement - sets out how Swansea Council is safeguarding and protecting citizens through its social services and wellbeing functions, and presented to Council by the Director.

2.7.8b Section 135 Audit Summary of Findings – improvements identified from this year's S135 audit are incorporated into a revised work programme (**see Appendix C-**). Task groups, already established to support Swansea approach, are to take the programme forward and report progress cycle for task group leads to the Corporate Safeguarding group

2.7.8c Learning Lessons – Swansea has to seek to continuously improve practice and policy by apply the key learning points as they apply from Regional Child Practice and Adult Practice Reviews. The aim is that the potential improvements will be brought to the Corporate Safeguarding group and, where necessary, incorporated into the work programme.

2.7.9 Work identified for year ahead

- To incorporate findings from the Section 135 audit into future annual reports
- To review set corporate performance indicators in readiness for reporting in 2022-23

Appendices:

- Appendix A.- Corporate Safeguarding Governance arrangements**
- Appendix B. Terms of Reference for Corporate Safeguarding group**
- Appendix C. - Work programme –Corporate Safeguarding group**
- Appendix D. – Swansea Council's Named Safeguarding persons**

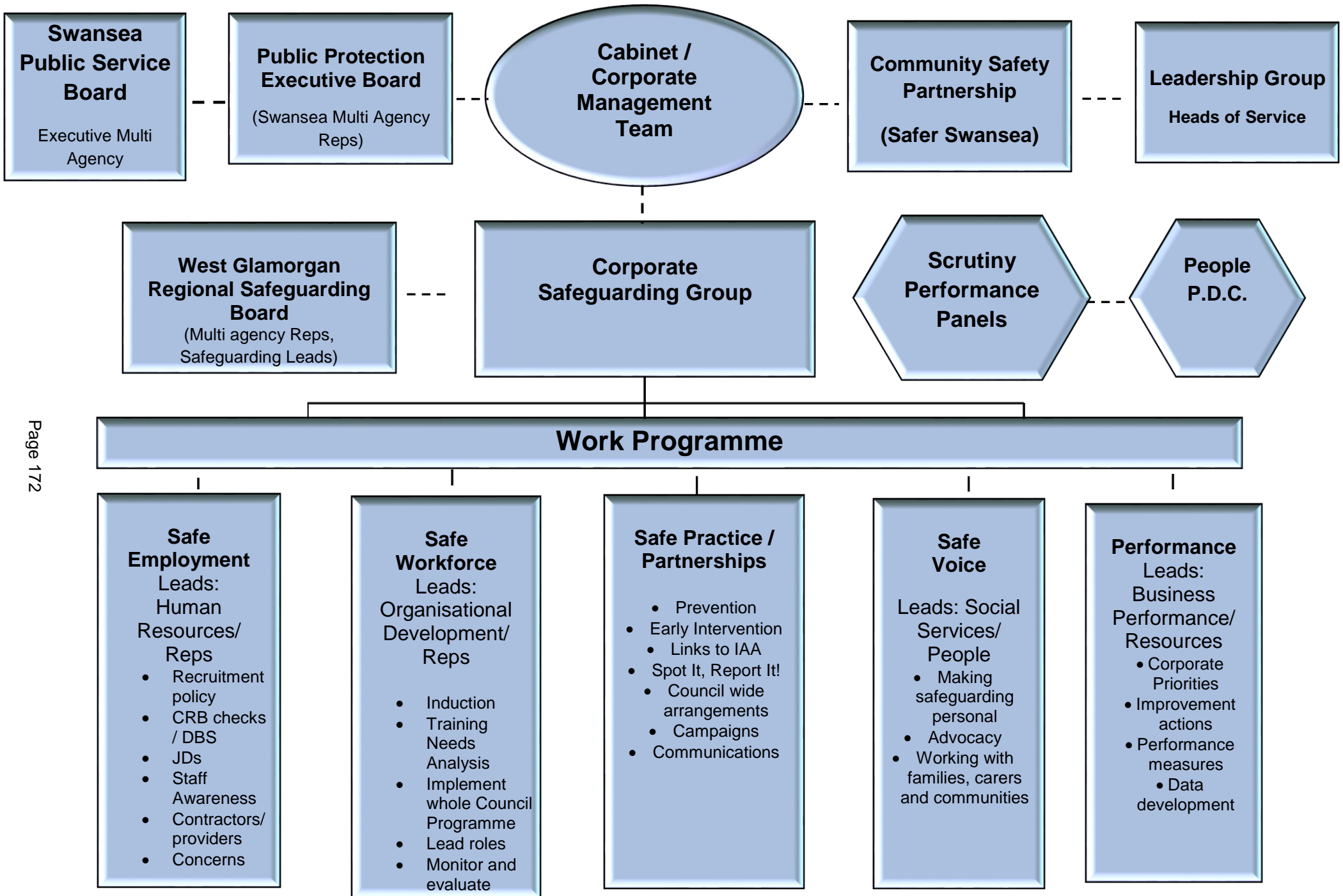


Figure 2. Safe Governance: Current structure (August 2021)

Appendix A

Appendix B. Terms of Reference for Corporate Safeguarding group



Corporate Safeguarding Group **TERMS OF REFERENCE v1** **July 2018**

1. PURPOSE

Swansea Council's Corporate Safeguarding Group is the management and leadership group overseeing implementation of Corporate Safeguarding policy. The group provides 'safe governance' as set out in the policy, and, through an agreed work programme, aims to ensure that all Council service areas are operating effectively within this policy with robust safeguarding arrangement in place.

2. FUNCTIONS / RESPONSIBILITIES

Swansea Council's Corporate Safeguarding Policy aims to protect the most vulnerable people in our communities, so it is vitally important that all staff, services and partner organisations are aware of how all the work of the Council contributes to safeguarding people in Swansea, and what is expected of them individually and collectively.

The Corporate safeguarding group will lead and co-ordinate a work programme to embed 'everybody's business' approach to corporate safeguarding, and to deliver actions in support of the Council's the Council's strategic objectives and corporate priorities, in particular our safeguarding vulnerable people in Swansea.

The group also supports delivery of national and local outcomes, and promotes ways of working under the Well-being of Future Generations (Wales) Act 2015, and this includes a focus on prevention and collaboration.

To enable a diverse range of statutory partners, agencies and groups to work together effectively to deliver the agreed programme of work

This group, through a range of activities set out in the work programme, can give assurances to members of the public, service users, councillors, employees and people working on behalf of the Council that there are clear arrangements in place to safeguard and protect children and adults:

Appendix A

- statutory functions of safeguarding adults and children are carried out in line with guidance and Part 7 Code of Practice within the Social Services and Well-being (Wales) Act 2014.
- compliance in all areas of safeguarding policy, and in particular mandatory training of staff and elected members, and the duty to report any safeguarding concerns about vulnerable adults and children, and to investigate concerns as necessary.
- service designated safeguarding leads can give and account for the delivery of the Councils policy and corporate priority outcomes in relation to safeguarding to this group and to other management meetings
- escalating trends, concerns or issues to Safeguarding Boards or other relevant Boards regionally or locally

The current work programme is agreed and implemented in support of these objectives

3. MEETING ARRANGEMENTS

Frequency: Quarterly

Chair: David Howes – Director of Social Services, Swansea Council

Mark Child - Cabinet Member for Care, Health and Ageing Well is invited to attend all meetings.

Meetings will be supported and administered by business support, People Hub

Agenda is distributed to members at least 3 working days prior to the meeting.

An action log of each meeting is distributed to all leads/ group members, and actions to be completed are reviewed at every meeting.

Any requests for additional meetings or specific agenda items can be addressed to the Chair.

4. MEMBERSHIP

The membership of the Steering Group comprises of safeguarding lead officers (social services), cabinet member, designated safeguarding lead officer (all service areas) and business support.

A safeguarding contact list is kept up to date by business support, as this resource is made available via Staff Intranet pages, and via a link within the relevant eLearning courses.

5. ATTENDANCE/DEPUTISING ARRANGEMENTS

Leads are obliged to attend regularly, and/or to identify and ensure attendance of an appropriately senior representative in their absence.

Appendix A

6. TASK GROUPS

The Corporate Safeguarding Group has a work programme, in which task groups have been set up deliver on several policy areas, and to report on progress achieved:

- Safe Employment
- Safe Training
- Safe Practice / Safe Partnerships combines
- Safe Voice
- Safe Performance

7. Governance

The Corporate Safeguarding group reports and accountable to Corporate Management Team.

A full governance structure is included in the Council's Corporate Safeguarding Policy.

Appendix A

Appendix C: CORPORATE SAFEGUARDING GROUP WORK PROGRAMME/ WORK GROUPS (2020/21)

WORK GROUP	AIM OF GROUP	SCOPE OF WORK
<p>1. Safe Employment Lead Officer: Nicola Reid</p>	<p>To ensure safe employment practices are in place to safeguard vulnerable children and adults.</p>	<ol style="list-style-type: none"> 1. Updating safeguarding elements within Council recruitment policy and staff handbook. 2. Ensure DBS checks are undertaken for roles that have identified as required and review of DBS processes/policies – who reviews decision on DBS risk assessments and the need for this. 3. Safeguarding roles and responsibilities are reflected with all Job Descriptions 4. For all contractors to confirm that they comply with Swansea Council Safeguarding Policies and their staff or their sub-contractors staff are aware of their responsibilities and duties and when required provided or able to provide safeguarding awareness raising and training.
<p>2. Safe Workforce Lead Officer: Teresa Mylan Rees</p>	<p>To ensure that all Staff, Elected Members across SC directorates as well as our Foster Carers, Direct payment PA's and commissioned providers are trained/qualified to the appropriate level and therefore aware of their responsibilities and duties to report regarding the safeguarding of Adults and Children. To ensure SC has a register of Safeguarding leads in each area and that each area has a Named Safeguarding person (NSP).</p>	<ol style="list-style-type: none"> 1. Identification of Named Safeguarding person role within each service and development of system within Safe workforce group to keep this updated 2. Named Safeguarding person (NSP) training to be designed and delivered across Adult and Child and Family Services Named Safeguarding Person training (children) and named safeguarding person training (Adults), Safeguarding Adults Non Criminal Investigation Training Level 4 3. Insuring all Council Staff know their safeguarding responsibilities through the Induction Process via corporate induction and managers across directorates and teams. Safeguarding training provides staff with guidance on how to raise concerns through existing policies and procedures: <ul style="list-style-type: none"> o Corporate Induction o Social Services o Housing o Elected Members o Education o Place o Resources <p>Set up a process and system to enable a consistent approach to collate and monitor mandatory safeguarding training and associated</p>

Appendix A

Safe Workforce cont.		<p>training relating to statutory reporting responsibilities e.g. VAWDASV group 1 (face to face or e-learning), Modern slavery awareness.</p> <ol style="list-style-type: none"> 4. Carry out training needs analysis within service to ensure all service area managers and employees receive the appropriate level of safeguarding e-learning or face to face corporate mandatory training ,(level 2 child protection/safeguarding, level 2 safeguarding adults, level 3 child protection/safeguarding, level 3 safeguarding adults) 5. All Council elected members undertake safeguarding training / e-learning 6. Reporting on regional safeguarding developments / safeguarding campaigns – National Safeguarding Week, CSE Day, Facilitation of practice learning events for relevant professional 7. Ensure that all training reflects current legislative and policy objectives at a national, regional and local levels 8. To have a realistic and achievable target for staff completion of mandatory safeguarding training
<p>3. Safe Practice & Safe Partnerships Lead Officer: Damian Rees</p>	Ensure safe practice across Swansea in respect of responding and reporting to safeguarding matters	S.135 Compliance audit to be completed and include adult services as well as all Council Departments
<p>4. Safe Voice Lead Officer: Ffion Larsen</p>	Ensure individuals have a “safe voice” on safeguarding matters by providing stronger voice, real control over the support they receive and remove any barriers to achieving their wellbeing outcomes. Also ensure that individuals feel that they are equal partners in the process and that intervention is meaningful. There will be focus on early intervention to prevent needs escalating	<ol style="list-style-type: none"> 1. Ensure that Covid 19 changes in practices and policies focuses on safeguarding and the voice of the individual. 2. Ensure that every conversation matters by working to ensure meaningful interventions at every level 3. Provide accessible information to support participation and understanding. 4. Collaborative Communication: embed a person centred approach Adult SW practice, including safeguarding, by placing the individual central to the safeguarding. Ensuring needs, goals and outcomes are captured. 5. Emphasis of making safeguarding personal in adult services to ensure the process is meaningful for individuals with emphasis on prevention and early intervention. 6. Develop tools for practitioners to support a person centred approach to collaborative communication and safeguarding. 7. Focus on qualitative reporting on outcomes and well as qualitative measures. Develop an auditing and quality assurance framework 8. Ensure that individuals are aware of their rights and their human rights 9. Educate partners on the need to be person centred

Appendix A

5. Safe Performance Lead Officer: Simon Jones	To develop and implement a performance framework to cover full range of improvement activities in relation to Corporate Safeguarding	<ol style="list-style-type: none">1. Framework of performance / improvement activities linked to Corporate safeguarding (Golden thread)2. Complete the Annual review of Performance – Corporate Plan/ Annual Report3. Update and publish latest version of Corporate Safeguarding Policy4. Support data development in the reporting of suite of key performance measures to Senior Managers/ Elected Members5. Regulatory compliance for corporate safeguarding arrangements, backed by self- assessment / audit cycle
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Appendix A

APPENDIX D. LIST OF NAMED SAFEGUARDING PERSONS AND LEADS

Safeguarding Contacts 2021

Service	Safeguarding designated lead	Safeguarding contact
Social Services (Child and Family)	Damian Rees – Principal Officer (Safeguarding Performance Quality)	Damian Rees – Principal Officer (Safeguarding Performance Quality)
Social Services (Adults)	Ffion Larsen – Principal Officer (Safeguarding & Prevention)	Ffion Larsen – Principal Officer (Safeguarding & Prevention)
Poverty and Prevention	Sue Peraj – Team Around the Family Manager	Sue Peraj – Team Around the Family Manager
Education	Kate Phillips – Head of School Support Unit	Lisa Collins – Child Protection and Safeguarding Officer
Education – Lifelong Learning	Kay Piper - Lifelong Learning Service Operations Team Leader	Kay Piper - Lifelong Learning Service Operations Team Leader
Housing Services & Public Protection	Jane Harries – Landlord Services Manager	Jane Harries – Landlord Services Manager
Cultural Services	Karen Davies – Principal Librarian	Karen Davies – Principal Librarian David Jones – Sport and Health Manager Joanna Furber – Literature Officer
Highways and Transport	Cath Swain – Integrated Transport Unit Manager	Cath Swain – Integrated Transport Unit Manager
Building Services	Malcolm Jones – Adaptations and Voids Senior Manager	Malcolm Jones – Adaptations and Voids Senior Manager
Waste Management & Parks	Rebecca Tribe – Recycling Team Supervisor	Rebecca Tribe – Recycling Team Supervisor

Appendix A

Service	Safeguarding designated lead	Safeguarding contact
Economic Regeneration & Planning	Phillip Holmes – Head of Planning & City Regeneration	Phillip Holmes – Head of Planning & City Regeneration
Legal, Democratic Services & Business Intelligence	Lucy Moore – Directorate Lawyer	Lucy Moore – Directorate Lawyer
Communication & Customer Engagement	Liz Edmonds – Chief Executive’s Support Officer	Lee Wenham – Head of Communications & Marketing
Information & Business Change	Jo Harley – Head of Service	Sarah Caulkin – Director (Resources)
Financial & Performance Services	Ben Smith – Chief Finance Officer	Ben Smith – Chief Finance Officer
HR & Organisational Development	Nicola Reid – Principal HR&OD Business Partner	Nicola Reid – Principal HR&OD Business Partner
Commercial Services	Lee Morgan – Category Manager	Lee Morgan – Category Manager

Corporate Safeguarding Champion - Councillor Mark Child

Social Services Information, Advice and Assistance

Adult Safeguarding enquiries via CAP: 01792 636854
or email:

Adult.safeguarding@swansea.gov.uk

Child and Family Services (Information, Advice and Assistance) 01792
635700

[access.informatio](#)

n@swansea.gov.uk

Opening Hours:

8.30am - 5.00pm Monday to Thursday

8.30am - 4.30pm Friday.

The Emergency Duty Team is available outside normal working hours on 01792 775501.

In an emergency where an adult or child may be at immediate risk of harm please contact 999

Appendix B. Integrated Impact Assessment Screening Form

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

Which service area and directorate are you from?

Service Area: Swansea Council

Directorate: Social Services

Q1 (a) What are you screening for relevance?

- New and revised policies, practices or procedures
- Service review, re-organisation or service changes/reductions, which affect the wider community, service users and/or staff
- Efficiency or saving proposals
- Setting budget allocations for new financial year and strategic financial planning
- New project proposals affecting staff, communities or accessibility to the built environment, e.g., new construction work or adaptations to existing buildings, moving to on-line services, changing location
- Large Scale Public Events
- Local implementation of National Strategy/Plans/Legislation
- Strategic directive and intent, including those developed at Regional Partnership Boards and Public Services Board, which impact on a public bodies functions
- Medium to long term plans (for example, corporate plans, development plans, service delivery and improvement plans)
- Setting objectives (for example, well-being objectives, equality objectives, Welsh language strategy)
- Major procurement and commissioning decisions
- Decisions that affect the ability (including external partners) to offer Welsh language opportunities and services

(b) Please name and fully describe initiative here:

Annual Report Corporate Safeguarding 2020-21

Q2 What is the potential impact on the following: the impacts below could be positive (+) or negative (-)

	High Impact		Medium Impact		Low Impact		Needs further investigation
	+	-	+	-	+	-	
Children/young people (0-18)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Older people (50+)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any other age group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Future Generations (yet to be born)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Race (including refugees)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asylum seekers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gypsies & travellers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religion or (non-)belief	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual Orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gender reassignment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Welsh Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poverty/social exclusion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carers (inc. young carers)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community cohesion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marriage & civil partnership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pregnancy and maternity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Appendix B. Integrated Impact Assessment Screening Form

- Q3** What involvement has taken place/will you undertake e.g. engagement/consultation/co-productive approaches?
Please provide details below – either of your activities or your reasons for not undertaking involvement

The purpose of the Annual Report -Corporate Safeguarding 2020-21 is present a comprehensive review of the implementation of the Council's Corporate Safeguarding policy, which promotes a "Safeguarding as everyone's business" approach. Safeguarding people from harm is a corporate priority in Swansea Council's Corporate Plan. The report produced jointly on behalf of the lead Cabinet Member and Director of Social Services sets out the evidence –based view of the Director, on progress within a work programme, and the priorities for further improvement.

- Q4** Have you considered the Well-being of Future Generations Act (Wales) 2015 in the development of this initiative:

- a) Overall does the initiative support our Corporate Plan's Well-being Objectives when considered together?
Yes No
- b) Does the initiative consider maximising contribution to each of the seven national well-being goals?
Yes No
- c) Does the initiative apply each of the five ways of working?
Yes No
- d) Does the initiative meet the needs of the present without compromising the ability of future generations to meet their own needs?
Yes No

-
- Q5** What is the potential risk of the initiative? (*Consider the following impacts – equality, socio-economic, environmental, cultural, legal, financial, political, media, public perception etc...*)

High risk

Medium risk

Low risk

-
- Q6** Will this initiative have an impact (however minor) on any other Council service?

Yes No If yes, please provide details below

-
- Q7** What is the cumulative impact of this proposal on people and/or communities when considering all the impacts identified within the screening and any other key decisions affecting similar groups/ service users made by the organisation?

(You may need to discuss this with your Service Head or Cabinet Member to consider more widely if this proposal will affect certain groups/ communities more adversely because of other decisions the organisation is making. For example, financial impact/poverty, withdrawal of multiple services and whether this is disadvantaging the same groups, e.g., disabled people, older people, single parents (who are mainly women), etc.)

Appendix B. Integrated Impact Assessment Screening Form

The report reflects the views of the lead Cabinet Member and Director of Social Services in Swansea, to whom people are entitled to express their views of how effective the services are:

- In meeting wellbeing and needs of targeted populations
- In delivering on priorities set in past annual report
- Achieving a sustainable model of social care
- In providing assurances about the quality of services, against national standards

The report provides elected members, the public and stakeholders with the summary of the Council's approach to corporate safeguarding, progress within the work programme, and priorities for future improvement. This report is informed by the work of Swansea Council's Corporate Safeguarding group which is jointly chaired by the lead Cabinet Member and Director of Social Services.

The Corporate Safeguarding group includes representatives, and named safeguarding officers from all service areas within the Councils the

The report also contains a summary of Swansea Council's progress in implementing the changes arising out of the Audit Wales follow up review of corporate safeguarding children. A report setting out a full summary of how Swansea is responding to the Audit Wales report's recommendations, and where progress is being made against the areas of improvement needed was presented to Child and Family Services Performance panel in and more recently to Governance & Audit Committee in July 2021: Governance&AuditReport_July2021.

Outcome of Screening

Q8 Please describe the outcome of your screening below:

- **Summary of impacts identified and mitigation needed (Q2)**
- **Summary of involvement (Q3)**
- **WFG considerations (Q4)**
- **Any risks identified (Q5)**
- **Cumulative impact (Q7)**

• **Summary of Impacts (Q2)** Impacts are positive and low on specific groups due to the nature and purpose of the report as explained above.

• **Summary of involvement (Q3) Social Services work closely with other** Swansea Council services, Swansea Bay University Health Board, Third Sector organisations, Social Care providers, West Glamorgan Regional Partnership Boards and works co-productively on services development and commissioning plans. This development work and the involvement of others has been involved in this report.

• **WFG considerations (Q4)** Well-being of Future Generation forms part of the overall plan and as part of the transformation and improvement programmes within Council services, which are working towards a sustainable model of service. Health, social care and wellbeing is a significant part of the local and regional economy of Swansea, and the report focused on the range of services and other organisations which form part of this economy. A skilled, qualified workforce, who have a duty to report safeguarding concerns, is vital to improving wellbeing outcomes for Swansea citizens, and in achieving the corporate objective – safeguarding people from harm..

• **Any risks identified (Q5)** The improvements and transformation programmes set out within this plan are risk managed closely. Any risks identified and agreed, are mitigated as routine within social services at service, directorate and corporate levels through monthly Social Services Performance and Financial Monitoring meeting and Corporate Safeguarding group

Appendix B. Integrated Impact Assessment Screening Form

escalated accordingly through to appropriate corporate and political structures. Some of the wider impacts for example those emerging during the Covid pandemic, and their associated risks have been, and will continue to be, managed through the regional partnership structures.

• **Cumulative impact (Q7)** There is a positive impact on the wellbeing of Swansea citizens though the continuous improvement of corporate safeguarding arrangements, and the benefits this brings to the social care economy and wider social care workforce.


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

Full IIA to be completed

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

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

Screening completed by:
Name: Simon Jones
Job title: Social Service Strategic Performance & Improvement Officer
Date: 26th October 2021

Approval by Head of Service:

Name: David Howes
Position: Director of Social Services
Date: 12 August 2021

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

Agenda Item 12



Report of the Deputy Chief Executive

Governance & Audit Committee – 9 November 2021

Update on Swansea Achieving Better Together

Purpose:	This report provides an update on the Recovery and Transformation Plan. Swansea – Achieving Better Together.
Policy Framework:	Transformation and Future Council
Consultation:	Legal, Finance, Access to Services.
Report Authors:	Marlyn Dickson / Adam Hill
Finance Officer:	Ben Smith
Legal Officer:	Debbie Smith
Access to Services Officer:	Rhian Millar
For Information	

1. Introduction

- 1.1 On 15th October 2020 Cabinet approved the new “From Recovery to Transformation” report detailing the 3 Phases from recovery through to the “Swansea – Achieving Better Together, Transformation Strategy & Programme Framework 2022 – 2026”.
- 1.2 The information below sets out the background and current position with regards to the work programme.

2.0 Background

- 2.1 The main purpose of the Achieving Better Together Programme is to ensure the council is sustainable, efficient and effective in what and how it delivers its services with the citizen at the heart of all that we do. We want to ensure the right services are available to our communities in the right way and at the right time for them.

2.2 As well as identifying the priorities in the short and medium term, the Achieving Better Together framework aims to set the foundations for establishing the longer term shape of the council, looking ahead to the next 20 years to 2040.

2.3 The strategic aims of Swansea – Achieving Better Together are:

- The core purpose of the Council
- Transforming services to be effective and efficient
- Greater collaboration with other Councils, organisations, community groups and residents, with a focus on regionalisation
- Balancing the budget for current and future years
- Greater and more meaningful engagements with our residents and community
- To meet the aspirations and targets within the Medium Term Financial Plan.

2.4 The programme key reporting milestones to date:



To further assist the Achieving Better Together Programme, more recently, Swansea Council’s internal audit team carried out an examination of the programme, governance and structure. An Assurance Level of **'High'** was awarded. This indicates that ‘there is a sound system of internal control designed to achieve the programme objectives and the controls are being consistently applied’. There were no recommendations following the examination.

2.5 The programme phases are not linear but overlap so the work undertaken in the prior phase will inform the next phase.

Phase 1 – Short Term	Re-mobilise	Recovering, restarting & adapting a wide range of Council Services
Phase 2 – Medium Term	Refocus (Up to May 2022)	A strategic response to support the city to emerge and grow from the crisis delivering our corporate priorities

Phase 3 – Long Term (work in Phase 1 and 2 will support the actions in Phase 3)	Reshape (After May 2022)	Longer term City and County regeneration and development strategy
---	--------------------------	---

The work of both the Remobilise and Refocus phase have continued throughout the new pressures of the COVID pandemic and continued impact of COVID. The Councils response has had an impact on progress, however the work-streams have all worked through their agendas to Recover and Refocus the Council.

3.0 Recovery Well Underway

3.1 The council did not only maintain services throughout the pandemic but is well underway on its journey to refocus the Council. Many of the services transitioned to working from home and the many capital and development programmes were maintained through the planning and preparation process to ensure at the first opportunity and when safe to do so, the projects, plans and strategies were re-introduced and building work began, ensuring that Swansea didn't fall behind in its ambitions and programmes to make Swansea better.

3.2 The Achieving Better Together programme is clear in its message that the purpose of the programme is to enable a sustainable, efficient and effective organisation with the citizens of Swansea at the heart. The remobilise phase initiated a plan that done just that, it called on resources from across the organisation to support local residents, communities and businesses through the pandemic as a priority.

This included a range of interventions from:

- Food banks and support for those shielding
- Issuing grants to businesses and direct payments to carers, those self-isolating, or to parents for free school meals.
- A shift to online channels supported more residents completing online forms for service requests.

3.3 The Council was in a strong position going into the pandemic which enabled desk based staff to make the shift to homeworking easily. In addition, staff from across services got involved in volunteering or supporting vital work to help residents and businesses.

3.4 The Achieving Better Together Programme is contributing towards the achievement of the national well-being goals.

• *A prosperous Wales* – Supporting and training the Council's workforce to deliver transformed services that provides the most sustainable outcomes for residents.

• *A Resilient Wales* – The Managing the Present and Shaping the Future, Swansea Council – From Recovery to Transformation Strategy underpins our recovery from Covid-19 and aims in order to transform services, deliver better outcomes for residents and achieve financial sustainability with reduced carbon footprint.

- *A Healthier Wales* – The programme work streams have projects in phase 2 – (Refocus) that aim to: encourage greater community ownership, improved health and wellbeing for staff, provide active lifestyle and healthy living for our citizens e.g. our approach to Housing and the Active Travel Project.
- *A more Equal Wales* – Providing the opportunity for local citizens to influence how policies are written and services are developed through the development of a co-production strategy.
- *A Wales of Cohesive Communities* – The Community Response work-stream has a strong focus on community involvement. Projects include: supporting community volunteering, Local Area Coordinators expansion and working with third Sector and other statutory and non-statutory partners in Swansea and encourage the continuation of community relationships.
- *A Wales of vibrant culture and thriving Welsh language* – Through the coproduction framework we will establish a diverse forum for community volunteers to be involve in the decision-making process and give them an opportunity to express their views and opinions. The programme will improve the communication and engagement with communities, which includes welsh medium provision.
- *A globally responsible Wales* – The Achieving Better Together programme has a focus on the future and delivering social, environmental, cultural, economic and financial sustainability through the work-streams. Any decision making considers future impacts e.g. climate change.

3.5 The Re-mobilise phase set the 2021/22 budget and refreshed the MTFP. This work was undertaken in the Recovery, Reshaping and Budget Strategy Board and has been closely monitored each month from May 2021.

3.6 The current status for the MTFP delivery is positive and on target to be delivered for the financial year 2021/22. The MTFP delivery tracker is reviewed and issues or risk raised at the Recovery, Reshaping & Budget Strategy Board along with an overview of whether the delivery is on track.

See Appendix 1

4.0 Refocus Phase to Reshape Phase

4.1 Phase 2 – Refocus is supporting the council to deliver its ongoing corporate priorities and plans, whilst adapting to address the impacts coming out of the COVID crisis.

4.2 The continued impact of COVID and the Councils response has had an impact on progress, however the work-streams have all worked through their agendas to refocus the Council. The streamlined Governance structure for phase 2 – Refocus can be found in **Appendix 2**

4.3 Work is ongoing in relation to the continued recovery, refocussing and reshaping the Council and is structured around the following work streams;

- Care Services
- Education and Learning
- Future Workforce and Equalities
- Community Support
- Economy and Environment

4.4 The work-streams have shown great examples of working together and in partnerships to achieve outcomes for our organisation, staff and the citizens of Swansea since the start of the refocus plan in March 2021, achievements include (but are not limited to):

For Our Staff and Organisation

- Relaunch of the Leadership hub
- Relaunch of the Ideas Hub
- Involvement Workshops
- Programme timetable for MTFP
- Reporting process for Economic Recovery Fund Monitoring
- Renewed Agile Policy
- Ensuring Staff have a safe environment (e.g. office furniture, DSE risk assessment. available for working from home)

For Our Citizens

- Local Area Coordination expansion across Swansea
- Volunteering Toolkits and Training Launched
- Safeguarding & Wellbeing - monitoring of vulnerable children with a shared criteria of understanding vulnerability being used between Education and Child and Family Services.
- Both Education and Child and Family have a Single Point of Contact in relation to vulnerable children accessing on site provision.
- Partnership approach to Community Project to provide free refurbished smart phones with free credit via partner organisations to residents; over 162 phones distributed so far this year. More partners engaged to donate mobiles
- Homelessness Strategy - Over 400 positive moves from temporary accommodation into more suitable supported or permanent accommodation
- Covid Economic Recovery Plan Local businesses supported, safeguarding jobs and securing new investment.

4.5 It is always acknowledged that the programme has a requirement to be flexible as there are influences outside of our control that could require a change in approach such as external issues, legislative or guideline changes. This has been the case following a recent Nature Emergency

declaration by Welsh Government, although the Climate Emergency project has had governance in place and has included Biodiversity, Green Infrastructure and Local Development plans from the outset. The steering group has reflected on the nature aspect of their work and a report is due to go to cabinet imminently to demonstrate this commitment. The proposition is to rename the programme to Climate Change and Nature Strategy.

- 4.6 The Organisational, Cross Cutting and Transformation steering group ensures that the work streams can interact, avoid duplication and synergies are sustained across the Council. The work streams have been aligned to existing bodies, meetings and boards to maximise the outcomes that each can achieve. **See Appendix 3**
- 4.7 Phase 3 - Reshape will look beyond 2022, it will be subject to the 2022 elections and priorities of the new council, a new Chief Executive, corporate plan and strategy for the council.
- 4.8 During the preparation of phase 3 and delivery of phase 2 we are working towards:
- Developing the framework for the future delivery programme – Phase 3 of Achieving Better Together – Reshape.
 - Ensuring Strategies and action plans (housing, Schools, economy, social care) are embedded and change is visible and increasing in pace.
 - A reviewed and updated corporate plan
 - Ensuring the culture of the organisation is aligned to the delivery of the corporate plan
 - Ensure all priority service areas have new models of delivery maturing
 - Delivering a balanced budget and long term MTFP that is sustainable
- 4.9 The Achieving Better Together Programme recognises changes in strategic context, brought about by changes in both legislation and priority focus areas, including:
- Wellbeing of Future Generations Act
 - Local Government & Elections Wales Act
 - Additional Learning Needs Act
 - Regionalisation Agenda
 - City Deal & City Centre Regeneration (Swansea Central Phase 1)
 - Smart City and Digital Strategy
 - Responding to Climate Change
 - Ten years of Austerity
 - Covid-19 Pandemic
 - Brexit

The programme intends to meet these new challenges, building upon the successes already achieved as it progresses into phase 3 - Reshape.

- 4.10 The budget and medium term finance plan will progress through the normal process for approval and help to shape the recovery and focus of the work-streams for 2022/23. The financial planning timetable is available **Appendix 4**

5.0 Governance

- 5.1 The governance structure has undergone a review since the original October 2020 Cabinet report. This showed that two overarching Bodies, a Strategic Recovery Board and a Reshaping Board, would be set up to report to CMT & Cabinet. The structure has since been revised, with just one body now overseeing the programme - The Recovery, Reshaping & Budget Strategy Board ('The Board').



The detailed governance structure, together with details of the membership of The Board, can be seen at **Appendix 2**.

- 5.2 The Recovery, Reshaping & Budget Strategy Board ('The Board'). The board sits monthly and focuses on strategic issues and high level risks that have been identified in relation to the programme. The governance structure, together with details of the membership of The Board, can be seen at **Appendix 2** The Board predominantly oversees and monitors three programmes of work:

1.	Phase 2 (Refocus) of Achieving Better Together work-streams
2.	The Medium Term Finance Plan
3.	The Economic Recovery Fund

- 5.3 Monthly Organisational Cross Cutting & Transformation Steering Group ('Steering Group') sits below The Board. Detailed discussions are conducted at Steering Group meetings in relation to the activities of each Work-stream. Where significant risks / issues are identified at Steering Group, those issues are reported to 'The Board' and the relevant Work stream Lead Officer may be invited to attend a meeting of The Board to provide information as required. Audit Wales have been invited to attend meetings of Steering Group and either attend or request documentation on a regular basis.

5.4 The Recovery, Reshaping & Budget Strategy Board and the Steering group have both meet on a Monthly basis. The actual dates are set out below:

Steering Group (21/22)	Board (21/22)
17th March	14th April (rescheduled from 8th April)
27th April	12th May
25th May	9th June
22nd June	14th July
27th July	8th September
28th September	13th October (<i>Budget</i>)
26th October	10th November (<i>Budget</i>)
23rd November	8th December (<i>Budget</i>)
28th December	12th January
25th January	9th February

5.5 To support the success of the recovery and transformation programme a new post was created to manage the programme process with the Deputy Chief Executive overseeing the strategy. The Strategic Change Programme Manager was welcomed into post on June 1st 2021.

5.6 Policy Development Committees have provided a support function to the programme and work-streams. The Recovery & Future Generation PDC's support the overarching Achieving Better Together work programme, A programme update was shared in July this year and a further update is expected in December 2021. The Recovery & Future Generation PDC's have recently also, received a session on co-production and an update on the Consultation and Engagement Strategy. A workshop on the workforce work-stream is expected to take place in November. These are all projects within the Workforce & Equality work stream.

The work-stream leads are working closely with other PDC's on their individual projects, plans and policies. Examples include, but are not limited to:

Work stream	PDC	Agenda Item	Date
Community Support	People PDC	Volunteering Strategy initial workshop	October 2021
Economy & Environment	Economy, Environment & Infrastructure PDC	Swansea Bay City Deal Skills and Talent business case	September 2021
Community Support	Poverty Reduction PDC	Swansea Council Tackling Poverty Strategy Revision	July 2021

Community Support	Poverty Reduction PDC	Promoting Affordable Credit Draft Policy	June 2021
Economy & Environment	Economy, Environment & Infrastructure PDC	Economic Recovery Plan. High Street Regeneration. Green Fleet Policy	October/November 2021

5.7 To further assist the Achieving Better Together Programme, Swansea Council's Internal Audit carried out an examination of the programme governance and structure during August 2021. An Assurance Level of **'High'** has been awarded. This indicates that 'there is a sound system of internal control designed to achieve the programme objectives and the controls are being consistently applied'.

6.0 Conclusions

6.1 This paper demonstrates that the recovery and refocus phase is well underway and that the working groups are in place and working through the actions associated with their agendas.

6.2 The reporting mechanisms and governance boards are in place and working well.

6.3 Due to the uncertainty with COVID implications, the Council has to be vigilant and prepared to revert to response mode if required. However, work is continuing to building the foundations and scope the work of that will be required of the work-streams for the reshaping phase post May 22, as well as undertaking recovery and refocus work.

7. Equality and Engagement Implications

7.1 The Council is subject to the Public Sector Equality Duty (Wales) and must, in the exercise of their functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

7.2 Our Equality Integrated Impact Assessment process ensures that we have paid due regard to the above.

7.3 There are no equality and engagement implications associated with this report.

8. Financial Implications

8.1 There are no direct financial implications associated with this report itself. The programme, its governance and operational delivery, via the work-

streams, will help provide the assurance mechanisms for the duration of the medium term finance plan and ultimately beyond, that the planned savings, but equally the correspondingly larger investment of new resources, will be delivered and resources targeted flexibly and appropriately as the wider environment and financial outlook for the public sector and the wider UK and global economy evolves. The overriding aims are to achieve value for money, remain financially sustainable, directly aid and assist the recovery and ultimately achieve better outcomes, together.

9. Legal Implications

9.1 There are no legal implications associated with this report.

Background Papers: None.

Appendices:

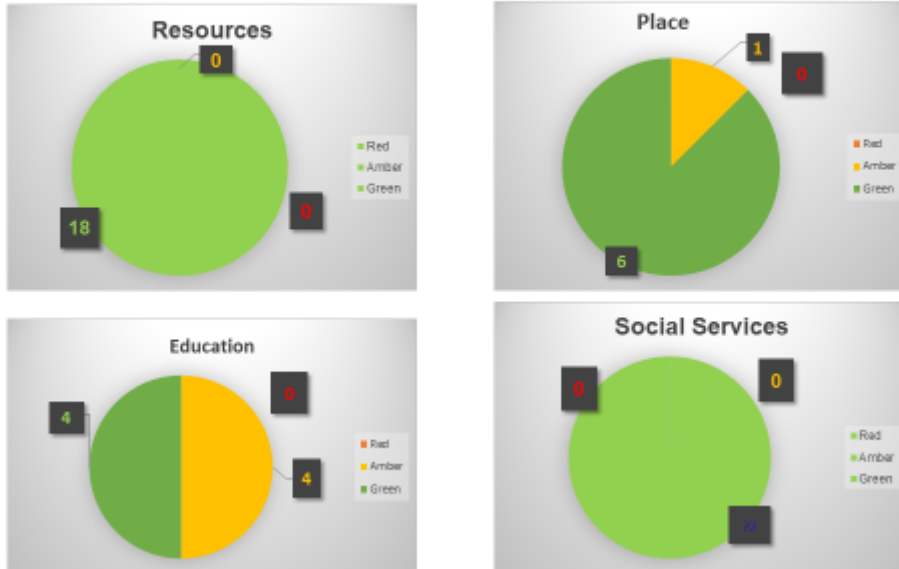
- Appendix 1** MTFP – October status
- Appendix 2** Governance Structure – Phase 2
- Appendix 3** Work-stream Meeting Schedule
- Appendix 4** Medium Term Finance Plan Timetable

Appendix 1 - Medium Term Finance Plan Current Status (Oct. 2021)

MTFP Delivery Tracker Dashboard

Number of savings targets on target by RAG rating

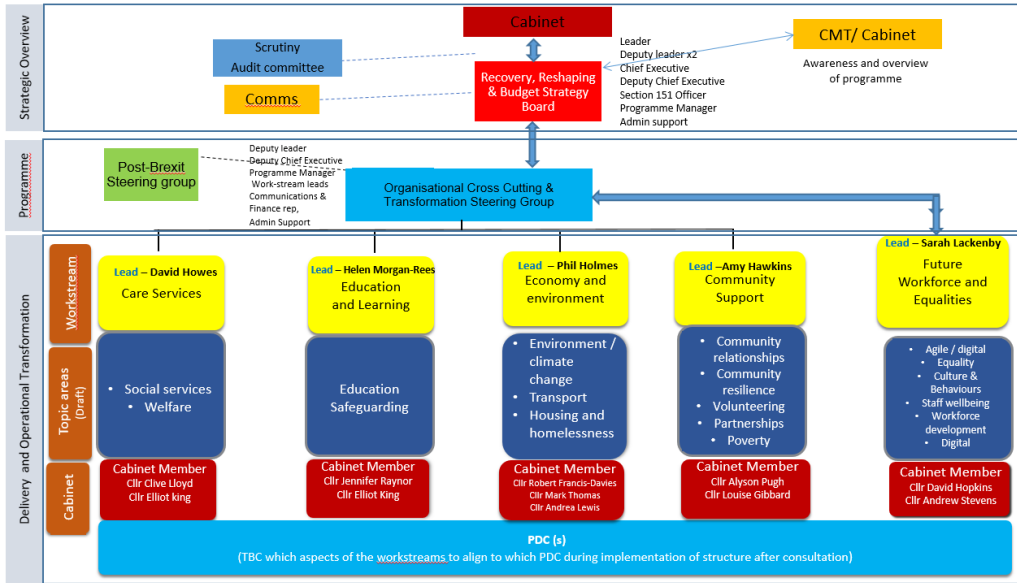
Red Not being achieved
Amber Risk of Slipping
Green On target



Area	Description	RAG	Plan to Return to Green - Actions
Place	CTU service become commercial operation within 2 year or externalise service (Cm/Ex13)	Amber	relocation of service to new depot has now taken place. Some challenges to achieve full saving due to delayed occupation.
Education	Review of Out of County placements / delivery model - dependent on additional special school places	Amber	Savings reflected in base budget and will be monitored through PFM. With delay in delivery of new build special school, savings target deferred by a year to reflect further additional special school places as part of proposed interim measures - but savings target should be deliverable through current proposals and with continuing good progress on interim measures.
Education	Home to School Transport - savings identified as part of wider focused scrutiny of nature and spread of educational provision - in addition to the early delivery of £62k post 16 savings in E19 above (unless savings are taken corporately and base budget reduced)	Amber	Savings reflected in base budget and will be monitored through PFM. It should be possible to further mitigate the scale of underlying demand and cost pressures across transport provision with continuing scrutiny and review of routes.
Education	ALN Transport - review of spread and nature of STF provision / review of assessment / processes to better promote independent travel and integrate provision with Social Services as part of wider corporate review, led by Transportation (unless savings are taken corporately and base budget reduced)	Amber	Savings reflected in base budget and will be monitored through PFM. It should be possible to further mitigate the scale of underlying demand and cost pressures in relation to ALN transport provision with continuing scrutiny and review of nature and spread of specialist provision.
Education	Review of demand and service pressures with need for still tighter mitigation actions to replace the savings targets within the existing MTFP which are undeliverable to the timescale required	Amber	Reflected in base budgets and will be monitored through PFM. The need to replace undeliverable savings targets in relation to new walking routes and earlier proposed increases in school meal prices (subsequently unsupported politically) presents a severe challenge against the scale of underlying demand and cost pressures facing non-delegated services. Whilst robust management action can further mitigate the scale of pressures, many are externally driven and inherently outside the control of the Directorate.

Appendix 2 – Governance Structure

Structure and governance



Future workforce to lead the council wide implications and transformation to develop the workforce to ensure fit for purpose.

Appendix 3 – Work-stream Meeting Agenda's

Care Services – (David Howes)

Workstreams topic areas	Name of group / board	Organiser / admin support	How often do they meet	Date of meetings if scheduled
Transforming Mental Health Services	Recovery board (Swansea Bay RPB) Chairs – Dave Howes/ Andrew Jarret/ Sian Harrop Griffiths	Lead Dai Roberts – health board Swansea Bay regional team	Bi monthly	17/11/20 19/01/21
Transforming Complex Care	Recovery board (Swansea Bay RPB) Chairs – Dave Howes/ Andrew Jarret/ Sian Harrop Griffiths	Lead – Cathy Dowling – health board Swansea Bay regional team	Bi monthly	17/11/20 19/01/21
Stabilisation and Reconstruction	Community Silver/ Gold (Swansea Bay RPB)	Chairs Dave Howes/ Andrew Jarret / Hillary Dover Swansea Bay regional team	Twice weekly silver Thrice weekly Gold	12/11/20 ongoing 13/11/20 ongoing
Remodelling Acute Health and Community Services	Community Silver/ Gold (Swansea Bay RPB)	Chairs Dave Howes/ Andrew Jarret / Hillary Dover Swansea Bay regional team	Twice weekly silver Thrice weekly Gold	12/11/20 ongoing 13/11/20 ongoing

Education and Learning – (Helen Morgan-Rees)

Workstreams topic areas	Name of group / board	Organiser / admin support	How often do they meet	Date of meetings if scheduled
Develop and embed the benefits of a blended learning approach to education	Continuity of Learning Strategy Group	Damien Beech	Monthly	16 th of the month
	Secondary Curriculum and Self-assessment Network	Rob Davies		Meeting Dec/Jan and Feb/March
	PSA Sub Group	David Bawden/Chris Rees	Twice yearly	Dates to be set
Develop and embed support for ALN learners within mainstream and in-County provision	ALN Strategic Board	Claire Griffiths	Half Termly	12/01/21, 15/04/21, 29/06/21
	Special School Task Group	Jo Holdsworth	Monthly	Second Thursday of the month
Safeguarding and wellbeing	HoS and Education Safeguarding Officer meetings	Kate Phillips/Lisa Collins	Monthly	18 th of the month
	Education PFM	Andrea Rees/Claire Griffiths	Monthly	Third Monday of the month
	Trade Unions	Natalie Gedrych	Monthly	First Tuesday of the month
	Education Business Meeting	Natalie Gedrych	Fortnightly	Every other Tuesday
	QEd Programme Board	John O'Brien	Monthly	Fourth Tuesday of the month
	QEd Delivery Group	John O'Brien	Monthly	First Wednesday of the month
Review of nature, location and flexibility of provision for learners and access to sustainable home to school transport	QEd Operational Meeting	John O'Brien	Monthly	Dates in the calendar
	QEd Programme Board	John O'Brien	Monthly	Fourth Tuesday of the month
Build on attainment levels to improve the quality and skills of the labour force as well as support for other priority objectives such as decarbonisation, BAME, climate change, environmental management	Update to Strategic Leads Board from Pam Cole (Quality Assurance and Monitoring Team Lead)	Pam Cole	Twice yearly	Dates TBC
	Swansea Skills Partnership Sub Group	Andrea Rees/Claire Griffiths	Termly	09/02/21, 25/05/21
	EDSLT	Andrea Rees/Claire Griffiths	Half Termly	14/12/20, 11/01/21, 08/03/21, 12/04/21, 21/06/21

Future Workforce and Equalities – (Sarah Lackenby)

Workstreams topic areas	Name of Group / board	Organiser /admin support	How often do they meet	Date of meetings if scheduled
Home working and Agile working	Agile Working Task Group	Becky Jones	Monthly	25 th of each month
Digital transformation and digital first approach	Digital Board	Sarah Topliss	Monthly	Resuming from January 2021
Workforce and organisational development plans (as part of recovery specifically linked to agile working)	Agile Working Task Group	Becky Jones / Wyn Mathews	Monthly	25 th of each month
Review all policies to take account of new ways of working specifically linked to agile working	Agile Working Task Group	Becky Jones / Wyn Mathews	Monthly	25 th of each month
Culture & Behaviours (as part of recovery specifically linked to agile working)	Agile Working Task Group	Becky Jones / Wyn Mathews	Monthly	25 th of each month
Staff wellbeing (as part of recovery specifically linked to agile working)	Agile Working Task Group	Becky Jones / Wyn Mathews	Monthly	25 th of each month
Hours of work (as part of recovery specifically linked to agile working)	Agile Working Task Group	Becky Jones / Wyn Mathews	Monthly	25 th of each month
More agile and effective decision making and bringing the learning into the development of our accountability framework	Leadership Team CMT	Adam Hill / Liz Edmonds	Monthly	

Community Support – (Amy Hawkins)

Workstreams topic areas	Name of group / board	Organiser / Admin support	How often do they meet	Date of meetings if scheduled
Engagement of communities in concerted actions that promote shared identity, social cohesion and broader self-understanding.	Community Response Third Sector Liaison Group Swansea Poverty Partnership Forum PSB	Amy Hawkins / Anthony Richards Jane Whitmore / Spencer Martin Anthony Richards / Sian Denty PSB Team	Weekly Monthly Quarterly Quarterly	Various
Reflect and address community concerns.	Friends of Forums (e.g. Halls and Parks) Community Buildings Network, Citizen's Panel, Family Support Network, Project Groups e.g. Copperworks	The groups are being mapped out via the Third Sector Compact Group	Various	Various
Facilitate, promote and influence joined up solutions within the Council, Third Sector and other statutory and non-statutory partners in Swansea and encourage the continuation of community relationships established both pre Covid and during the response.	Community Response Third Sector Liaison Group West Glamorgan Citizen Forum and Coproduction Group	Amy Hawkins / Anthony Richards Jane Whitmore / Spencer Martin SCVS / Regional Partnership Team	Weekly Monthly Quarterly	Various
To work with the Third Sector to continue delivering quality projects and services with and for community members.	Third Sector Liaison Group West Glamorgan Citizen Forum and Coproduction Group	Jane Whitmore / Spencer Martin SCVS / Regional Partnership Team	Monthly Quarterly	Various
Develop effective coproduction, consultation and communication mechanisms with partners supporting the various partnership groups, including; housing, poverty partnership forum and the Poverty Truth Commission.	West Glamorgan Citizen Forum and Coproduction Group Poverty Partnership Forum Swansea Coordinated Crisis Support Programme Swansea Food Poverty Network & Financial Inclusion Steering Group	SCVS / Regional Partnership Team Anthony Richards Tackling Poverty Service Tackling Poverty Service	Quarterly Quarterly Monthly Bi-monthly / Quarterly Monthly	January

Community Support – (Amy Hawkins) Continued.....

Workstreams topic areas	Name of group / board	Organiser / Admin support	How often do they meet	Date of meetings if scheduled
Develop effective coproduction, consultation and communication mechanisms with partners supporting the various partnership groups, including; housing, poverty partnership forum and the Poverty Truth Commission.	West Glamorgan Citizen Forum and Coproduction Group Poverty Partnership Forum Swansea Coordinated Crisis Support Programme Swansea Food Poverty Network & Financial Inclusion Steering Group Swansea Poverty Truth Commission	SCVS / Regional Partnership Team Anthony Richards Tackling Poverty Service Tackling Poverty Service SCVS & Partners	Quarterly Quarterly Monthly Bi-monthly / Quarterly Quarterly Monthly	January
<u>Tackling Poverty</u> Monitor and review the provision of welfare to those affected and identify gaps or areas for focus To develop a joint, holistic response to poverty and population health To review and identify how the council can support residents in terms of Debt, poverty, financial support etc Identification of vulnerable people affected by or impacted on by the crisis	Poverty Partnership Forum Swansea Coordinated Crisis Support Programme Swansea Food Poverty Network & Financial Inclusion Steering Group Swansea Poverty Truth Commission Financial Inclusion Steering Group	Anthony Richards Tackling Poverty Service Tackling Poverty Service SCVS & Partners	Quarterly Monthly Bi-monthly / Quarterly Monthly	January
To work with the Third sector and community groups to develop and promote volunteers' meaningful contributions to service delivery, sustainability and development of projects and initiatives.	Third Sector Liaison Group Regional Third Sector / Community Response Group Community Response	Jane Whitmore / Spencer Martin SCVS / Regional Partnership Team Amy Hawkins / Anthony Richards	Monthly Weekly Weekly	Various
To work with the Third sector and community groups to understand the future challenges and emergencies, and define and embed in plans the role they play in the future.	Third Sector Liaison Group Community Response West Glamorgan Citizen Forum and Coproduction Group	Jane Whitmore / Spencer Martin Amy Hawkins / Anthony Richards SCVS / Regional Partnership Team	Monthly Weekly Quarterly	Various

Community Support – (Amy Hawkins) Continued.....

Workstreams topic areas	Name of group / board	Organiser / Admin support	How often do they meet	Date of meetings if scheduled
To work with the Third sector and community groups to understand the future challenges and emergencies, and define and embed in plans the role they play in the future.	Third Sector Liaison Group Community Response West Glamorgan Citizen Forum and Coproduction Group	Jane Whitmore / Spencer Martin Amy Hawkins / Anthony Richards SCVS / Regional Partnership Team	Monthly Weekly Quarterly	Various
Formally recognise and celebrate the contribution and quality services of Third Sector and community organisations in Swansea.	Third Sector Liaison Group Regional Third Sector / Community Response Group Regional Recovery Board	Jane Whitmore / Spencer Martin SCVS / Regional Partnership Team Regional Partnership Team	Monthly Weekly Bi- monthly	Various
To develop plans to connect volunteering opportunities within the Council.	Third Sector Liaison Group	Jane Whitmore / Spencer Martin	Monthly	Various
To consider future requirements for supporting the Third Sector.	Third Sector Liaison Group	Jane Whitmore / Spencer Martin	Monthly	Various
Work with the community to coproduce the recovery process.	West Glamorgan Citizen Forum and Coproduction Group	SCVS / Regional Partnership Team	Quarterly	Various

Economy and Environment - (Phil Holmes)

Workstreams topic areas	Name of Group	Organiser /Admin support	How often do they meet
Develop plans transport links and networks – working across the city, region and nationally	Regeneration Programme Board	Planning & City Regeneration	Monthly
Develop an economic development plan – connecting training and skills, colleges and universities, with business and manufacturing.(Regional Learning and Skills Partnership, Swansea Skills Partnership, Careers Wales)?	Regeneration Swansea	Planning & City Regeneration	Monthly
Development of the digital infrastructure	Regeneration Programme Board	Planning & City Regeneration	Monthly
Increase promotion and provision in active travel	Regeneration Programme Board	Planning & City Regeneration	Monthly
Lead the development and attraction of big business to stimulate development and workforce	Regeneration Programme Board	Planning & City Regeneration	Monthly
Aspirational to real development plans to attract inward investment	Regeneration Swansea	Planning & City Regeneration	Monthly
Joint strategy and action plan with BID to help offer support to new business and links to development and innovation schemes	Regeneration Swansea	Planning & City Regeneration	Monthly
Develop a strategy for encouraging or building new homes	Housing Futures Programme Board	Housing & Public Protection	Monthly
Develop a Renovation and improvement programme for existing properties, for example the conversion of empty properties or those previously used for commercial purposes (office space and other buildings will no longer be required, as work from home or agile will be the new normal for greater numbers of employees and turn these into additional affordable housing).	Regeneration Swansea	Planning & City Regeneration	Monthly
Improving the standards of private rental sector and social rental sector	Regional Housing Partnership	Housing & Public Protection	Monthly
Support the homeless in provision of housing and support services	Regional Housing Partnership	Housing & Public Protection	Monthly

Economy and Environment - (Phil Holmes) Continued

Workstreams topic areas	Name of Group	Organiser /Admin support	How often do they meet
Improving the standards of private rental sector and social rental sector	Regional Housing Partnership	Housing & Public Protection	Monthly
Support the homeless in provision of housing and support services	Regional Housing Partnership	Housing & Public Protection	Monthly
Review the Council's Climate Change Action Plan	Climate Change Working Group	Rachel Lewis	monthly
Continue to review how we can reduce our impact on Climate Change within the services and operations	Climate Change Working Group	Rachel Lewis	monthly
How Swansea Council will ensure equality and maximise the support and assistance offered by service changes on residents and the community with protected characteristics			

Appendix 4 - Medium Term Finance Plan Timetable



Four-Year Budget Process Project Timeline

Area of Work	Timeline and Date									
	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Reshaping Board budget scene setting and political steer on: Commercial / income aspiration, Council Tax levels, Priority service areas including vacancy monitoring / contract and waiver monitoring. This direction will guide next steps			11th	8th						
Directors and HoS work on savings / commercial proposals using MTFP and tracker as the base. First draft of issues to CMT in October				29/30th						
CMT cross-Directorate discussion on proposals to ensure no double counting and to discuss priorities / resources / budget gaps / In Extremis-Stopping Services etc					6th					
Directorates to discuss details with Cabinet Members					By 13/14th					
CFO paper on overall first draft proposals to CMT			4th							
UK Government 1 year Spending Review announced						?				
Budget week papers issued				9th						
Budget Reshaping Board Meetings – Directorates confirmed					11th & 18th	3rd & 8th				
Autumn budget statement to Council (verbal)						4th				
Review of reserves to Council						4th				
Cabinet / CMT for plan B/C/D if gaps following budget week						25th				
Final proposals deadline						30th				
CMT on capital, revenue, consultation and EIA						24th				
First draft budget report						30th				
Corporate Briefing							2nd			
WG provisional budget – may be b/fwd							20			
Provisional Local Government Settlement - may be b/fwd							21			
Meeting with all Trade Unions							9-14			
Meeting with Headteachers and School Budget Forum							9-14			
Cabinet (Proposals and update)							16	20		
Public Consultation starts							17			
S188 Letter sent to Trade Unions							17			
Staff Consultation sessions start							17			
Budget adapted based on feedback								31		
Staff and Public Consultation end								31		
Final report to Corporate Briefing									3	
Final report to Cabinet									17	
Final budget to Council and setting of Council Tax										3
WG final budget										1
Final Local Government settlement										?
Reserve budget and Council Tax Council (if needed)										10
LEGAL DEADLINE										11

Agenda Item 14



Report of the Head of Democratic Services

Governance & Audit Committee – 9 November 2021

Governance & Audit Committee Action Tracker Report

Purpose:	This report details the actions recorded by the Governance & Audit Committee and response to the actions.
Report Author:	Jeremy Parkhouse
Finance Officer:	N/A
Legal Officer:	N/A
Access to Services Officer:	N/A

For Information

1. Introduction

- 1.1 During the course of Governance & Audit Committee meetings various actions may be decided which are recorded on the minutes of the meetings.
- 1.2 As agreed in 2016/17 an Action Tracker process was put in place to ensure transparency over the outcomes of actions agreed by Committee.
- 1.3 The Action Tracker records the actions agreed by the Governance & Audit Committee and provides an outcome for each action.
- 1.4 The up to date Action Tracker 2021/22 is attached at Appendix 1.
- 1.5 The Action Tracker is regularly updated and any completed actions will be marked 'Completed' and coloured in grey.
- 1.6 The Action Tracker is reported to each Governance & Audit Committee meeting for information.

2. Equality and Engagement Implications

2.1 The Council is subject to the Public Sector Equality Duty (Wales) and must, in the exercise of their functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

Our Equality Impact Assessment process ensures that we have paid due regard to the above.

2.2 There are no equality and engagement implications associated with this report.

3. Financial Implications

3.1 There are no financial implications associated with this report.

4. Legal Implications

4.1 There are no legal implications associated with this report

Background Papers: None

Appendices:

Appendix 1 – Governance & Audit Committee Action Tracker 2021/22
(Closed actions removed).

GOVERNANCE & AUDIT COMMITTEE ACTION TRACKER 2021/22

Date of Meeting	Minute Ref	Action	Nominated Officer(s)	Status
	42	Governance & Audit Committee Work Plan		
		The new areas of the Committee's work should be incorporated into the Work Plan before May 2022.	Jeremy Parkhouse	Ongoing
	40	Auditor General for Wales Review of Town Centre Regeneration		
		Chair / Officer meeting scheduled for 21 October 2021 to further discuss the report and agree an appropriate way forward.	Richard Rowlands / Jeremy Parkhouse	Ongoing Meeting held to discuss scheduling Audit Wales reports, appropriate way forward agreed. Link to meeting agenda / minutes / recording had been forwarded to Audit Wales.
12/10/21	39	Scrutiny Annual Report 2020-21 & Scrutiny Work Programme.		
		Scrutiny Programme Committee Work Plan to be reported to future Committee meetings.	Jeremy Parkhouse	Closed Included with Governance & Audit Committee Work Plan.
14/09/21	32	Internal Audit Annual Plan 2021/22 Monitoring Report for the Period 1 April 2021 to 30 June 2021		
		Head of Cultural Services to provide the Committee with an update report on the Grand Theatre at the meeting scheduled for 12 January 2022.	Tracey McNulty	Ongoing Report included on agenda for 12/01/22.
14/09/21	31	Lay Members on the Governance & Audit Committee		
			Huw Evans	Closed Council approved on 07/10/21 and recruitment will commence in due course.
14/09/21	30	Service Centre – Accounts Receivable Update		
		Update report to be provided in February 2022.	Sian Williams / Michelle Davies	Ongoing Report included on agenda for 08/02/22.

14/09/21	29	Absence Management Audit Report 20/21		
		Update report to be provided in February 2022.	Sian Williams / Adrian Chard	Ongoing Report included on agenda for 08/02/22.
13/07/21	17	Audit Wales - Follow Up Review of Corporate Safeguarding Arrangements - Children in Swansea Council	Simon Jones / Adam Hill	Closed Report included on the agenda for 09/11/21.
		An update report be provided to the Committee which gives assurances on the following: - <ul style="list-style-type: none"> • that Action Plan dates are being met; • the potential risk with school procurement / monitoring contracts be addressed; • Future training provision for Councillor School Governors is provided; • Clarity is provided regarding the terms of reference / responsibilities of the various groups supporting the Corporate Safeguarding Board. 		
09/06/21	10	Governance & Audit Committee - Workplan 2021/22		
		Corporate Fraud provide a 6-month update report in addition to their annual report.	Simon Cockings / Jeff Fish / Jonathon Rogers / Jeremy Parkhouse	Closed Report included on the agenda for 09/11/21.
09/06/21	9	Governance & Audit Committee Action Tracker Report		
		The action to track Audit Wales recommendations to remain in the Action Tracker Report. Chair to make enquiries with the Chief Auditor, Cardiff Council regarding the software they use and to contact Audit Wales regarding any spreadsheets they utilise.	Chair / Adam Hill / Richard Rowlands	Ongoing Other local authorities had been contacted regarding the systems they utilised. A new system was planned which would allow accurate monitoring in the future and the Committee would be updated regarding progress in due course.

19/02/21	41	Overview of the Overall Status of Risk - Quarter 3 2020/21		
		Corporate Directors be requested to attend the Committee on a rotational basis each quarter to outline their Corporate Risks and the governance and risk management controls within their departments.		Ongoing Reports added to the Audit Committee Work Plan 2021-22 as follows: -
			Dave Howes	<ul style="list-style-type: none"> Director of Social Services – November 2021; Closed – included on agenda for 09/11/2021.
			Martin Nicholls	<ul style="list-style-type: none"> Director of Place – February 2022;
			Adam Hill	<ul style="list-style-type: none"> Director of Resources – April 2022.
		The provision of additional risk management training for Officers on Control Measures be highlighted to the Corporate Management Team.	Richard Rowlands	Ongoing Training specifically on Control Measures took place at Leadership Team (Directors, HoS and some other senior managers) as planned on 25 May 2021. A video based on this has been created and uploaded, which is now directly accessible through the risk register along with all other videos provided on risk management and on using the risk register. The video has also been signposted to all Directors, Heads of Service and responsible officers and reminders to review and revise control measures in line with the training and video have been issued each month since June; the need for responsible officers to review their Control Measures was discussed and reinforced again at CMT in August.
09/02/21	40	Update on Swansea Achieving Better Together		
		The Deputy Chief Executive provides a progress report to future Governance & Audit Committee meetings.	Adam Hill / Jeremy Parkhouse	Ongoing Report added to the Work Plan 2021-22 for 09/11/21 and 12/04/21

19/01/21	31	Election of the Audit Committee Representative on the Annual Governance Group		
		Councillor L V Walton be elected as the Audit Committee representative on the Governance Group and the appointment be until the end of the current Council term in May 2022 only	Jeremy Parkhouse / Chair	Ongoing Re-appointment to be added to the Committee Work Plan for 2022-23.
30/06/20	111	ERW Replacement		
		An update be provided regarding future Scrutiny arrangements as a new regional Education model is introduced post April 2021.	Phil Roberts / Helen Morgan-Rees	Ongoing The termination of ERW and seal of a new legal agreement are on track, subject to ratification. Alternative arrangements for Swansea, Carmarthenshire and Pembrokeshire Councils to be ratified at each constituent Council between September and November 2021.



Report of the Head of Democratic Services

Governance & Audit Committee – 9 November 2021

Governance & Audit Committee – Workplan 2021/22

Purpose:	This report details the Governance & Audit Committee Workplan to May 2022.
Report Author:	Jeremy Parkhouse
Finance Officer:	N/A
Legal Officer:	N/A
Access to Services Officer:	N/A
For Information	

1. Introduction

- 1.1 The Audit Committee's Work Plan to May 2022 is attached at Appendix 1 for information.
- 1.2 The Governance & Audit Committee Work Plan to May 2022 in Terms of Reference Order is attached at Appendix 2.
- 1.3 The Scrutiny Programme Committee Work Plan 2021/22 is attached at Appendix 3.
- 1.4 The Governance & Audit Committee Statement of Purpose is attached for information at Appendix 4.
- 1.5 The dates included for the meetings in 2021/22 were approved at the Council's Annual Meeting on 20 May 2021.

2. Integrated Assessment Implications

- 2.1 The Council is subject to the Public Sector Equality Duty (Wales) and must, in the exercise of their functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.
- Deliver better outcomes for those people who experience socio-economic disadvantage

2.2 The Well-being of Future Generations (Wales) Act 2005 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'. Our Integrated Impact Assessment process ensures that we have paid due regard to the above.

2.3 There are no impact assessment implications associated with this report.

3. Financial Implications

3.1 There are no financial implications associated with this report.

4. Legal Implications

4.1 There are no legal implications associated with this report.

Background Papers: None.

Appendices:

Appendix 1 – Governance & Audit Committee Workplan 2021/22.

Appendix 2 - Governance & Audit Committee Work Plan to May 2022
in Terms of Reference Order.

Appendix 3 - Scrutiny Programme Committee Work Plan 2021/22

Appendix 4 – Governance & Audit Committee Statement of Purpose.

Governance & Audit Committee Plan Appendix 1

Terms of Reference	Report Title	Report Summary	Report Author	Date of Meeting
External Audit	Audit Wales - Follow Up Review of Corporate Safeguarding Arrangements - Children in Swansea Council.	<p>This report, previously considered by the Council's Child and Family Scrutiny Performance Panel, includes a summary of the background to this follow up review carried out last year, and the approach used by Audit Wales in producing their report published in Feb. 2020.</p> <p>This report sets out a summary of how Swansea is responding to the Audit Wales report's recommendations, and to highlight where progress is being made against the areas of improvement needed.</p>	Simon Jones	9 Nov 2021
Counter Fraud	Corporate Fraud Function Mid-Year Update Report 2021/22.	Mid-year update on the work undertaken by the Corporate Fraud Function in 2021/22.	Simon Cockings, Jonathon Rogers, Jeff Fish	9 Nov 2021
Risk Management & Performance	Corporate Risk Overview 2021/22 – Quarter 2.	To report an overview of the status of Corporate Risk in the Council to provide assurance to the Committee that key risks are being managed in accordance with the Council's risk management policy and framework.	Richard Rowlands	9 Nov 2021

Governance & Audit Committee Plan Appendix 1

Terms of Reference	Report Title	Report Summary	Report Author	Date of Meeting
Internal Audit	Fundamental Audits 2020/21 Recommendation Tracker Report.	This report provides a summary of the recommendations made following the fundamental audits in 2020/21 and identifies whether the agreed recommendations have been implemented.	Simon Cockings	9 Nov 2021
Financial Reporting	Impact of the Corporate Insolvency and Governance Act 2020.	Update regarding the impact of the Corporate Insolvency and Governance Act 2020 on Accounts Receivable.	Michelle Davies	9 Nov 2021
Internal Audit	Internal Audit Annual Plan 2021/21 – Quarter 2 Monitoring Report.	This report summarises the audits finalised and work undertaken by the Internal Audit Section in Quarter 2 2021/22.	Simon Cockings	9 Nov 2021
Internal Audit	Internal Audit Recommendation Tracking Report - Quarter 2 2021/22.	This report provides committee with the status of the recommendations made in those audits where the follow-up has been undertaken in Q2 2021/22, to allow the Audit Committee to monitor the implementation of recommendations made by Internal Audit.	Simon Cockings	9 Nov 2021

Governance & Audit Committee Plan Appendix 1

Terms of Reference	Report Title	Report Summary	Report Author	Date of Meeting
Internal Audit	Response to The Community Equipment Service and Community Alarms Service Internal Audit Report.	A response to the internal audit of the Community Equipment Service and Community Alarm Service. Providing elaboration on the High Risk and Medium Risk assurance levels identified during the audit and the resulting actions in place to manage these issues.	Lucy Friday	9 Nov 2021
Operational Matters / Key Risks	Update on Internal Control Environment - Director of Social Services.	Presentation - Update on Internal Control Environment (including a focus on Risk Management and the five highest Risks that Directors are managing).- Director of Social Services.	David Howes	9 Nov 2021

Governance & Audit Committee Plan Appendix 1

Terms of Reference	Report Title	Report Summary	Report Author	Date of Meeting
Governance & Assurance	Update Report South West Wales Corporate Joint Committee.	To provide an update on the progress towards setting up the new corporate joint committee for the south west wales region.	Martin Nicholls	12 Jan 2022
Risk Management & Performance	Corporate Risk Overview 2021/22 – Quarter 3.	To report an overview of the status of Corporate Risk in the Council to provide assurance to the Committee that key risks are being managed in accordance with the Council's risk management policy and framework.	Richard Rowlands	8 Feb 2022
Internal Audit Page 218	Internal Audit Annual Plan 2021/22 – Quarter 3 Monitoring Report.	This report summarises the audits finalised and work undertaken by the Internal Audit Section in Quarter 3 2021/22.	Simon Cockings	8 Feb 2022
Internal Audit	Internal Audit Recommendation Tracking Report - Quarter 3 2021/22.	This report provides committee with the status of the recommendations made in those audits where the follow-up has been undertaken in Q3 2021/22, to allow the Audit Committee to monitor the implementation of recommendations made by Internal Audit.	Simon Cockings	8 Feb 2022

Governance & Audit Committee Plan Appendix 1

Terms of Reference	Report Title	Report Summary	Report Author	Date of Meeting
Internal Audit	Service Centre – Accounts Receivable Update.	The Accounts Receivable Internal Audit report was issued in March 2021 with a Moderate rating. The attached report summarises the position and the progress made to date since the last report to the committee in September 2021.	Sian Williams, Michelle Davies	8 Feb 2022
Operational Matters / Key Risks	Update on Internal Control Environment – Director of Place.	Presentation - Update on Internal Control Environment (including a focus on Risk Management and the five highest Risks that Directors are managing).) – Director of Place.	Martin Nicholls	8 Feb 2022
Internal Audit	Draft Internal Audit Annual Plan 2022/23.	This report presents the Draft Internal Audit Annual Plan for 2022/23 to the Audit Committee for consideration prior to the final plan coming to committee in April for approval.	Simon Cockings	8 Mar 2022
Internal Audit	Internal Audit Annual Plan Methodology Report 2022/23.	This report provides a briefing to the Audit Committee on the methodology used to prepare the Internal Audit Annual Plan in advance of the Annual Plan 2022/23 being reported to the Committee for approval on 12 April 2021.	Simon Cockings	8 Mar 2022

Page 219

Governance & Audit Committee Plan Appendix 1

Terms of Reference	Report Title	Report Summary	Report Author	Date of Meeting
Risk Management & Performance	Corporate Risk Overview 2021/22 – Quarter 4.	To report an overview of the status of Corporate Risk in the Council to provide assurance to the Committee that key risks are being managed in accordance with the Council's risk management policy and framework.	Richard Rowlands	12 Apr 2022
Internal Audit	Internal Audit Charter 2022/23.	This report outlines the background to the Public Sector Internal Auditing Standards (PSIAS) which were introduced with effect from 1st April 2013 and presents the Internal Audit Charter for final approval by Audit Committee following Corporate Management Team approval.	Simon Cockings	12 Apr 2022
Internal Audit	Internal Audit Strategy & Annual Plan 2022/23.	This report presents the Internal Audit Strategy and Annual Plan for 2022/23 to the Audit Committee for approval.	Simon Cockings	12 Apr 2022
Operational Matters / Key Risks	Swansea Achieving Better Together – Update Report	Six-month update report on progress.	Adam Hill	12 Apr 2022
Operational Matters / Key Risks	Update on Internal Control Environment – Director of Resources.	Presentation - Update on Internal Control Environment (including a focus on Risk Management and the five highest Risks that Directors are managing).– Director of Resources.	Adam Hill	12 Apr 2022

Governance & Audit Committee Workplan 2021/22

Appendix 2

Terms of Reference	9 June 2021	13 July 2021	24 August 2021	14 September 2021	12 October 2021	9 November 2021	14 December 2021	12 January 2022	8 February 2022	8 March 2022	12 April 2022
Training		Draft Governance and Audit Committee Training Programme.									
Governance & Assurance	Election of Chair & Vice Chair	Election of Vice-Chair		Update Report – South West Wales Corporate Joint Committee. Local Government and Elections (Wales) Act 2021 - Change in Membership	Scrutiny Annual Report 2020-21.			Update Report – South West Wales Corporate Joint Committee			
Internal Audit Page 221	IA Quarter 4 Monitoring Report Grand Theatre Audit Report 2020/21 Service Centre – Accounts Receivable Update Employment of Agency Staff	Annual Report of School Audits 2020-21		IA Recommendation Tracking Report – Q1 21/22 IA Quarter 1 Monitoring Report Management of Absence Update Service Centre – Accounts Receivable Update.	Employment of Agency Staff.	Fundamental Audits 2020/21 – Recommendation Tracker Report IA Recommendation Follow-up Report – Q2 2021/22 IA Q 2 Monitoring Report Response to The Community Equipment Service and Community Alarms Service Internal Audit Report.		Grand Theatre Audit Update Report 2020/21	IA Recommendation Tracking Report – Q3 2021/22 IA Q 3 Monitoring Report Management of Absence Update. Service Centre – Accounts Receivable Update.	IA Annual Plan Methodology Report 2022/23 Draft IA Annual Plan 2022/23	IA Charter 2022/23 IA Strategy & Annual Plan 2022/23
Risk Management & Performance				Q1 Risk Monitoring Report		Q2 Risk Monitoring Report			Q3 Risk Monitoring Report		Q4 Risk Monitoring Report
Counter Fraud		Corporate Fraud Annual Report				Corporate Fraud – Six Month Update					
Operational matters / key risks				Update on Internal Control Environment – Director of Education		(Directorate): Internal Control Environment 2021/22 Director of Social Services	Annual Complaints Report 2020-21		Update on Internal Control Environment – Director of Place		Swansea Achieving Better Together – Update Report

Governance & Audit Committee Workplan 2021/22

Appendix 2

						Swansea Achieving Better Together – Update Report					Update on Internal Control Environment – Director of Resources
External Audit		Audit Wales - Follow Up Review of Corporate Safeguarding Arrangements - Children in Swansea Council.	Audit Wales - ISA 260 Report - City And County of Swansea Audit Wales - Financial Sustainability Assessment - City and County of Swansea Council.		Auditor General for Wales Review of Town Centre Regeneration.	Audit Wales - Follow Up - Annual Report Corporate Safeguarding 2020-21					
Financial Reporting			Statement of Accounts			Impact of Corporate Insolvency and Governance Act 2020					

Note: Audit Committee Action Tracker Report and Audit Committee Workplan will be included as agenda items at each meeting. An update from WAO will also be on the agenda for each meeting.

Reports Carried Over to 2022-2023 Municipal Year

Terms of Reference	Report Title
Governance & Assurance	Appointment of Committee Member on Annual Governance Group

Scrutiny Programme Committee – Work Plan 2021/22

ACTIVITY	15 Jun 2021	13 Jul 2021	17 Aug 2021	14 Sep 2021	19 Oct 2021	16 Nov 2021
Scrutiny Work Programme					Audit / Scrutiny Relationship – Discussion w/ Chair of Governance & Audit Committee	
Cabinet Member Q & A Sessions						
Specific Cabinet Member / Officer Reports	Scrutiny of Public Services Board	<ul style="list-style-type: none"> Highways and Engineering Infrastructure Repairs and Maintenance 	<ul style="list-style-type: none"> Tourism, Destination Management, and Marketing Business and City Promotion 	<ul style="list-style-type: none"> Energy Policy (incl. Generation, Supply & District Heating) Litter and Community Cleansing 	<ul style="list-style-type: none"> Recovery & Transformation Plan Progress Update Annual Corporate Safeguarding Report 	Delivery of Corporate Priority – Tackling Poverty
Scrutiny Performance Panel Progress Reports		Education	Service Improvement & Finance	Adult Services	Child & Family Services	Development & Regeneration
Pre-decision Scrutiny						Leasehold Acquisition and Redevelopment FPR7 – 279 Oxford Street/25-27 Princess Way
Final Scrutiny Inquiry Reports / Follow Up on Scrutiny Recs.			Follow Up on Tourism Working Group recommendations			
Scrutiny Reports to Council	Scrutiny Dispatches Impact Report		Draft Scrutiny Annual Report 2020/21	Scrutiny Dispatches Impact Report		

ACTIVITY	14 Dec 2021	18 Jan 2022	15 Feb 2022	15 Mar 2022	19 Apr 2022 (to be cancelled)	
Scrutiny Work Programme				Work Programme Review		
Cabinet Member Q & A Sessions		Leader / Economy, Finance & Strategy (including focus on Brexit effects / response)				
Specific Cabinet Member / Officer Reports Page 224	<ul style="list-style-type: none"> Scrutiny of Public Services Board, incl. Annual Report Parking Policy, Control & Enforcement 		<ul style="list-style-type: none"> COVID / Recovery & Transformation Plan Progress Update Crime & Disorder Scrutiny - Safer Swansea Community Safety Partnership 	Children & Young People's Rights Scheme Annual Progress Report		
Scrutiny Performance Panel Progress Reports	Natural Environment	Education	Service Improvement & Finance			
Pre-decision Scrutiny						
Final Scrutiny Inquiry Reports / Follow Up on Scrutiny Recs.				Procurement Inquiry Final Report		
Scrutiny Reports to Council	Scrutiny Dispatches Impact Report			Scrutiny Dispatches Impact Report		

* denotes extra meeting

To be scheduled:

- Pre-decision Scrutiny of Cabinet Report - Business Case for Relocation of Civic Centre
- Follow Up on Completed Working Group recommendations (Workforce; Digital Inclusion)

Work Plan remains flexible and subject to change to accommodate requests for pre-decision scrutiny and any urgent issues arising during the year to ensure each meeting is manageable.

Governance & Audit Committee

Statement of Purpose

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

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

Membership

The Local Government (Wales) Measure 2011 provides that at least one member of the Committee must be a lay member.

Governance, Performance, Risk and Control

- a) To review the Council's corporate governance arrangements against the good governance framework and consider annual governance reports and assurances.
- b) To review the Council's draft annual Self-Assessment Report, and make any appropriate recommendations for changes to the conclusions or actions the Council intends to make.
- c) To review the Council's draft response to the Panel Performance Assessment Report, and make any appropriate recommendations for changes.
- d) To review the Council's draft response to any Auditor General's recommendations arising from a special inspection in respect of the Council's performance requirements and to make any appropriate recommendations for changes.
- e) To review and assess the authority's ability to handle complaints effectively and to make any associated reports and recommendations in relation to the authority's ability to handle complaints effectively.
- f) To review the Annual Governance Statement prior to approval and consider whether it properly reflects the risk environment and supporting assurances.
- g) To consider the Council's arrangements to secure value for money and review assurances and assessments on the effectiveness of these arrangements.
- h) To consider the Council's framework of assurance and ensure that it adequately addresses the risks and priorities of the council.
- i) To monitor the effective development and operation of risk management in the Council.
- j) To monitor progress in addressing risk related issues reported to the Committee.
- k) To consider reports on the effectiveness of internal controls and monitor the implementation of agreed actions.
- l) To review the assessment of fraud risks and potential harm to the Council from fraud and corruption.
- m) To monitor the counter fraud strategy, actions and resources.

- n) To review any proposals in relation to the appointment of external providers of internal audit services and to make recommendations.
- o) To review the governance and assurance arrangements for significant partnerships or collaborations.

Internal Audit

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

External Audit

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

Financial Reporting

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

Accountability Arrangements

- mm) To report to full Council on a regular basis on the Committee's performance in relation to the terms of reference and the effectiveness of the Committee in meeting its purpose.
- nn) To report to Council on an annual basis and to publish an annual report on the Committee's work, its performance in relation to the Terms of Reference, and its effectiveness in meeting its purpose.
- oo) To raise the profile of probity generally within the Council and to report on matters of concern to the individual Cabinet Member, relevant Scrutiny Committee, Cabinet or to Council as necessary and appropriate.
- pp) To work in synergy with the Scrutiny Committees of the Council and liaise with other Council Committees as and when appropriate to avoid duplication in work programmes.
- qq) To report to those charged with governance on the committee's findings, conclusions and recommendations concerning the Appendix 1 adequacy and effectiveness of their governance, risk management and internal control frameworks, financial reporting arrangements, and internal and external audit functions
- rr) To publish an annual report on the work of the committee.

Training and Development

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

Note: Governance & Audit Committee Statement of Purpose extracted from the Council Constitution (07.09.21).