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Risk ID	If we do not					>Constant monitoring		>More use of	>Member of	>Various	>Public	>WAO	>Range of	>IT audits	
222	have robust					and surveillance of		secure cloud	the Cyber	IT /	Services	review	IT audits	included in	
	digital, data					cyber risks by Security		storage.	Security	System	Network	undertake	in the plan	the	
Risk Title	and cyber					Office using system			Information	audits in	(PSN)	an IT audit	to be	2023/24	and Future Council
Digital, data and	security					and tools in place.			Sharing	Audit Plan.	complianc	each year as	completed	plan as	m
cyber security	measures and					Situation reported monthly to Digital			Partnership	>GDPR	e certificate	part of	as part of	per the	O
Risk Level	systems and behaviours in					Services Board and			which is a joint industry and	audit added	- tested	reviewing financial	the rolling audit	rolling programm	nre
Corporate	place,					Information			government	18/19.	annually.	accounts	schedule.	e and	I t
Corporato	embedded					Governance Board			initiative to	10/10.	>Achieved	docodino	Soriodaic.	additional	힏
	and working					chaired by SIRO			exchange		IASME			ICT	a
	as best as					>Communication to			cyber threat		Cyber			reviews as	- Transformation
	they can be,					users to keep up			information		Essentials			a result of	nat
	then we will					awareness			>Part of Wales		certificatio			the annual	orr
	be vulnerable					>New tools from			Warning		n, working			consultatio	nsf
	to cyber					Microsoft being			Advice and		towards			n exercise	<u>a</u>
	threats,					reviewed to provide			Reporting		Cyber Essentials			and review of risk	
	disruption to service					phishing test as part of continued vigilance			Point to share cyber threats		Plus by			registers.	its
	delivery,					and education to users			and defences		March			registers.	and IT Audits
	possible loss					on cyber security			with other		2019				<u> </u>
	of information					>DR test training			public bodies		2010				힏
	including					completed for Digital			> Cyber						
	confidential					Services team.			Essentials and						es
	information					Simulated test of a			Cyber						Services
	and					cyber attack. Training			Essentials						Se
	associated					to be			Plus						
	fines and					provided to HoS and CMT			accreditation						Customer
	reputational					Civit >Covid-19 – Ensure			>New regional						nst
	damage.					the Council's Covid-19			multi-agency cyber cell						Ō
						recovery plan			meetings						∞
					چ	accounts for increased			being attended						gita
					Harley	risk form cyber-attacks			to share						Digital & (
					坣	and data fraud arising			intelligence						ا <u>د</u>
					윽	from new working			and actions						Siffic
					_	patterns and reliance			>PSN						Specif
					g	on technology			Certification			1			S
					Lackenby	>Introduce simulated			Achieved						Service
		gh	_		-ac	cyber-attacks on staff			>Cyber						ě
		High	Medium			to measure their actions, identify			essential accreditation						(O)
		Very	edi	Red	Sarah	weaknesses and			achieved						
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					>Provide staff with ICT			>Member of						
					security and data			Wales WARP						
					management updates			& CISP						
					and guidance during			sharing						
					Covid-19 and whilst			knowledge of						
					working from home including cyber			threats. >Discussed at						
					security guidance and			IG Board –						
					Covid-19 cyber scams			standing						
					staffnet page			agenda item						
					>Cyber security during									
					Covid-19 reviewed									
					alongside advice from									
					Warp and PSN									
					compliance e.g. use of									
					Zoom. >Cyber security									
					strategy created and									
					ready for engagement									
					with staff									
					>Digital services									
					working with internal									
					audit and emergency									
					planning to further									
					improve the ICT									
					disaster recovery plan									
					>Live testing of the DR Plan, options being									
					reviewed potentially in									
					line with wider									
					corporate business									
					continuity exercise									
					>LrF Cyber exercise									
					planned and revised									
					SIRO training									
					>Comms. Issued to									
					staff and members detailing impact of									
					cyber attack at other									'
					councils.									
					>BullWall Software									
					purchased to protect									
					against malware									
					attacks.									

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Risk ID 235 Risk Title Emergency Planning, Resilience and Business Continuity Risk Level Corporate	If we do not have sufficient emergency planning, resilience and business continuity arrangements in place, then we will not be able to respond effectively in an emergency, provide the necessary civic leadership or continue to run vital services and ensure compliance with the legal requirements of the Civic Contingencies Act 2004 as a Category 1 Responder.	Medium	Medium	Amber	Ness Young / Craig Gimblett	>Continue to plan for and respond to emergencies as a Category 1 responder under the Civil Contingencies Act, as follows: > Train staff at Operational, Tactical and Strategic Level via the South Wales Local Resilience Forum > Review each year and exercise every 3 years a Major incident Plan, unless activated or significant change such as a change in statute require earlier change > Maintain and review on an annual basis all subordinate plans, including Mass Fatalities, Flood, Offsite COMAH Plan, Rest Centre Plan. with exercising as appropriate > Manage a duty officer rota to effectively respond to emergencies available 24 hours per day, 365 days per year > Annually review all identified risks within the borders of Swansea Council to ensure control measures	>EMS Manager briefs leader/cabinet as required>CMT receives regular updates on key planning and agreement as required from EMS manager. >EMS manager meets monthly with the portfolio holder for political oversight and visibility. EMS Manager represents Swansea Council at Strategic level within SWLRF and Pan Wales Forums.	>EMS have been called to several Scrutiny panels, with none currently in the calendar.	>Multi agency exercising and training >Internal development/ training of new officers including newly created assistants post. >Joint work programs and information sharing with Welsh Civil Contingencies managers and South Wales Resilience Team. >Service Manager part of the National and Regional PSPG group and CONTEST Group with local PSPG arrangements in-place. >EMS is embedded within the SWLRF at Executive, Strategic and Tactical levels BC plans in-place with each HoS.	>EMS were audited in Nov 22 with an outcome of High assurance rating.	>EMS have been part of the consultatio n group for Welsh Governme nts Civil Contingen cies review this will lead to independe nt external audit of Civil Contingen cies when final structures are establishe d in 2023. > The Protect Act, which places responsibil ity for CT planning based on organisati onal risk, as part of this a new Regulator will be appointed to enforce complianc e/breache s and audit	>Independe nt external Audits will by conducted through Welsh Government and the new regulator appointed to enforce the Protect Duty in 2023/24 to establish maturity and mitigation.	>Standard audits in the plan cover this area on rolling basis.	>Audits in the plan to be completed in as part of the rolling programm e include disaster recovery & Business Continuity, Emergenc y Planning & Business Continuity	Service Specific Audits – Communications / ICT / Council wide assurance

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					remain relevant and proportionate. > Redistributed to all Heads of Service and review each year the Council's Corporate Business Continuity policy and guidance to ensure business continuity plans are robust and reviewed annually. > Review each year for all significant risks the Emergency Management Service (EMS) guidance, procedures and action cards. > The EMS acts as the conduit for security and counter terrorism information from the Welsh Extremism & Counter Terrorism Unit, disseminating information to key internal and external partners as required. > EMS maintains a fully stocked Incident Response Vehicle, to protect/support the public during an emergency. A Swansea Risk Group with Partner Agencies has been established. Plans are in-place for further Covid-19 or other infectious disease outbreaks			>Plans and Action cards reviewed annually and EMS audited in 2022. >Collaborative working with SWP on call out protocols in-place and reviewed. >ACT App and free training promoted across Authority. Local Partner CT comms strategy and alerts system established.		arrangeme nts.				

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					>Rest Centre Plans									
					and arrangements									
					have been tried and									
					tested with partners,									
					including infection									
					control arrangements									
					for evacuation									
					> PPE reserve for responders and public									
					during evacuation is									
					in-place									
					>Additional Gold									'
					strategic training									
					increased to 2 per									
					year to maintain									
					organisational									
					resilience.									
					>Review and update									
					business continuity									
					plans annually on									
					need completed by									
					HoS.									
					>Crisis Media Plan in-									
					place									
					>Mass Fatality									
					Mortuary									
					arrangements in-place									
					>Major Incident Plan									
					>Flood Management									
					Plan									
					>Emergency Recovery									
					Plan									
					>Offsite COMAH Plan									
					& Exercising									
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					Centre >Ness Young in-post									
					for corporate									
					governance until replacement Director									
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					>ACT training promoted across organisation. >Call out & activation protocols/ action cards in-place with 24/7 duty rota. >RAG alert system across H&S, Emergency Management >Service and Corporate Business Impact Assessments and business continuity plans in-place >Continual review of plans & protocols >Vehicle mitigation & protective security advice provided and submission for additional HVM submitted via DLUC. >PSPG Core Group established, and PSPG wider comms cell for information to be shared with local partners established.									

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Risk ID	If we fail to		1		<u> </u>	>Maintain the	>H&S	>H&S	>Member of	>H&S	> H&S		>Standard	>Health,	1
Risk Title Health & Safety Risk Level Corporate	If we fail to have robust Health & Safety policies and arrangements in place, then there could be a health and safety breach identified as a corporate failing with associated legal, financial and reputational consequence.	High	Low	Amber	Ness Young / Craig Gimblett	>Maintain the Corporate Health & Safety Policies, which clearly identifies the Health & safety responsibilities of every level of employee, and review (including subordinate policies) every 3 years or if significant change occurs, such as a change in statute, leader, CX or statute changes. > Provide the Corporate Health & Safety Policy to all staff during induction and provide mandatory Health & Safety training framework for all employees. > Continue Bi-annual Health & Safety Committee meetings chaired by each Director and made up of employee and management representatives and trade unions, supported by competent H&S Officers who provide statistical reports, advice and any updates from the Health & Safety Executive. > Continue to undertake an annual program of Health &	Manager provides regular updates, reports, presentations, and statistics. to CMT. >H&S Manager meets monthly with portfolio holder to provide briefing and political oversight and awareness. >Accident Statistics and investigations finding provided to all H&S Committees' and sub groups.	Manager has provided updates to numerous scrutiny panels, none currently in diary. >Service has been fully audited internally in 2019.	>Member of British Association of Counsellors and Psychotherapi sts (Bacp). >Directors H&S Committees & Sub Safety Groups >Increased accessibility to H&S training via teams and online. >Policy development and review plan in-place under full consultation. >Officer representation at trade union meetings. >Additional resources placed in Occupational Health (31/03/230 & Stress Management and Counselling, with extension of Psychological Support project until 31/03/23	Audit Plan	> H&S Manager represents Swansea on a Pan Wales/regi onal basis as part of the Managers forum to share best practise and coproduce where appropriat e.		>Standard audits in the plan already cover this area.	>Health, Saftey & Wellbeing audit completed in 22/23 on the rolling programm e	Service Specific Audits – Communications / ICT / Council wide assurance

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					Safety and Fire Safety Management audits and inspections across all service areas to maintain and improve arrangements and compliance with policy and ensure that agreed improvement plans are put in-place and monitored by the Principal H&S Officer through monthly 1-2-1's for completion. >Continue to ensure that there is appropriate H&S training and administer Corporate H&S training records and qualification refresher recalls and issue compliance reports to services on a bi-annual basis monitored by the Senior H&S Training Officer. >Continue to investigate more significant accidents falling under the remit of the RIDDOR regulations and provide a management report to prevent re-occurrence, ensure legal compliance and an improvement of			> New CORITY OH management software management package due for implementatio n March 2023. > SEQOHS accreditation submission and assessment due March 2023. > Application for evaluation for Welsh Government Gold Corporate Health Standard October 2023.						

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						standards; in addition,									
						provide these reports with statistical									
						information to									
						Directors bi-annually									
						and within									
						an annual corporate									
						accident report and									
						trend analysis.									
						>Manage a									
						preventative RAG									
						rated alert system									
						allowing communication of best									
						practise, legal/policy									
						changes and areas for									
						action across the									
						Authority and									
						document control and									
						store for evidence									
						purposes									
						and liaison with the									
						Health & safety Executive, fire and									
						rescue services and									
						legal representatives									
						>Provision of H&S									
						advice/guidance/traini									
						ng to staff.									
						>H&S toolkits									
						>Noise, dust, light,									
						humidity, vibration sampling									
						>Riddor procedures									
						for reportable									
						incidents to HSE.									
						>RAG alert system									
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Risk ID 309 If the impact of the ongoing COVID (COVID response and subsequent volume of recovery activities continue to pressure business as usual work across both services and the Council's external suppliers, then there is a risk the Oracle Fusion project will continue to experience delays that could impact will continue to experience delays that could impact where appropriate where against a could impact will are removed. The council is experience delays that could impact where appropriate where spirance in the council is experience delays that could impact where appropriate where appropriate where of the ongoing of the cader updated on the Audit Plan on the Au	Busines	s Risk	 ts	poor	Status	Update		Oth	er <u><i>Internal</i></u> Assur	ance	Other <u>Ir</u>	ndependent A	Assurance	Neeus		ın Area
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pressure business as usual work across both services and the Council's external suppliers, then there is a risk the Oracle Fusion project will continue to experience delays that could impact the go live date of April 2023 and project manager > Executive Steering Board meet fortnightly and escalated to CMT/Cabinet where appropriate > Heads of Service added to the Executive Steering Board > Heads of Service monitoring capacity and remedial actions plans put in place where appropriate > Daily monitoring by the implementation Team of the																an
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Risk ID	If the council		1		1	>Cornorate	>Transformati	> Scrutiny	> Governance	>Independ		>Independe		>Audit of	, , ,
Risk Title Corporate Transformation Plan Risk Level Corporate	If the council does have a robust and deliverable Corporate Transformatio n Plan it will struggle to make the significant changes needed to its operating model, technology, process and service delivery to respond effectively to the external challenges it is facing.				ng / Ness Young	>Corporate Transformation Plan to be developed, articulating specific projects and programmes and governance, to be presented to Cabinet for approval > Workforce and Organisational Development Programme(s), supported by business cases, to be developed to implement the Council's Workforce Strategy as a key programme(s) in the Corporate Transformation Plan > Digital Transformation Programme, supported by a business case, to be developed to implement the Council's Digital Strategy as a key programme in the Council's Digital Strategy as a key programme in the Corporate Transformation Plan > Directors to identify key strategic change projects / programmes that should form part of the Corporate	>Transformati on Delivery Board established, Chaired by the Deputy Leader for Transformatio n. All Directors are members. Audit Wales observers on Board. Formal terms of reference in place. >Transformati on Delivery Board meets quarterly and reports at least three times a year to Cabinet/CMT. Annual report of progress against plan to Cabinet.	> Scrutiny Committee to consider lessons learned from Sustainable Swansea and Achieving Better Together Programmes to inform development of Corporate Transformatio n Plan	> Governance and Audit Committee to consider lessons learned from Sustainable Swansea and Achieving Better Together Programmes to inform development of Corporate Transformatio n Plan > Organisation al Transformatio n Corporate Development Committee to contribute to develop of new Corporate Transformatio n Plan informed by a lessons learned report on the Sustainable Swansea and Achieving Better Together Programmes > Establish a	>Independ ent Assurance Is Provided From Internal Audit >		>Independe nt Assurance is provided by Audit Wales, who attend Transformati on Delivery Board as observers and will include transformati on performance and risk in annual risk assessment work		>Audit of ABT Transform ation included for 2023/24	Cross Cutting Audits – Section 151 Assurance / Council Governance & Control
		High	Low	Amber	Ness Young	Transformation Plan. All programmes within the plan will have formal governance arrangements in place			Transformatio n Delivery Board to provide strategic						

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							Level and Source	ce of Assurance				Internal	Planned	
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					to oversee their delivery, reporting to			direction and leadership to						
					the Transformation			ensure that						
					Delivery Board			between 2022						
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					. ,			Swansea						
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Risk ID 335 Risk Title Workforce recruitment and retention Risk Level Corporate	If the Council is not able to recruit and retain the right staff, then there may be reduced workforce capacity and capability, leading to lower staff morale and productivity, poor work quality, increased staff costs and reduced staff wellbeing / higher sickness rates.	Medium	Low	Amber	Ness Young / Rachael Davies	> Establish a recruitment data set by April 2023 to include agreed measures on; for example, turnover rates, length of time to recruit, identification of difficult to fill roles by April 2023 in order to identify areas to improve efficiency in recruitment processes where time to recruit is challenging, and to better understand areas where turnover is predicted to impact service delivery. > Establish exit interview process by June 2023 for 'difficult to fill' roles to better understand the reasons for leaving the Council and review whether action can be taken to prevent numbers from leaving. > Identify difficult to fill roles from each Directorate by April 2023 to target resource to prioritise these hard to fill roles above other regular recruitment. > Review market supplement policy and those posts receiving supplements by April 2023 to assess impact on attraction strategy and retention rates in	>Cabinet Member briefings, Cabinet reports where applicable	>Regular reporting to Scrutiny Working Group - Regular reporting to Organisational Development CDC	>Quarterly reporting provided to Directorates for PFM to highlight areas of concern and consider targeted approaches accordingly. Quarterly reporting to Workforce Transformation Programme Board	>Internal audit of recruitmen t procedure s			>Standard rolling audit schedule, repeated based on audit risk score.	>Audits included on rolling programm e in HR & OD / Service Centre. Includes Recruitme nt and Staff Contracts for 2023/24	Service Specific Audits - HR & OD, Service Centre / Transformation & Future Council Development

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	Current Impact	Current Likelihood	Overall RAG Status	Risk Owner / Updater	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
					Selection Policy so that it meets with									
					employment legislation, best practice and Council need; further									
					development of our Recruitment Attraction Approach; a review of									
					Application Process so that it is compliant with legislation and is seen									
					to be supportive to applicants; upskilling of recruiting managers									
					so that they are appropriately trained in unconscious bias									
					training; and that all employees who are involved in recruitment									
					panels follow correct processes in conducting recruitment									
					interviews. particularly those covered in Strand 4 Workforce									
					Planning, Strand 5 Workforce									
					Development, Strand 6 Recruitment and Retention, Strand 7									
					Recognising Performance.									

						Level and Source of Assurance								Planned	
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Busine	ess Risk		000	Statı	pd		Oth	er <u>Internal</u> Assur	ance	Other <u>n</u>	ndependent A	ssurance		VVOIK	n Ar
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Dick ID	If the Council		1			> 12 month Cornersts	>Cabinat	Scruting	Mandatani	Sinternal	\UQE		Standard	Seefeation	
Risk ID 336 Risk Title Mandatory Training Risk Level Corporate	If the Council does not implement, monitor and ensure the completion of mandatory training, then the Council may not fulfil its statutory and regulatory obligations or ensure the safe and effective operation and delivery of services.	Low	Low	Amber	Ness Young / Rachael Davies	> 12 month Corporate objective rolled out to organisation on completion of mandatory training to be included in new Performance and Goals Fusion module, commencing April 2023. > Regular Quarterly and annual reports to CMT on compliance levels by Directorate. > Managers to record in Oracle Fusion when training is undertaken and ensure any refresher training is undertaken and report on compliance from April 2023. > Annual review of the mandatory training list to ensure list is up to date and appropriate. > Corporate Safeguarding policy in place for all staff and councillors to follow and reviewed annually. > By April 2023, Statutory officers identified and suitably qualified to ensure safeguarding arrangements are in place and policies and procedures are implemented. > Establishment of Corporate objective to	>Cabinet Member briefings, Cabinet reports where applicable	>Scrutiny Panels in place to scrutinise Social Services Work and Performance, of which safeguarding training is included; Scrutiny Working Group – Workforce in place	>Mandatory Corporate Training available for all Staff and Members. Reports to CMT on progress and actions required	>Internal Audit of mandatory training complianc e Governan ce and Audit Committee reporting	>HSE where applicable CIW/EWC where applicable		>Standard rolling audit schedule, repeated based on audit risk score.	>Safeguar ding cross cutting audit is included in the 22/23 audit plan in relation to Safeguardi ng specifically >Corporat e Learning & Developm ent team audit due for 2024/25 following Fusion implement ation linked to training records	Service Specific Audits – HR & OD, Service Centre / Transformation & Future Council Development

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		Current Impact	Current Likelihood	Overall RAG	Risk Owner /	Management Assurance	Council/ Cabinet	Scrutiny	Other	Internal Audit	Other Bodies	External Audit			Audit Plan Area
						measure against completion of mandatory training, reportable quarterly via Oracle post April 2023. > Establishment of Corporate objective for Completion of 121s and appraisals, reportable quarterly via Oracle post April 2023. To be developed under Goals and Performance Model									

Last Updated: 10/02/23