

## NORTH YORKSHIRE COUNTY COUNCIL

### AUDIT COMMITTEE

19 April 2012

### RISK MANAGEMENT – PROGRESS REPORT

#### Report of the Corporate Director – Finance and Central Services

#### 1.0 PURPOSE OF THE REPORT

- 1.1 To consider an updated Corporate Risk Management Policy.
- 1.2 To receive details of the updated Corporate Risk Register.
- 1.3 To consider progress made on Risk Management matters.

#### 2.0 BACKGROUND

- 2.1 According to the Terms of Reference of the Audit Committee, its role in risk management is:
  - (i) to assess the effectiveness of the authority's risk management arrangements and
  - (ii) to review progress on the implementation of risk management throughout the authority.
- 2.2 In order to fulfill this role, regular reports to this Committee therefore cover the implementation of the Policy/Strategy as well as other related risk management matters in order to fulfill this role.

#### 3.0 RISK MANAGEMENT POLICY

- 3.1 The County Council formally adopted a revised Corporate Risk Management Policy and supporting Strategy on 16 December 2009 with a provision that it will be reviewed and updated every two years.
- 3.2 The Policy has been amended to reflect the latest International Standard on Risk Management (ISO 31000:2009) together with best practice. There are a number of revised principles and benefits, but the objectives and how they will be achieved are substantially unchanged.
- 3.3 The revised Policy is attached as **Appendix A**.

- 3.4 The current Strategy identifies what is required to implement and achieve the Policy. It is essentially a narrative that describes the various roles and responsibilities within the County Council, the risk management methodology, arrangements for monitoring and reporting etc. This is valid material but the text is lengthy and might be better presented as supporting material to a Strategy.
- 3.5 Given the current climate of change the Strategy itself needs to focus more sharply on such issues as how the organisation
- identifies and manages its risks in these 'dynamic' times
  - how the organisation identifies, and prepares for, potential future risks
  - how governance risks are mitigated via the various assurance processes.

It is therefore proposed that the current Strategy is subject to a fundamental review and reported back, with an Action Plan to a subsequent meeting. The Corporate Risk Management Group will oversee this review process.

- 3.5 The Committee is therefore asked to consider the updated Corporate Risk Management Policy prior to its submission to the Executive for ultimate approval by the County Council.

#### 4.0 **CORPORATE RISK REGISTER**

- 4.1 The Corporate Risk Register (CRR) is fully reviewed every year and updated by the Chief Executive and Management Board in August/September. A six monthly review is then carried out in February/March.
- 4.2 A 6 monthly update of the Corporate Risk Register was carried out in March 2012 – see attached at **Appendix B**. This involved reviewing the risks, risk controls and risk reductions that had been identified for each of the risks and making amendments to the Register where necessary.
- 4.3 Following the review, the subsequent amendments were made to the risks:
- Health Responsibilities – this risk was reviewed by the recently appointed Corporate Director, Health and Adult Services as well as the Chief Executive. The main changes included adding the fact that the draft transition plan including governance arrangements is in place, and increasing the financial impact from Medium to High. This has raised the ranking for this risk to 1. It is felt that this reflects the position of this challenging project at this point in time
  - Waste Strategy – this risk has been brought up to date and in line with the ongoing planning application
  - Delivery of the 3 year MTFS – the wording of the risk has been amended to reflect the fact that the County Council recently approved a 3 year, rather than a 4 year, MTFS
  - One Council Change Programme – certain actions have been slightly amended to reflect the current position

- Communication – this risk has substantially stayed the same with only one ‘action by’ date being slightly amended
- Major Emergencies in the Community – an action has been added to this risk relating to updating emergency plans to reflect the transition of public health to the local authority
- Organisational Performance Management – an ‘action by’ date has been amended to reflect the need to have agreed approach in relation to performance management at all levels.

#### 4.4 To assist Members interpret **Appendix B**

- Risks are identified by Management Board during a prep meeting and workshop
- Each risk has then to be ranked based on the following:
  - existing risk controls in place
  - probability of the risk occurring (based on existing controls)
  - impact of the risk occurring (based on existing controls)
  - further risk controls which may reduce current probability or impact
- The prioritisation system follows a fairly traditional risk evaluation approach in that the **probability** and **severity** of risks is measured using High, Medium, Low and Nil categories
- However, to facilitate the assessment of the severity of each risk this is done in relation to 4 distinct **impact areas**. Each level within the County Council ie Service Units, Directorates and Corporate will rank the risks against their own ‘risk appetite’ (known as a Risk Classification Table) which reflects their key objectives and uses familiar performance measurements where possible. The impact of risks is then assessed in terms of:
  - Obj = failure to meet key objectives and standards – reflecting current service plans
  - Fin = Financial impact – reflecting current budgets
  - Serv = delays in service delivery – reflecting current service indicators
  - Rep = loss of image or reputation – reflecting key image indicators

As each risk is ranked with reference to current controls and then future controls, the risk prioritisation system can compute a “score” in the range of 1 to 5

- 1 and 2 being a ‘red’ risk
- 3 and 4 being an ‘amber’ risk and
- 5 being a ‘green’ risk

One of the key things to look for in the Register is the movement of the score (described as 'Cat' in **Appendix B**) as between the 'Pre' (i.e. present stage) and 'Post' (i.e. after risk mitigations are in place). For certain risks, however, this does not change as the risk mitigations cannot prevent the event (e.g. severe flood) but can address/reduce its impact.

## 5.0 CORPORATE RISK MANAGEMENT GROUP

5.1 The role of the CRMG is a combination of:

- sharing best practice and awareness of risk issues across the County Council
- identifying new areas of risk, especially those that affect more than one Directorate
- managing the work of the various task and finish groups that actually do most of the developmental work on risk identification via their risk action plans

5.2 The Corporate Risk Management Group (CRMG) meets 6 times a year although one of these dates is reserved for the corporate risk management conference (see **paragraph 6** below for more details). Notes of the meetings held on 12 September 2011 and 25 January 2012 are attached at **Appendices C and D** respectively. Attachments to these reports have not been provided but if there are any particular topics where there is more detail required, then this can be provided on request.

5.3 The meeting on the 12 September 2011 looked at updates and risk registers for Health and Adult Services and Business and Environmental Services. There were also updates from Working Group Leaders on issues such as fire safety and security, health and safety, driver policy, personal safety (including VoiceConnect) and food safety.

5.4 The meeting on the 25 January 2012 looked at updates and risk registers for Chief Executive's Group and Finance and Central Services. The Group was also provided with an update from Working Group Leaders on issues including safer recruitment and employment, safety risk, service continuity and challenging behaviour.

5.5 The latest meeting took place on 22 March 2012. Updates on risk management and risk registers were received from Health and Adult Services, Business and Environmental Services and Children and Young People's Service. Updates were also received from Working group Leaders including information governance, health and safety risk, vehicle and driver issues and back care. The Notes of this meeting were not available at the time of drafting this report but will be attached to the next progress report to this Committee.

5.6 The notes of the CRMG meetings demonstrate quite clearly the emphasis on practical problem solving, and issue resolution, that the CRMG adopts. The involvement of staff who deal with these matters on a day by day basis ensures that proposals are always practical and do-able.

## 6.0 RISK MANAGEMENT CONFERENCE XIII

6.1 The 13<sup>th</sup> risk management conference took place at the Pavilions of Harrogate on 3 November 2011. Approximately 100 delegates attended from across the County Council. Topics presented in the morning included interactive sessions around the challenges and opportunities associated with the One Council Change Programme. In the afternoon, a further interactive session took place which concentrated on the “coping skills” required for individuals to ‘continue to be motivated and to motivate’ along with the ability to continue to ‘deliver and enable the delivery of’ high quality services in a changing environment.

6.2 The annual Awards were also presented by the Chairman as part of the Conference. There was a winner and two highly commended awards for the Best Risk Management Initiative this year as follows:

- Winner  
Health and Adult Services – Quality Assurance Framework for Providers of Social Care
- Highly Commended  
Business and Environmental Services – Waste Contract Monitoring System
- Highly Commended  
Finance and Central Services – Corporate Personal Safety Policy Roll-Out

6.3 As part of their award the winners attend a work related conference of their choice and their submissions are considered for entry into the national ALARM (Public Risk Management Organisation) Awards competition.

6.4 The feedback from delegate questionnaires was very positive and the key indicator “Benefit of conference to you” increased on last year’s score thus showing that the conference continues to provide valuable risk management training.

6.5 The next Risk Management Conference will be held on 8 November 2012 at the Pavilions in Harrogate.

## 7.0 SELF ASSESSMENT

7.1 The CIPFA Better Governance Forum recently published a self assessment checklist to help organisations review their risk governance arrangements.

7.2 A copy of the self assessment prepared by relevant officers is attached as **Appendix E**.

7.3 Members are invited to review the self assessment and consider whether any follow-up actions are required.

## 8.0 BETTER GOVERNANCE FORUM (BGF)

- 8.1 At the last meeting the Committee considered an Audit Committee Update issued by the BGF. In that document there was a section entitled *Risk Outlook for 2012* and the Committee agreed (minute 197(d)) that a report should be submitted “for a future meeting concerning the County Council’s position with regard to the risk areas” listed in the BGF paper.
- 8.2 There are 10 risks identified each with suggestions as to “what the Audit Committee can do”. Included in the “can do” items are links to further checklists issued by the BGF.
- 8.3 Given the extended nature of this list of risks, the relatively short time period elapsed since the last meeting, and the need to prioritise staff time at the moment towards the financial year end etc it is proposed to include this analysis in the next Risk Management report scheduled in the Work Programme for the September meeting.

## 9.0 RECOMMENDATIONS

That the Committee:

- (i) recommends the updated Corporate Risk Management Policy (**Appendix A**) to the Executive for approval by the County Council
- (ii) notes the updated Corporate Risk Register (**Appendix B**)
- (iii) considers the self assessment of Risk governance arrangements (**Appendix E**)
- (iv) notes the proposal to submit a report on the Risk Outlook 2012 to the September meeting.

JOHN MOORE  
Corporate Director – Finance and Central Services

Finance and Central Services  
County Hall  
Northallerton

12 April 2012

**Author of report:** Fiona Sowerby, Corporate Risk and Insurance Manager  
Tel 01609 532400

**Background documents:** None

**NORTH YORKSHIRE COUNTY COUNCIL**

**CORPORATE RISK MANAGEMENT  
POLICY**

**“Striving for excellence in risk management”**

**April 2012**

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## CORPORATE RISK MANAGEMENT POLICY

### 1.0 Introduction

1.1 The Vision of the County Council is that “We want North Yorkshire to be an even better place for everyone to live, work or visit”. To achieve our Vision we aim to:

- ensure **good access for all**
- help people to **live in safe communities**
- help all **children and young people to develop their full potential**
- promote a **flourishing economy**
- maintain and enhance our **environment and heritage**, and
- improve **health and wellbeing** and give people **effective support** when they need it.

1.2 Risk, uncertainty and change create a challenging dynamic as the County Council strives to meet these objectives. Risks, whether recognised or unforeseen, create a threat to achieving performance targets. This may result, for example, in delays to service delivery or reductions in service quality. Uncertainty and change, when considered thoroughly however, can also provide the opportunity to introduce new, innovative and effective ways of delivering services and act as the catalyst for developing services with better outcomes and fewer risks for our staff and our local communities.

1.3 Risk Management is integral to all aspects of our service delivery as well as the management of all our staff, physical assets and financial resources. As such it is reflected in all Council policies and Service Plans where appropriate.

1.4 This Risk Management Policy has been developed jointly by the Management Board, the Leader of the Council and the Executive.

1.5 Implementation of this Risk Management Policy and associated management systems contributes to improving our corporate and best value performance.

### 2.0 Definition of Risk and Enterprise Risk Management

2.1 **Risk** is the chance or possibility of loss, damage, injury or failure to achieve objectives caused by an unwanted or uncertain action or event.

2.2 Enterprise **Risk Management** is the approach to managing all of the County Council’s key service risks and opportunities with the intent of maximising stakeholder value.

### 3.0 Principles

3.1 For risk management (RM) to be effective the County Council will aspire to the following principles:

- RM **creates and protects value** – we will ensure that RM contributes to the demonstrable achievement of our objectives and improvement of our performance such as human health and safety, security, project management, efficiency in operations, governance and reputation.
- RM is an **integral part of all organisational processes** – we will ensure that RM is part of the responsibilities of our management and part of our activities and processes including strategic planning, and all project and change management.
- RM is **part of decision making** – we will ensure that RM helps our decision makers make informed choices, prioritise actions and distinguish among alternative courses of action.
- RM explicitly **addresses uncertainty** – we will ensure that RM takes account of uncertainty, the nature of that uncertainty and how it can be addressed, including the fact that some risks can never be eliminated.
- RM is **systematic, structured and timely** – we will ensure that RM contributes to our efficiency and to consistent, comparable and reliable results.
- RM is **based on the best available information** – we will ensure that the inputs to the process of managing risk are based on reliable information but will always take into account any limitations of data or modelling or the possibility of divergence of opinions.
- RM is **tailored** – we will ensure that we reflect the contemporary situation in our risk management arrangements.
- RM **takes human and cultural factors into account** – we will ensure that we recognise the capabilities, perceptions and intentions of external and internal people that can facilitate or hinder achievement of our objectives.
- RM is **transparent and inclusive** – we will ensure the appropriate and timely involvement of stakeholders and, in particular, decision makers at all levels of the County Council, in order that RM remains relevant and up to date.
- RM is **dynamic, iterative and responsive to change** – we will ensure that risk management continually anticipates and responds to change, including ensuring that the process used is not burdensome and/or overly bureaucratic.
- RM **facilitates continual improvement** of the County Council – we will develop and implement processes to improve our risk management maturity alongside all other aspects of the County Council.
- RM will be **adequately resourced** – we will ensure that the necessary resources are in place in order to deliver excellent risk management.

### 4.0 Objectives

4.1 The objectives of this Risk Management Policy are to:

- continue to embed risk management into the culture of the County Council

- manage risk in accordance with best practice and support well considered risk taking
- anticipate and respond to changing social, environmental and legislative requirements
- minimise loss, disruption, damage and injury and reduce the cost of risk, thereby maximising the resources available for service delivery
- inform policy and operational decisions by identifying risks and their likely impact
- continue to raise awareness of the need for risk management by all those involved with the delivery of County Council services

#### 4.2 These objectives will be achieved by:

- establishing clear roles, responsibilities and reporting lines for risk management throughout the County Council
- providing opportunities for shared learning on risk management across the County Council
- providing risk management training and awareness sessions
- using a consistent methodology to develop, monitor and review Risk Registers
- incorporating risk management considerations into the County Council's management processes (eg business planning, project management, service reviews) and decision making (eg Executive reports)
- effective communication with, and the active involvement of, staff
- effective communication with, and the active involvement of partners
- monitoring arrangements on an on-going basis
- operating a Corporate Risk Management Group, led by a Corporate Director, that will be proactive in implementing and developing all the above
- delivering a Corporate Risk Management Strategy that is consistent with, and embedded within, the County Council's overall strategic policies and practices.

## 5.0 Benefits

### 5.1 We expect that when the above principles and objectives are being met that the following benefits will be realised:

- strengthened ability to deliver against objectives and targets
- improved stakeholder confidence and trust
- an established and reliable basis for decision making and improved governance
- assurance to Members and management on the adequacy of arrangements for the conduct of business and use of resources
- improved operational effectiveness and efficiencies including a reduction in interruptions to service delivery
- reduction in management time spent dealing with the consequences of a risk event having occurred

- improved health and safety of those employed, and those affected, by the County Council's undertakings
- ability to be more flexible and responsive to new pressures and external demands
- avoids surprises and minimises loss and waste
- better informed financial decision-making
- enhanced financial control
- reduction in the financial costs associated with losses due to service interruptions, litigation, etc
- reduce, or maintain constant levels of, insurance premiums
- minimal service disruption to customers and a positive external image as a result of all of the above

## 6.0 Framework and Process

- 6.1 In order to aspire to the Principles referred to in this Policy (see Section 3) it is necessary to have a conceptual Framework for Risk Management from which a Risk Management Process can be developed. The relationship between these three components is shown diagrammatically in **Appendix A**.
- 6.2 Details of the Framework and the consequential Process are provided in the Risk Management Strategy.

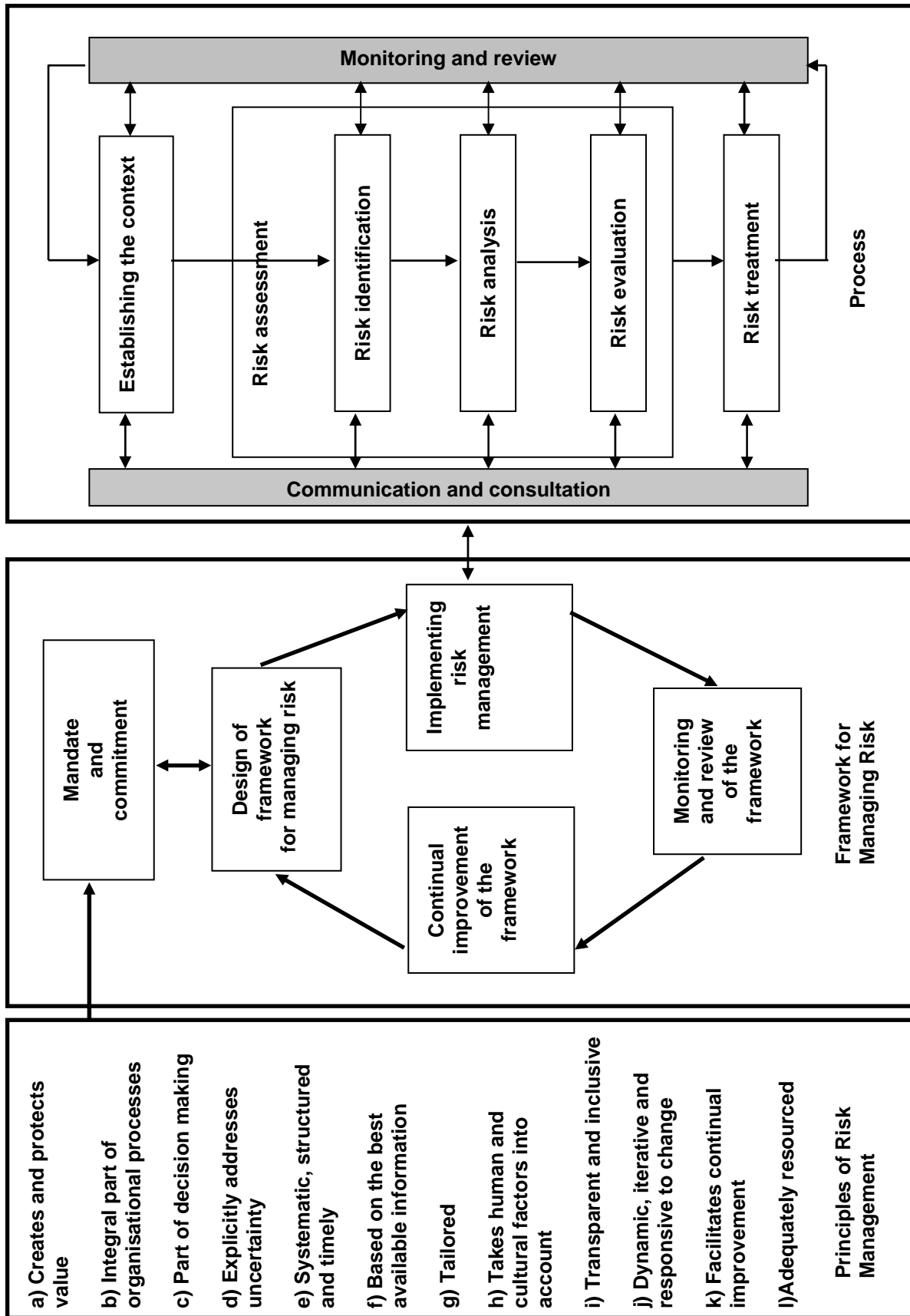
## 7.0 Responsibilities

- 7.1 The County Council accepts and recognises that it is the responsibility of all Members and staff to have regard for risk in carrying out their duties. If left unidentified and therefore uncontrolled, risk can result in a drain on resources that would better be directed to front line service provision, and to the meeting of the County Council objectives and community needs.
- 7.2 The Chief Executive, Corporate Directors, Service Heads and all line managers have the responsibility and accountability for managing the risks within their own work areas. All staff have a duty to work safely, avoid unnecessary waste of resources and contribute to risk management initiatives in their own area of activities. The co-operation and commitment of all staff is required to ensure that County Council resources are not squandered as a result of uncontrolled risk.
- 7.3 This Policy has the full support of the County Council which recognises that any reduction in injury, illness, loss or damage ultimately benefits the whole community of North Yorkshire.

## 8.0 Review

- 8.1 This Policy and other supporting documents such as the Risk Management Strategy will be reviewed at least every two years.

Relationships between Risk Management Principles, Framework and Process



## CEO Corporate Risk Register

Risk Register: **month 6 (Mar 2012) - summary**  
 Report Date: 14<sup>th</sup> March 2012 (pw)

Identity			Person		Classification												Fallback Plan			
Risk No	Risk Title	Risk Description	Risk Owner	Risk Manager	Pre					RR		Post					FBPlan	Action Manager		
					Prob	Obj	Fin	Serv	Rep	Cat	RRs	Next Action	Prob	Obj	Fin	Serv			Rep	Cat
20/47	20/47 - Health Responsibilities	Failure to be sufficiently prepared for our Health responsibilities and deliver integrated approaches with Health partners resulting in lost financial opportunities through joint provision of services, inability to protect the public adequately and not make sufficient progress in health improvement	CEO	CD HAS	H	M	H	M	M	1	7	29/02/2012	H	M	M	M	M	2	Y	CD HAS
20/45	20/45 - Waste Strategy	Failure to deliver the Waste Strategy	CEO	CD BES	M	M	H	L	H	2	10	31/05/2012	L	M	H	L	M	3	Y	CD BES
20/1	20/1 - Delivery of 3 year MTFS	(a) Failure to deliver the 3 year MTFS (2012/15) including the savings programme resulting in inability to balance the budget, potential distortion of priorities and public dissatisfaction. (b) Potential adverse effect of Government's review of business rates and council tax benefits and their impact on future funding levels	CEO	All Mgt Board	M	M	H	H	M	2	8	31/08/2012	L	M	H	M	M	3	Y	All Mgt Board
20/207	20/207 - One Council Change Programme	Failure to deliver the One Council change programme resulting in financial cost, poorer service outcomes, lost opportunities, need to revisit savings on front line services	CEO	CEG DMG	M	M	H	M	M	2	7	31/03/2012	L	L	H	L	M	3	Y	All Mgt Board
20/51	20/51 - Communication	Failure to effectively inform, consult, engage and involve the public/staff/Members, resulting in public dissatisfaction, loss of reputation, low morale, criticism of Members and missed opportunities	CEO	CEG DMG	M	M	M	M	H	2	2	31/03/2012	M	M	M	M	M	4	Y	CEG DMG
20/8	20/8 - Major Emergencies in the Community	Failure to plan, respond and recover effectively to major emergencies in the community resulting in risk to life and limb, impact on statutory responsibilities, impact on financial stability and reputation	CEO	CEO	L	L	H	L	H	3	6	31/05/2012	L	L	H	L	M	3	Y	CEO
20/49	20/49 - Organisational Performance Management	Lack of focus on performing at service, team and individual level resulting in poorer service delivery, public dissatisfaction, criticism increased costs and lost opportunities	CEO	CEG ACE PPP	M	M	M	M	M	4	4	30/04/2012	M	M	M	M	M	4	Y	CEG ACE PPP



## Corporate Risk Management Group

## Action Notes

Monday 12<sup>th</sup> September 2011, Meeting Room 2, County Hall @ 2.00pm

Present: Fiona Sowerby Chris Clark

Directorate Representatives:

Barrie Mason John Holden Peter Bright Tony Law (for Sukhdev Dosanjh)

Working Group Representatives:Phil Jones Wendy Parkin Dominic Passman  
Simon Wright Mike McCauley Roman Pronyszyn

Item		Action By
1.	<b>Welcome and apologies</b>	
	Apologies were received prior to the meeting from John Moore, Josie O'Dowd, Nick Postma and Sukhdev Dosanjh, for whom Tony Law substituted. Roman Pronyszyn was welcomed to the Group. Roman has taken over the role of Audit and Information Assurance Manager in Veritau, previously held by Helen Fowler, he will be reporting to this Group on Information Governance.	
2.	<b>Who's Who</b>	
	All are asked to continue to assist in keeping this document up to date by advising CC of any known changes.	<b>ALL</b>
3.	<b>Record of meeting held on 25<sup>th</sup> July 2011</b>	
	Agreed.  3 (5.iv) PJ advised that early feedback suggests that some of the 23 properties in which Radon monitoring equipment has been installed are indicating higher radon levels. He is due to receive the full report soon. DP advised that it now looks likely that NYCC will have to set up a programme to assess radon levels in all of the 143 properties identified by the Health Protection Agency. It was agreed that PJ, DP and JH would continue to work on these matters and bring a further report on outcomes and progress to the January meeting.  4.iii DP advised that 68 responses had been received to the H&S satisfaction survey. Report and analysis will follow.	<b>PJ/DP/JH</b>  <b>DP</b>
4.	<b>Matters arising</b>	
4.i	<b>Use of the term "senior managers" in Health &amp; Safety procedures</b>	
	JH confirmed that the suggested approach was acceptable to CYPS.	
4.ii	<b>Threat Procedures</b>	
	SW advised that he is updating the guidance to staff on response to threats	

	<p>and hazards. SW tabled two draft papers (attached), firstly, a single sheet "aide memoire" of key information including, responsibilities, types of threat and responses and secondly, a detailed procedural document.</p> <p>It is intended that SW will work with PJ and appropriate members of the Fire Safety and Security Group along with colleagues from North Yorkshire Police to update this guidance prior to having it approved and then launched. At this stage they are looking for feedback and Directorate Reps are asked to circulate the documents to their Groups and feedback to SW by end of October.</p>	<b>Dir Reps</b>
4.iii	<b>CCTV</b>	
	<p>PB advised that a meeting was held in September at which the use of CCTV in various NYCC locations was discussed. It is apparent that in many cases the need for CCTV, the effectiveness of CCTV as a deterrent and the methodology for its use is unclear. It is intended to develop a Policy for CCTV usage through the Tactical Property Group to ensure that future use and procurement meet agreed strategic needs.</p> <p>PB to update in January as part of the FCS report.</p>	<b>PB</b>
4.iv	<b>Challenging Behaviour Group</b>	
	<p>MM confirmed that Tim Smith would no longer be attending the Group. MM has discussed the disengagement with Tim and agreed that a link with Health and Adult Services will be maintained via a 6 monthly email or telephone conversation. No other Directorates have attendees at Challenging Behaviour.</p>	
4.v	<b>Management Board approval of revised approach to service continuity management</b>	
	<p>SW advised that the report is due to go to Management Board in the next few weeks; in the meantime a pilot of the proposed approach is running in BES.</p>	<b>JSM/SW</b>
4.vi	<b>CIPFA Risk Governance self assessment</b>	
	<p>FS advised that this is still to be progressed.</p>	<b>FS</b>
4.vii	<b>Hazard Warning Markers</b>	
	<p>See also Item 5.i</p> <p>BM advised that BES Trading Standards operate a system highlighting business addresses where officers had faced abuse or where investigations were ongoing. Joel Sanders is the BES lead on this and will be feeding the details into CIGG2.</p> <p>SD to report developments to this Group.</p>	<b>SD</b>
5.	<b>Exception report from Directorate Reps on Action Plans and Risk Registers 2010/11</b>	
5.i	<b>Health and Adult Services</b>	
	<p>TL took the Group through the report circulated with the agenda including:-</p>	



	<ul style="list-style-type: none"> <li>- the Directorate is now Health and Adult Services (HAS), this reflects the fact that NYCC will pick up a number of public health functions following the Government's transformation of public health services. It is likely that NYCC's roles will be mainly in the Health &amp; Wellbeing area.</li> <li>- Helen Taylor will join HAS as Corporate Director in October. Helen has worked at Tower Hamlets, PCTs and Cambridgeshire County Council in the past.</li> <li>- libraries, archives, registration and coroners administration services have all moved to into the Chief Executive's Group.</li> <li>- the HAS Directorate risk register has recently been updated, top risks are Demographic Change and Information Governance failure. There is a new risk relating to the Directorate's health responsibilities.</li> <li>- the violent warning marker policy has been agreed in principal by HASMB and is now going for consultation to staff, legal and audit. RP asked that SD includes him from the audit side and FS asked that the Insurance &amp; Risk Management section should also be included so that Insurer views could be sought. It is hoped to have the process operational by the end of November 2011.</li> <li>- reporting that there were no direct implications for NYCC following the BBC Panorama programme in May on the Winterbourne View care home. However, investigations by NYCC had highlighted an issue around the complexity of company structures whereby a number of seemingly separate companies may in fact lead back to a single parent organisation.</li> <li>- the collapse of Southern Cross care homes and the plans in place to ensure a smooth transition for the residents NYCC has placed in the five homes within the County.</li> </ul>	<b>SD</b>
5.ii	<b>Business and Environmental Services</b>	
	<p>BM took the Group through the report circulated prior to the meeting, highlighting:-</p> <ul style="list-style-type: none"> <li>- the working of the Directorate H&amp;S Group.</li> <li>- the contents of the upcoming report to BESMT which continues to show good H&amp;S performance in the Directorate.</li> <li>- current issues being dealt with in BES including continued monitoring of the transferred in Scarborough highways staff. On this, FS asked that once the staff are transferred out again (as part of the highways maintenance contract from April 2012) he informs the Insurance &amp; Risk Management section so that our premium can be adjusted accordingly.</li> <li>- training being provided by area offices for parish councils wanting to assist with winter maintenance.</li> <li>- key risks on the risk register are the Waste PFI on which commercial close has now been achieved and the planning application submitted; delivery of the savings plan; and procurement of the highway maintenance contract, which is nearing a conclusion.</li> </ul>	<b>BM</b>
6.	<b>Update report from Working Group Leaders - Review report and action plan</b>	
6.i	<b>Fire Safety and Security</b>	
	PJ took the Group through the report circulated with the agenda including:-	

	<ul style="list-style-type: none"> <li>- North Yorkshire Fire Service are happy with the progress being made on fire safety audits.</li> <li>- the signage for schools regarding public access to grounds is proving popular and is driving down theft/damage incidents, particularly in the Harrogate area.</li> <li>- Chris Green from North Yorkshire Police has provided advice on “defensible space” which will be used in updating the premises security guidance document.</li> </ul>	
6.ii	<b>Health &amp; Safety</b>	
	<p>DP provided a verbal update on a number of matters including :-</p> <ul style="list-style-type: none"> <li>- the activities of the POSH sub group.</li> <li>- provision of first aiders; the review of requirement for and provision of first aid is complete subject to outstanding work on the use of ext.7575 as a central incident reporting line. The next stage is to look at arrangements within the Directorates and this will start in January.</li> <li>- an incident at Aspin Park school in which a contactor was fatally injured after falling through a skylight.</li> <li>- the Health &amp; Safety Executive’s (HSE) intention to pursue recovery of their investigation costs from organisations following enforcement action. DP will discuss further with Anton Hodge about who would pay for school related incidents.</li> <li>- the HSE newsletter is to be replaced with an “e” version, saving money.</li> </ul>	DP
6.iii	<b>Personal Safety (and Voiceconnect)</b>	
	<p>WP took the Group through the report circulated with the agenda including:-</p> <ul style="list-style-type: none"> <li>- The Personal Safety Policy launch road shows were a success, reaching 75 managers and their teams. Particularly popular was the link with driver training. WP has also been asked to attend some team meetings to present the training.</li> <li>- The e-learning package is being accessed and the workbooks produced have been used in training the school crossing patrol staff. FS confirmed that the Risk Management budget will pay for the consecutive workbooks required.</li> </ul> <p>On Voiceconnect, WP advised that there are some teething troubles with the new text facility but once these are resolved it will be a useful feature.</p>	
6.iv	<b>Driver Policy</b>	
	<p>BM presented the Driver Policy which had been circulated prior to the meeting advising that he was looking for sign off from this Group prior to launching at the risk management conference in November. FS confirmed that there will be a one-off payment of £15k made from the Risk Management budget to assist in the roll out of the Policy.</p> <p>BM explained the following aspects:-</p> <ul style="list-style-type: none"> <li>- <b>Purpose;</b> to ensure those who drive on Council business do so in a safe way and to minimise the risk of accident or injury.</li> <li>- <b>Definition &amp; Scope;</b> the policy covers all powered vehicles driven in the course of work carried out on behalf of the Council but <b>does not</b> cover the journey to or from a place of work, unless that journey is in a</li> </ul>	

	<p>Council owned vehicle or the first initial journey is direct from home to an appointment.</p> <ul style="list-style-type: none"> <li>- <b>Responsibilities;</b> of senior management, managers and employees.</li> <li>- <b>Procedures;</b> in areas relating to:- <ul style="list-style-type: none"> <li>o <i>Document checks;</i> to be carried out by managers on a random sample of fleet drivers and mileage claimants identified by Veritau on a regular basis.</li> <li>o <i>Driver skills &amp; assessment;</i> including on-line driver assessment and in house specialist resource. To be used when job role or accident / claims experience suggests it would be beneficial.</li> <li>o <i>Driver health checks;</i></li> <li>o <i>Driver and management information;</i> via the driver handbook, intranet and the Driver Training Officer.</li> </ul> </li> </ul> <p>All are asked to consider the Policy, distribute via the Directorate Risk Management Groups and let BM have any comments by 7<sup>th</sup> October.</p>	<b>ALL</b>
6.v	<b>Food Safety</b>	
	<p>NP tendered his apologies for absence.</p> <p>NP's report was tabled and the following comment made.</p> <p>The Fire Safety training, on the use of fire extinguishers is listed as £600 per day. FS asked what people this would cover, NP to advise.</p>	<b>NP</b>
7.	<b>Other Risk Management Issues</b>	
7.i	<b>Planning for Risk Management Conference</b>	
	<p>FS advised that planning was progressing well and three sessions had now been agreed:-</p> <ul style="list-style-type: none"> <li>- One Council (Rob Polkinghorne)</li> <li>- Emerging Challenges, Risks and Opportunities (Keith Garrett of Marsh)</li> <li>- Work related coping skills (Diane Ingham-Cook, Effective Training &amp; Development Ltd)</li> </ul> <p>Those wishing to attend should contact their Directorate rep before the end of September.</p> <p>The risk management awards will be presented at the conference. Details and entry forms are on the Intranet news page. All are asked to consider any possible entrants and Directorate reps are asked to encourage entrants from their Directorates.</p> <p>Possible stands were also discussed.</p>	<b>ALL</b>
7.ii	<b>Risk Management Policy update</b>	
	The updated Policy has been drafted is with JSM for approval.	<b>JSM</b>
8.	<b>External Risk Management Training</b>	
8.i	<b>Alarm North East Seminar and Workshop 20th September 2011; Subject "New Horizons"; Location - Durham County Cricket Club</b>	
	Noted.	<b>ALL</b>

8.ii	<b>Alarm North East Seminar and Workshop 20th September 2011; Subject "New Horizons"; Location - Durham County Cricket Club</b>		
	Noted		<b>ALL</b>
8.iii	<b>Better Governance Forum programme for 2011</b>		
	Noted		<b>ALL</b>
9.	<b>Any Other Business</b>		
	FS advised that the Corporate risk register (attached) has recently been updated and would be circulated with the minutes of this meeting.		<b>ALL</b>
10.	<b>Future Meetings</b>		
	Thursday 3 <sup>rd</sup> November 2011 Wednesday 25 <sup>th</sup> January 2012 Thursday 22 <sup>nd</sup> March 2012 Wednesday 30 <sup>th</sup> May 2012 Wednesday 25 <sup>th</sup> July 2012 Wednesday 19 <sup>th</sup> September 2012	Date for Risk Management Conference 2.00pm Grand Meeting Room 2.00pm Grand Meeting Room 2.00pm Pink Room 2.00pm Pink Room 2.00pm Pink Room	<b>ALL</b>

## Corporate Risk Management Group

## Action Notes

Wednesday 25<sup>th</sup> January 2012, Grand Meeting Room - County Hall @ 2.00pm

**Present:** Fiona Sowerby Chris Clark

Directorate Representatives:

Josie O'Dowd Peter Bright Sukhdev Dosanjh  
Barrie Mason Jon Holden

Working Group Representatives:

Dominic Passman Simon Wright Nigel Ogley (for Mike McCauley)  
Phil Jones Penny Yeadon

**Apologies:** John Moore Roman Pronyszyn Mike McCauley

Item		Action By
1.	<b>Welcome and apologies</b>	
	See above	
2.	<b>Who's Who</b>	
	The document has been updated, any further changes should be notified to CC.	<b>ALL/CC</b>
3.	<b>Record of meeting held on 12<sup>th</sup> September 2011</b>	
	Agreed.  5.ii BM confirmed that the transfer of Scarborough Highways staff to Ringways is on track. He will confirm waggeroll details to FS so that the appropriate adjustment can be made to the Council's Employers' Liability policy.  6.ii DP advised that he has spoken to Anton Hodge regarding the Health and Safety Executive's plan to recover investigation costs. In cases where it is clear that a school is at fault the costs would be passed on to them.	<b>BM</b>
4.	<b>Matters arising</b>	
4.i	<b>Update of Radon monitoring</b>	
	PJ advised that a meeting is scheduled for 30 <sup>th</sup> January to develop a strategy and five year action plan for monitoring the 130+ properties that have been identified as at risk of high levels of radon. SD asked if any HAS buildings were known to have high levels, DP stated that as yet none were identified but that the strategy would have to encompass all buildings in all Directorates.  It was stressed that radon was an emotive issue but that it could be addressed by a programme of monitoring and appropriate remedial action.  PJ to continue to bring updates of progress on the matter to this Group.	<b>PJ</b>

4.ii	<b>Health and Safety satisfaction survey</b>	
	<p>DP informed the Group that 67 responses had been received to the survey and that overall the position was positive. Five areas that had received some minor negative response were:-</p> <ul style="list-style-type: none"> <li>- Health and safety training provision</li> <li>- Statistical information</li> <li>- Level of bureaucracy</li> <li>- Consultation on health and safety matters</li> <li>- Health &amp; Safety groups</li> </ul> <p>BES and FCS have already discussed the findings of the survey in their Directorate risk management groups, DP agreed to send the results electronically to Directorate reps so that others could do likewise.</p> <p>SD asked if he could see details of the KPI measurements of H&amp;S that BES currently makes. DP said this was possible but stressed the importance of each Directorate tailoring Health &amp; Safety to their specific needs.</p>	<p><b>DP / Dir Reps</b></p> <p><b>DP</b></p>
4.iii	<b>Threat / hazard procedures</b>	
	<p>SW advised that this matter was now with members of the Fire Safety and Security Group for comment. With regard to notification of an incident Andrew Whittaker, Head of ICT Architecture, has confirmed that once installed, Windows 7 will be compatible with the "Broadcast" flash messaging system which would allow a message to appear on the screens of all logged in users.</p> <p>Further updates on this matter will be included in the Fire Safety and Security Group report to this Group.</p>	<p><b>PJ</b></p>
4.iv	<b>Violent / hazard warning markers</b>	
	<p>SD advised that a meeting is to take place on the 26<sup>th</sup> January with Directorate information governance champions, customer service and audit to clarify final outstanding issues and formalise the procedure. Outstanding issues are:-</p> <ul style="list-style-type: none"> <li>- whether all hazards should be included or just those of a violent nature</li> <li>- the review procedure</li> <li>- ensuring that the "likelihood of contact" is considered in arrangements</li> </ul> <p>It is still intended to have the procedure up and running by 1<sup>st</sup> April 2012.</p>	
4.v	<b>Driving at Work Policy launch</b>	
	<p>BM updated the Group with the launch of the Policy and recent activities as per the action plan that was circulated prior to the meeting. A <a href="#">Driving at work</a> intranet page has been developed and BM is to see if a "news item" is needed to further advertise this. BM will ensure that this resource is raised in conjunction with motor claims record at Transport Board. FS suggested that Directorates could utilise the Driver Training Officer if they have any drivers with a poor "at fault" claims record.</p>	<p><b>BM BM</b></p>

5.	<b>Exception report from Directorate Reps on Action Plans and Risk Registers 2011/12</b>	
5.i	<b>Children and Young People's Service</b>	
	Deferred until the March meeting.	
5.ii	<b>Chief Executive's Group</b>	
	<p>JO'D took the Group through the report circulated with the agenda highlighting:-</p> <ul style="list-style-type: none"> <li>- The key risks on the recently updated risk register are still the One Council Change Programme; Communication; Savings Delivery; Transferring Services; and Ensuring Legality.</li> <li>- Section Risk Reviews; <ul style="list-style-type: none"> <li>o <b>Chief Executive's Office:</b> The new complaints, compliments and comments handling system has had some technical issues and is not yet ready for launch.</li> <li>o <b>Communications Unit:</b> "NYNow" the new email newsletter for residents which replaced the NY Times now has almost 4,000 subscribers.</li> <li>o <b>Emergency Planning:</b> Working with other agencies to provide assistance on Community Resilience.</li> <li>o <b>HR&amp;OD:</b> Supporting the provision of e-systems including e-payslips and e-learning.</li> <li>o <b>Libraries:</b> Working closely with local communities and groups hoping to run the eight category 3 libraries, which would otherwise close at the end of March, on detailed business plans.</li> <li>o <b>Policy, Performance and Partnerships:</b> Risks around the Equality Act, Olympics and Best Value Statutory Guidance 2011.</li> <li>o <b>Legal &amp; Democratic:</b> Work continues on major high risk legal cases and on the shadow Health &amp; Wellbeing board that needs to be in place by April 2012 in preparation for the Authority's new health role.</li> <li>o <b>One Council:</b> Workstreams are putting together detailed implementation plans and are currently looking at the risks involved</li> </ul> </li> </ul>	
5.iii	<b>Finance and Central Services</b>	
	<p>PB took the Group through the report and action plan circulated prior to the meeting including:-</p> <ul style="list-style-type: none"> <li>- Training provided includes the IOSH 4 day managing safely course as well as monthly workshops on topics such as DSE, manual handling and fire safety.</li> </ul>	

	<ul style="list-style-type: none"> <li>- the resilience issues around Voiceconnect. PB asked that each Directorate let him know an appropriate person to be trained as a “super user” on the system to support Wendy Parkin, the user would ideally be from a service that has a number of system users.</li> <li>- the Directorate Risk Register was recently updated. Key risks are Information Governance Breach; Pension Fund Solvency and One Council, in particular where restructures potentially take out “links in a chain”.</li> <li>- the Tactical Property Group continues to look at CCTV usage across the County.</li> </ul>	<b>Dir Reps</b>
<b>6.</b>	<b>Update report from Working Group Leaders - Review report and action plan</b>	
<b>6.i</b>	<b>Safer Recruitment and Employment</b>	
	<p>PY took the Group through the report circulated with the agenda including the six recommendations included in the Protection of Freedoms Bill which will impact on safer recruitment activities in NYCC, namely;</p> <ul style="list-style-type: none"> <li>- scaling back of eligibility criteria with the cancellation of “controlled activity”;</li> <li>- portability of CRB checks;</li> <li>- a system allowing employers to make checks online, for which a licence fee may be charged;</li> <li>- CRB certificates will only be provided to the applicant who will then have responsibility to disclose to potential employers, NYCC are lobbying councillors and MPs to have this aspect removed;</li> <li>- the imposition of penalties for unlawful checks and;</li> <li>- introduction of the basic disclosure checks, currently available in Scotland, to England and Wales.</li> </ul> <p>The Bill is currently going through Parliament and the Safer Recruitment Group will act and report upon developments going forward.</p>	
<b>6.ii</b>	<b>Safety Risk</b>	
	<p>DP took the Group through the key areas of the report circulated prior to the meeting covering:-</p> <ul style="list-style-type: none"> <li>- the continued emphasis on Health and Safety matters related to Construction. The area has a high risk profile given issues around ongoing Health &amp; Safety Executive monitoring; a fatal accident involving a contractor on a flat roof project; asbestos incidents; the transfer of Scarborough highways workforce and the HMC 2012 contract.</li> <li>- closer working arrangements between Client Officers, Jacobs UK, Corporate Property Management, Contractors and schools to improve matters in this area.</li> </ul>	



	<ul style="list-style-type: none"> <li>- the near completion of the PAS79s based on the technical fire audits</li> <li>- issues still to be addressed including traded services with Academies and assessing the impact of Lord Young's report and the review of H&amp;S legislation.</li> </ul>	
6.iii	<b>Challenging Behaviour / Restorative Practice Partnership</b>	
	<p>NO presented the report provided with the agenda including:-</p> <ul style="list-style-type: none"> <li>- the combining of the two groups from both ends of the continuum (restrictive &amp; restorative) of service delivery to increase effectiveness .</li> <li>- the benefit of training on the Mental Capacity Act in helping understanding of need and entitlement.</li> <li>- training has been provided on RPI for all Enhanced Mainstream Schools, Pupil Referral Units and special schools.</li> <li>- the challenges and opportunities arising from the staffing restructure within the service from March / April 2012. NO to provide details of staffing structure to this Group.</li> </ul>	<b>NO</b>
6.iv	<b>Service Continuity</b>	
	<p>SW took the Group through the report provided with the agenda including the success of the pilot, within some sections of BES, of the revised Service Continuity strategy. It is intended that the strategy now be rolled out in parts of other directorates too. JO'D advised that CEG would be a smaller Directorate in which to progress and JH said he would discuss the matter with Carolyn Bird. SW to discuss roll out in CEG with JO'D.</p> <p>SW advised that whilst the revised arrangements were simpler and more flexible there was still a requirement for a business impact assessment.</p>	<b>JH SW</b>
6.v	<b>Information Governance</b>	
	Deferred until the March meeting.	
7.	<b>Other Risk Management Issues</b>	
7.i	<b>Driving of County Council vehicles – motor insurance cover</b>	
	<p>FS informed the Group of an incident (attached) which had highlighted the need to review what information and advice was given to drivers of NYCC vehicles on usage. BM advised that Richard Owens had confirmed that the Driver Information Pack contained advice on matters such as breakdowns and accidents but <b>not</b> acceptable usage. Following this incident Richard had put together some details of "Dos and Don'ts" and BM asked whether it would be best for this Group or Transport Board to take the matter forward. It was agreed that BM would ask David Bowe and the Transport Board to progress the matter but with input from PB regarding Building Cleaning Services drivers.</p>	<b>BM PB</b>

7.ii	<b>Feedback from Risk Management Conference XIII</b>		
	FS summarised the feedback report that was provided with the agenda. The conference had been well received and it was planned to hold another event this year. All are asked to consider any subjects that they would like to see covered. PJ asked whether alternative venues could be considered including "community" locations. FS advised that other suggested venues would certainly be looked at but they would have to meet the criteria around aspects such as parking and catering that the current venue did.		<b>ALL</b>
7.ii	<b>CIPFA Risk Governance Self Assessment</b>		
	FS asked that members of the group consider the self assessment that was circulated prior to the meeting and feedback to her with any comments.		<b>ALL</b>
8.	<b>External Risk Management Training</b>		
8.i	<b>Alarm North East and Yorkshire Seminar 23<sup>rd</sup> March 2012; Subject tba; Location – Carriageworks, Leeds</b>		
	Noted.		<b>ALL</b>
8.ii	<b>Better Governance Forum programme for 2012</b>		
	Noted		<b>ALL</b>
9.	<b>Any other business</b>		
	None.		
10.	<b>Future Meetings</b>		
	Tuesday 22 <sup>nd</sup> March 2012 Wednesday 30 <sup>th</sup> May 2012 Wednesday 25 <sup>th</sup> July 2012 Wednesday 19 <sup>th</sup> September 2012	2.00pm Grand Meeting Room 2.00pm Pink Room 2.00pm Pink Room 2.00pm Pink Room	<b>ALL</b>

## Reviewing your risk governance arrangements

The following questions are designed to challenge the effectiveness of current risk governance arrangements.

Ref	Question	Comment
<b>Leadership</b>		
1	How do the Board / Leadership Team demonstrate leadership in risk management?	Champion for risk management (Corp Dir FCS) nominated by Management Board; Participation in risk register production, review and maintenance at all levels of the County Council, including major projects; Support for annual risk management conference.
2	Has a lead member or member of the Board been identified for risk management?	Yes. Executive portfolio holder for Finance and Central Services; Management Board member Corporate Director Finance and Central Services.
3	Has a senior officer responsible for risk management been identified and is their role clearly defined?	Yes. Corporate Director Finance and Central Services, role clearly defined in s151 officer definition and the Risk Management Policy and Strategy. Corporate Risk and Insurance Manager, role clearly defined in the job description and the Risk Management Policy and Strategy.
4	Does the senior officer responsible for risk management report directly to the Board on risk management matters?	Yes, the Corporate Director Finance and Central Services.
5	Are risk governance arrangements set out and clearly understood?	Yes, the arrangements are set out in the Risk Management Policy and Strategy and approved by the County Council, reviewed by the Audit Committee and agreed and disseminated by the Corporate Risk Management Group (including Directorate reps).

Self-assessment review

Risk Management Guidance Note 13 – Risk Governance, 2011

CIPFA Better Governance Forum

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<b>Risk governance structures</b>		
6	Has a Risk Committee or Corporate Risk Group been established?	Yes, the Corporate Risk Management Group has been established since the 1990s and is made up of Directorate reps, working group reps (eg. service continuity) and risk specialists (eg risk management officer). The Group meets 5 times a year.
7	Is the role of the Risk Committee / Corporate Group to advise and support those responsible for risk mitigation or does it have any executive responsibilities to determine risk mitigation?	The Group acts as a forum for all nominated with risk management responsibilities to report, seek advice and provide information including risk mitigation; The Group also plays a role in the allocation of resources via the risk management budget.
8	What body is charged with challenging and scrutinising risk management arrangements? Do non-executives (where applicable) undertake a challenge role?	Corporate and Partnerships Overview and Scrutiny Committee, includes non executive members.
9	What body is charged with reviewing the effectiveness of risk mitigation strategies / actions?	Audit Committee.
10	Is the role of the audit committee in relation to risk management clear?	Yes, this is set out in the Corporate Risk Management Policy and Strategy and also reflected in the Terms of Reference of the Audit Committee.
11	Do risk governance arrangements also cover the organisation's partnerships effectively?	Yes from a "risk to North Yorkshire County Council" perspective. The Partnership Governance template also requires any partnership that involves material risk (eg the use of NYCC resources) to establish a Risk Register etc.  The governance of NYCC owned companies has also been reviewed. All now have NYCC Members and/or officers on their respective Boards with regular reporting back to relevant Corporate Directors.

<b>Establishing risk management at the strategic level</b>		
12	Has strategic risk management been clearly integrated with the organisation's objectives and performance framework?	Yes via the risk prioritisation process and links to corporate, directorate and service plans and objectives.
13	Has the Board / Leadership Team determined the level of risk it is prepared to accept? Sometimes called its risk appetite.	As part of the risk prioritisation process, a risk classification table is developed. This shows the different thresholds of probability and impact that can be tolerated at corporate level. This effectively is the "statement of risk appetite" and is applied consistently via the Risk Register process, across the County Council.
14	Has the risk appetite been communicated effectively and does it influence the management of risk throughout the organisation?	Each level (corporate, directorate and service) of the County Council determines its risk appetite via the risk classification table. It therefore influences the management of risk when ranking risks at all levels throughout the organisation.
15	Does the audit committee have an up to date understanding of the strategic risks facing the organisation?	Yes, the corporate risk register is presented to the Audit Committee twice a year following development and review by Management Board. Directorate Risk Registers are also reported to the Audit Committee alongside details of Internal Audits undertaken and the Annual Statements of Assurance signed by individual Corporate Directors.
16	What are the arrangements for embedding good risk management practice?	Various groups including the Corporate Risk Management Group, Directorate Risk Management Groups, Working Groups such as Challenging Behaviour. Various risk management reporting arrangements such as Directors reporting to Audit Committee and Working Groups reporting to the Corporate Risk Management Group on a rolling programme. Development and maintenance of risk registers at all levels and including major projects. Annual risk management conference attended by a cross section of employees plus risk management awards for good risk management practice.

Self-assessment review

Risk Management Guidance Note 13 – Risk Governance, 2011

CIPFA Better Governance Forum

<b>Accountability and transparency</b>		
17	How often is the effectiveness of risk management arrangements reviewed?	The Risk Management Policy and Strategy is reviewed every two years; Progress reports are presented to the Audit Committee twice a year; Employers Liability and Public Liability Claims and Incidents Overview is reported to the Corporate and Partnerships Overview and Scrutiny Committee once a year.
18	Who is accountable for the effectiveness of risk management arrangements?	Corporate Director Finance and Central Services supported by the Corporate Insurance and Risk Manager.
19	Is accountability for effective risk management embedded within the performance framework of the organisation?	Yes, in performance targets for the Insurance & Risk Management section, Central Finance Service Unit and Finance and Central Services Directorate.
20	How does the organisation account to those charged with governance for the effectiveness of risk management arrangements?	Progress reports to the Audit Committee; Annual Governance Statement supported by Statements of Assurance signed by each Corporate Director.
21	Does the organisation communicate and share its strategic risks with its major partners and stakeholders?	The corporate risk register is publicly available on the internet as part of the progress report to the Audit Committee. Corporate Directors will 'share' their relevant risks when in discussion etc with partners so that priorities/actions can be mutually agreed.
22	Is the organisation transparent to the public about its major strategic risks?	The corporate risk register is publicly available on the internet . The Annual Governance Statement is publicly available on the internet.
23	Are risk assessments supporting major decisions made publically available?	Yes. All major reports contain a risk assessment (for example, a risk section was included as part of the decision making reports to County Council for the Library Transformation).