

## Communities Directorate Risk Register 2014/15

The following risks form the Communities Directorate Risk Register. These will now be added to Covalent along with associated action plans, where appropriate.

Risk actions will be allocated to officers and will be reported on a quarterly basis to the Communities Senior Management Team.

| Code (cov) | Risk Short Name   | Overall Risk Score | Risk Appetite Score | Action Plan |
|------------|---|--------------------|---------------------|-------------|
|            | Potential impact of changes to ER/VR scheme                       | 16                 | 12                  | Y           |
|            | Reduction in level of planned maintenance to property estate      | 16                 | 6                   | Y           |
|            | Customer/Community dissatisfaction to service redesign            | 12                 | 9                   | Y           |
|            | Poor communication within directorate                             | 9                  | 9                   | Y           |
|            | Unable to achieve Scottish Housing Quality Standard (SHQ) by 2015 | 9                  | 9                   | Y           |
|            | Carbon reduction and energy targets not met                       | 9                  | 9                   | Y           |
|            | Outsourcing of services resulting in loss of work/fees            | 9                  | 8                   | Y           |
|            | Counter Fraud - Audit Report 11/04                                | 6                  | 6                   | Y           |

**Section A – Identified Risk**

**Risk Description** Potential impact of changes to ER/VR scheme

Ability to achieve identified staff savings as a result of changes made to the ER/VR scheme from 1 July 2014.

**Actions/Controls already in place**

- Age profiling across directorate
- Annual Workforce Planning Reviews
- Discussion at one-to-ones/annual appraisals
- Directorate will require to continue with the moratorium on permanent posts to ensure flexibility if redesign identifies staff for redeployment – who may previously have indicated an interest to be considered for ER/VR

**Likelihood**

**Potential Impact**

- Staff will no longer be as willing to be considered for ER/VR due to changes
- Directorate will have to consider the potential of staff becoming supernumerary with results of downgrading, redeployment or compulsory redundancy

- Not achieving required savings
- Not able to implement succession planning as opportunities blocked
- Disenchantment of staff
- Staff may choose to uptake flexible retirement as an alternative to ER/VR resulting in prevention of forward planning

**Likelihood Score: 4**  
**Potential Impact Score: 4**  
**Overall Risk Score: 16**

**Section B – Risk Action Plan**

**Actions/Controls to reduce Likelihood/Potential Impact**

| Action  | Responsibility | Target Date      | Success Criteria  | Comment  |
|---|----------------|------------------|---|--|
| Corporate review of People Strategy may assist long term workforce planning | Head of HR     | Tbc              | Clear route for staff/management identified   |  |
| Consider as part of budget setting process                                  | All Managers   | 30 November 2014 | Where staff savings have been identified, Service Leads will know if redeployment/redundancy require to be considered | Cost of redundancy can be excessive and may hinder achievement of the saving element |
| As part of service redesigns, compulsory redundancy/redeployment necessary  | CSMT           | 31 March 2015    | Required to meet the redesign targets as volunteers not forthcoming   | Forced action  |
| Ensure ongoing communication with staff throughout redesign process         | ECSMT          | 31 March 2015    | Staff are aware of all options as redesigns progressed  |  |

**Section A – Identified Risk**

**Risk Description**            Reduction in level of planned maintenance to property estate

Insufficient resources in the corporate property maintenance fund to deliver client demands for both planned and reactive maintenance of the non-housing estate.

**Actions/Controls already in place**

- Three year budgeting enables forward planning, identifying reduction in resources available
- Asset plans for each building updated through periodic inspections
- Business Continuity Plans (to be finalised)
- Property Asset rationalisation
- Development of agile/mobile working

**Likelihood**

**Potential Impact**

- Reduced budgets with identified defects and essential maintenance already underfunded;
- Unplanned/reactive works increasing (County Buildings electrical problems; Medway hut) as planned maintenance programmes reduces
- Age and condition of council property assets relatively old/poor
- “Temporary” accommodation long past design life (Medway huts; Extensions at Ravenswood/County Buildings etc)

- Closure of building with impact on service delivery (school/offices)
- Media interest
- Reputation
- In extreme potential injury or death of public/service user/staff (Edinburgh School wall collapse) potential Corporate Manslaughter
- Potential civil claims

**Likelihood Score:            4**

**Potential Impact Score:    4**

**Overall Risk Score:           16**

**Section B – Risk Action Plan**

**Actions/Controls to reduce Likelihood/Potential Impact**

| Action   | Responsibility                                | Target Date                           | Success Criteria   | Comment   |
|--|---|---------------------------------------|--|---|
| Complete work on Business Continuity Plans for loss of major property (School; County Buildings etc)   | Ken Brown                                     | March 2015                            | BCP plans in place   | Carry over revenue budget allocation from 2013/14 |
| Continue asset rationalisation/ new build programme  | Ian Cochrane/Transforming Angus/School estate | March 2018(end of 3 year risk window) | Rationalisation of assets with overall improvement in property portfolio, reducing risk of unplanned event |   |
| Mobile/Agile working project   | Transforming Angus                            | March 2018(end of 3 year risk window) | Reduced dependency on physical buildings   |   |
| Establish priority based budgets – ensure budget sufficiency for planned maintenance as established by asset plans and contingencies for unplanned maintenance | Ian Cochrane                                  | Feb 2015 (budget process)             | Sufficient planned maintenance funding   |   |
| Ensure Developed School Management budgets are appropriately focussed and prioritised  | People Directorate                            | On going                              | Maximising expenditure on property maintenance   |   |

**Section A – Identified Risk**

**Risk Description** Customer/Community dissatisfaction to service redesign

Service re-designs may reduce service provision leading to customer and community dissatisfaction.

**Actions/Controls already in place**

- Sound workforce planning
- Well established financial management and budget monitoring
- Clear plans in place identifying service direction

**Likelihood**

**Potential Impact**

- Customers having unrealistic expectation of what can be delivered within timescales
- Workforce not working with management to ensure proposed changes to services are deliverable
- Insufficient resources available to undertake the reviews required to identify clear areas for redesign

- Increased customer Complaints through ACCESSLine/Media/Elected Members
- Negative publicity for the directorate/council
- Decrease in standard of service delivery
- Increased workload to deal with changes to services and customer complaints

**Likelihood Score: 3**

**Potential Impact Score: 4**

**Overall Risk Score: 12**

**Section B – Risk Action Plan****Actions/Controls to reduce Likelihood/Potential Impact**

| <b>Action</b>   | <b>Responsibility</b> | <b>Target Date</b> | <b>Success Criteria</b>  | <b>Comment</b> |
|---|-----------------------|--------------------|--|----------------|
| Weekly SMT meetings                                     | CSMT                  | 31 March 2015      | A reduction in complaints arising from service redesign  |                |
| Budget planning and monitoring arrangements             | CSMT                  | 31 March 2015      | Clarity of savings proposals and arrangements for service redesign   |                |
| Clear reporting arrangements to the communications team | CSMT                  | 31 March 2015      | Communications team are aware of possible issues arising and can field any media enquiry's                                     |                |
| Clear statement of service standards                    | CSMT                  | 31 March 2015      | All service will follow a corporate model demonstrating clear service standards that will be monitored and reported publically |                |

Section A – Identified Risk

**Risk Description** Poor communication within directorate

Poor communications within Directorate.

**Actions/Controls already in place**

- Calendar of meetings set throughout year for EMT, CMT, CSMT, ECSMT and CMF (Communities Managers Forum)
- Appraisal process/cascade brief embeded within the Directorate
- lIP Assessment (already identified clear/achievable improvement areas)

**Likelihood**

**Potential Impact**

|   |   |
|---|---|
| <ul style="list-style-type: none"> <li>• Vision of Directorate not being clear throughout the workforce</li> <li>• Directorate structure not being clear</li> <li>• Planning process not being understood</li> <li>• Managers not using tools available to cascade information</li> <li>• Appraisals/Cascade Brief not happening</li> </ul> | <ul style="list-style-type: none"> <li>• Staff moral low resulting in not feeling valued</li> <li>• Service not being translated to the customer effectively</li> <li>• Erroneous information in domain</li> <li>• Non achievement of lIP</li> <li>• Higher turnover</li> </ul> |
|---|---|

**Likelihood Score:** 3

**Potential Impact Score:** 3

**Overall Risk Score:** 9



**Section B – Risk Action Plan**

**Actions/Controls to reduce Likelihood/Potential Impact**

| <b>Action</b>   | <b>Responsibility</b>                | <b>Target Date</b> | <b>Success Criteria</b>  | <b>Comment</b>  |
|---|--------------------------------------|--------------------|--|---|
| Develop a communication strategy within the directorate   | CSMT                                 | 31 December 2014   | Improvement cascade within the Directorate                           |   |
| Maximise the use of SharePoint as an information source throughout directorate.   | Business Improvement Team            | 30 September 2014  | Assist employees with information being in one format and location   | Corporate, Directorate and divisional minutes of meetings and other key documents |
| Review membership of internal groups to ensure essential people involved  | Business Improvement Team            | 31 March 2015      | Staff empowerment  | Staff to be encouraged to participate   |
| Revamp and implement communities wide Training/liP Group  | Business Improvement Team            | 31 December 2014   | Consistency throughout Directorate                                   |   |
| Produce and implement an liP Improvement Plan   | Business Improvement Team            | 31 December 2014   | Consistency throughout Directorate                                   |   |
| Strategic Director to do staff bulletins 3 to 4 times per year  | Strategic Director                   | 30 Sept 2014       | Ongoing dialogue   | Business Improvement Team will distribute via SharePoint                          |
| Identify avenues to ensure clear communication with staff who do not have access to intranet                                    | Business/ Corporate Improvement Team | 31 March 2015      | Workarounds will require to be identified for varying business units | Bespoke solutions required  |
| Await introduction of staff recognition scheme, allowing directorate to have formal mechanism to acknowledge staff achievements | Corporate Improvement Team           | 31 December 2014   | Consistency across Directorate/ Council                              |   |
| Encourage use of Bright Ideas allowing staff the opportunity to put forward suggestions   | All Managers                         | 30 Sept. 2014      | Use of corporate resource requires to be utilised                    | Feedback will help shape service delivery/redesign                                |

**Section A – Identified Risk**

**Risk Description** Unable to achieve Scottish Housing Quality Standard (SHQ) by 2015

Unable to achieve Scottish Housing Quality Standard (SHQ) by 31 March 2015.

**Actions/Controls already in place**

- Existing programme of works for both office and housing stock, particular:
  - Gas heating installation programme are progressing, with completion targets of 31/3/2015
  - Design and tendering work is progressing to improve stock in off-gas grid areas, again with a completion target of 31/3/15

**Likelihood**

**Potential Impact**

- Failure of Housing stock reaching SHQS compliance by 31/3/2015

- Reputational impact on Council

**Likelihood Score:** 3

**Potential Impact Score:** 3

**Overall Risk Score:** 9

**Section B – Risk Action Plan****Actions/Controls to reduce Likelihood/Potential Impact**

| <b>Action</b>  | <b>Responsibility</b> | <b>Target Date</b> | <b>Success Criteria</b>  | <b>Comment</b>  |
|--|-----------------------|--------------------|--|---|
| Monitor and manage gas heating and off gas grid programmes to ensure completion of works by 31/3/2015  | K Brown               | March 2015         | Completion of all works by 31/3/2015.                          | Ongoing through regular Project Progress meetings with Housing      |
| Ensure EPCs are provided for properties affected by energy efficiency works  | K Brown               | March 2015         | EPCs are provided for all affected properties before 31/3/2015 | Project handover procedure includes a requirement for EPC provision |
| Ensure Northgate property elements are kept updated with current SHQS performance. Data acquired from project completion certificates and stock survey results | G Balfour             | March 2015         | Property elements are up to date by 31/5/2015                  | Data cleansing and updating exercise is progressing in Housing      |
| Any exemptions to the Scottish Housing Quality Standard are suitably evidenced   | G Balfour             | March 2015         | Exemption evidence is complete by 31/5/2015                    | Evidence collecting exercise is ongoing in Housing                  |

**Section A – Identified Risk**

**Risk Description** Carbon reduction and energy targets not met

Arrangements not sufficiently well development to meet legislative obligations for carbon reductions and EU directives on energy performance of buildings.

**Actions/Controls already in place**

- Carbon emissions for the CRC footprint being established:-
  - Carbon emissions for Council non-housing properties to be established
- Energy management strategy:-
  - Delivering reductions but counterbalanced by increasing use of ICT and similar equipment
- Good housekeeping practices to be established, maintained and supported.
- Existing asset data and knowledge of energy performance of current property assets (EPCs; asset plans)
- Asset rationalisation takes into account energy use and looks to remove inefficient buildings

**Likelihood**

**Potential Impact**

- Inability to fulfil the CO<sub>2</sub> reduction strategy

- Series of CO<sub>2</sub> reduction targets not met
- Fulfilment of carbon reduction commitment in jeopardy
- Major increase in the cost of carbon allowances by 2020 if emissions are not significantly mitigated

**Likelihood Score: 3**

**Potential Impact Score: 3**

**Overall Risk Score: 9**

## Section B – Risk Action Plan

## Actions/Controls to reduce Likelihood/Potential Impact

| Action   | Responsibility | Target Date      | Success Criteria   | Comment   |
|--|----------------|------------------|--|---|
| Continue to develop management arrangements at corporate and local level supported by EMU to fulfil the CRC obligation                   | Ian Cochrane   | 31 March 2015    | Robust management arrangements at corporate and local level established                | Lead Officer – Ian Lingard<br><br>Carbon Management Action Plan report submitted to April 2013 Strategic Policy Committee.<br><br>Carbon reduction action plan submitted to June 2013 Corporate Services committee  |
| Maintain accreditation to the new Carbon Trust standard in preparation for the CRC scheme implementation                                 | Ian Cochrane   | 30 December 2014 | Re-accreditation achieved  | Lead Officer – Ian Lingard  |
| Update and co-ordinate actions with local authority carbon management programme and Climate Change strategy.                             | Ian Cochrane   | 30 December 2014 | Cohesive strategic programme operational   | Lead Officer – Ian Lingard<br><br>See Risk 23 Action 1  |
| Ensure StS and works projects make major contributions to the EM strategy  | Ken Brown      | 31 March 2015    | End of Year environmental performance report demonstrates good progress                | Lead Officer – Ian Lingard<br><br><u>Ongoing.</u> StS and ItS programmes to be developed and submitted for approval at Committee.   |
| Ensure EPCs are provided for properties affected by energy efficiency works  | K Brown        | 31 March 2015    | EPCs are provided for all affected properties before 31/3/2015                         | Project handover procedure includes a requirement for EPC provision   |
| Monitor changes in EU and national legislation associated with energy performance of buildings and adjust strategy and resources to suit | K Brown        | 31 March 2015    | Changes to legislative obligations accommodated within adjusted strategy and resources | Lead Officer – Ian Lingard<br><br>It is understood that the Scottish Government is intending modifying existing legislation to integrate EPOB duties and proposed EU amendments into a much more demanding regime which will require active investment in all |

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  | council buildings to improve their performance. This cannot be contained within existing resources |
|--|--|--|--|--|

**Section A – Identified Risk**

**Risk Description** Outsourcing of services resulting in loss of work/fees

The council through the outsourcing of services does not fully consider the impact in loss of staff experience and income. Expectations of Elected Member are not met and agreed budget decisions are not fully realised.

**Actions/Controls already in place**

- Services have been leased or transferred to third parties to deliver services on behalf of the council with specifications and service level agreements already developed.
- There are areas already identified through the budget setting process.
- Transforming Angus (TA) is looking at major projects – longer term, larger potential savings. (e.g. Leisure and Cultural Trust)
- Role of Corporate Management Team and Policy & Budget Strategy Group (PBSG) in developing priority based budgeting.
- Developing plans to further improve stakeholder engagement in the establishment of Council priorities and the associated budget setting process.

**Likelihood**

**Potential Impact**

- The Transforming Angus programme is being looked to as the main driver for change in terms of savings, efficiencies, channel shift and reshaping of services. This only covers major projects.
- Alternative methods of delivery impact severely on workloads, budgets and staffing levels within other council services
- Lack of clear unit costing can prevent divisions future planning for budgets, service delivery and staffing levels
- Members will be required to debate and agree non-priority services within the context of SOA, statutory requirements and the council plan

- Spend is not allied to priority or objectives.
- Budget issues arise which require to be resolved on a fire fighting basis.
- Revert to salami slicing of budgets.
- Savings and efficiencies are not realised.
- Adverse media publicity.
- Service user dissatisfaction – we do not successfully understand the voice of the customer.
- Significant strategic withdrawal decisions would be required from members as a consequences of a move to priory budgeting

**Likelihood Score: 3**

**Potential Impact Score: 3**

**Overall Risk Score: 9**

**Section B – Risk Action Plan****Action/controls to reduce Likelihood/Potential Impact**

| <b>Action</b>  | <b>Responsibility</b>   | <b>Target Date</b> | <b>Success Criteria</b>   | <b>Comment</b>   |
|--|---|--------------------|---|--|
| Ensure financial resources are directed to delivering key outcomes and provide clarity on work/services which are to be ceased or deferred to allow this to happen in practice                                 | Heads of Service  | 31 March 2015      | The Council avoids all the undesired impacts listed above   | If the gap between the required and actual resources is too great, even to deliver only key outcomes then this action will be insufficient |
| Communities will put in place a monitoring regime for agreed budget savings which will be reported to the Policy and Budget Strategy Group   | ECMT for their areas  | 31 December 2014   | Communities savings monitoring reports submitted to the Policy & Budget Strategy Group                          | Head of Corporate Improvement & Finance will collate updates for PBSG from information provided by CMT                                     |
| Complete the work being undertaken for the Angus Community Planning Partnership on resource mapping to outcomes as part of development of priority based budgeting   | Head of Corporate Improvement & Finance/ Head of Planning and Place | 31 March 2015      | High level understanding of how our budgets align to outcomes available to inform future budget decision making |  |
| Undertake community engagement to establish their priorities and use this to inform budget decisions   | Head of Corporate Improvement & Finance/ Head of Planning and Place | 31 December 2014   | Linking to Corporate Risk Register and corporate plans  |  |
| Identify the services which are considered non-statutory, non-priority or low priority and develop a strategy to reduce financial commitment to these services considering SOA, statutory and corporate needs. | ECMT  | 31 August 2015     | Demand led services   |  |



**IDENTIFIED RISKS/RISK ACTION PLAN:**

**Risk Owner  
Risk Appetite**

**Communities SMT  
6**

**Section A – Identified Risk**

**Risk Description** Counter Fraud - Audit Report 11/04

The risk of fraud and corruption should be considered as part of each department's risk register. Per Audit Report 11/04.

**Actions/Controls already in place**

- Robust adherence to Financial Regulations
- Corporate Governance Questionnaire and Assurance Statement completed rigorously/timeously
- Staff aware of all policies relating to fraud
- Past breaches have resulted in changes to working practices

**Likelihood**

**Potential Impact**

- Low – rigorous controls embedded across directorate

- Failure to achieve adherence to regulations
- Loss of reputation to council
- Instigation of disciplinary procedures against staff
- Loss of income to council

**Likelihood Score: 2**

**Potential Impact Score: 3**

**Overall Risk Score: 6**

**Section B – Risk Action Plan****Actions/Controls to reduce Likelihood/Potential Impact**

| <b>Action</b>  | <b>Responsibility</b>           | <b>Target Date</b> | <b>Success Criteria</b>  | <b>Comment</b>   |
|--|---------------------------------|--------------------|--|--|
| Timetable of prompts to distribute instructions to staff have been set in place and will utilise Communities SharePoint site.  | Business Improvement Team       | 31 December 2014   | When carried out this will ensure dissemination of information to relevant/all staff | This action prompt will be monitored and can be expanded on for other criteria as appropriate. |
| Confirmation that Directorate has adhered to fraud guidelines as part of the Corporate Governance Questionnaire and Assurance Statement (Internal Financial Control) | Strategic Director              | 31 March 2015      | This is dealt with as part of the annual corporate governance process                | Although signed off on an annual basis this is monitored throughout the financial year         |
| Ensure managers are carrying out induction of staff covering Financial Regulations and the Anti Fraud and Corruption Strategy  | Business Improvement Team       | 31 March 2015      | No apparent breaches   | Business Improvement Team carry out spot checks  |
| Compliance to corporate induction element covering Financial Regulations   | All Managers within Communities | 31 March 2014      | All relevant induction processes completed   | Includes e-learning modules  |