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9 July 2019

AUDIT SCRUTINY COMMITTEE

A meeting of the Audit Scrutiny Committee will be held on Wednesday, 17th July, 2019 in the Council Chamber, Forde House, Brunel Road, Newton Abbot, TQ12 4XX at 10.30 am

PHIL SHEARS Managing Director

Membership:

Councillors Morgan (Chairman), Rollason (Deputy Chair), H Cox, Colclough, Mullone, J Petherick, Purser and Thorne

Please Note: Filming is permitted during Committee meeting with the exception where there are confidential or exempt items, which may need to be considered in the absence of the press and public. By entering the Council Chamber you are consenting to being filmed.

AGENDA

Part I

- 1. Apologies for Absence
- 2. Minutes of the previous meeting

(Pages 1 - 4)

- 3. Declarations of Interest.
- 4. Matters of urgency/matters or report especially brought forward with the permission of the Chairman.
- 5. Public Questions (if any)
- 6. Members Questions (if any)

7.	Statement of Accounts 2018/19	(Pages 5 - 10)
8.	Corporate and Strategic Risk report	(Pages 11 - 56)
9.	Internal Audit Plan 2019-2020	(Pages 57 - 70)
10.	Teign Estuary and Coastal Partnership update	(Pages 71 - 72)

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AUDIT SCRUTINY COMMITTEE

20 JUNE 2019

Present:

Councillors Morgan (Chairman), Rollason (Deputy Chair), H Cox, Colclough, Mullone, J Petherick, Purser and Thorne

In Attendance:
Julie Masci Grant Thornton

Officers in Attendance:
Martin Flitcroft, Chief Finance Officer
Sue Heath, Audit Manager
Sarah Selway, Democratic Services Team Leader & Deputy Monitoring Officer

10. MINUTES OF THE PREVIOUS MEETING

The minutes of the Audit Scrutiny Committee meeting held on 21 March 2019 were confirmed as a correct record and signed by the Chairman.

11. DECLARATIONS OF INTEREST.

None.

12. AUDIT PROGRESS REPORT - GRANT THORNTON

Julie Masci, Engagement Lead, Grant Thornton presented the progress update report, highlighting the Financial Statement Audit, the Value for Money work and the audit work cycle for the coming year. The local government sector faced a significant risk in the area of arrangements for financial resilience and a report would be brought back to the July 2019 meeting on the findings of Grant Thornton's work with the Council in this area.

The Engagement Lead clarified that the Council currently had received no audit qualifications.

RESOLVED that the progress report be noted.

13. AUDIT FEE LETTER 2019-2020 - GRANT THORNTON

Julie Masci, Engagement Lead Grant Thornton presented the audit fee letter 2019-2020. Members were advised that the scale of fees were set by the Public Sector Audit Appointments Ltd (PSAA), the fee was £37,240. This fee would remain the same for the five years of the contract.

RESOLVED the Audit Fee Letter be noted.

14. INTERNAL AUDIT ANNUAL REPORT 2018-2019

The Committee considered the Audit Manager's annual opinion on the adequacy and effectiveness of the Council's control environment for the year ending 31 March 2019.

This enabled the Internal Audit Manager to confirm she was satisfied that sufficient internal audit work had been undertaken and confirmed that the Council had adequate and effective arrangements in place.

The Audit Manager responded as follows to Members' queries:-

- The two areas of work that were classified as fair were being addressed and a further update on the Teign Estuary and Coastal Partnership would be brought back to the next meeting of this Committee;
- The Payroll and Human Resources audit had been delayed as a new IT system was being rolled out across these areas; and
- Every five years an external validation of internal audit's self-assessment against the audit standards was required; this was awaiting validation.

RESOLVED the report be noted and it be considered as a source of assurance to support the Council's Annual Governance Statement.

15. GOVERNANCE REVIEW AND ANNUAL GOVERNANCE STATEMENT

The Audit Manager presented the Annual Governance Statement (AGS) for 2018-2019, which had been completed following a review of the effectiveness of the Council's control systems and governance arrangements. This was a statutory requirement and the governance principles had been assessed using the CIPFA/SOLACE framework. The report set out the guiding principles behind the statement.

In response to a Member's question, the Audit Manager clarified the Council's Whistleblowing procedure for staff.

Members were advised of the identified issues and the planned action.

RECOMMENDED that Council approve the Annual Governance Statement 2018-2019.

16. DRAFT FINAL ACCOUNTS 2018-2019 AND TREASURY MANAGEMENT REPORT

The Committee considered the 2018/19 draft final accounts and treasury management results which would be reported to the Full Council on 29 July 2019.

Responding to a Member's query, the Chief Finance Officer explained the Local Government accounting process with regards to depreciation and use of reserves and reporting apparent surpluses and deficits, currently the Council did not have any borrowing on its balance sheet and that the Council was entitled to an element of any right to buy receipts that Teign Housing received under the transfer of the housing stock agreement.

RESOLVED to note that:-

- (a) the draft statement of accounts for 2018/19 had been published;
- (b) the current authorised lending list at Appendix 1 of the circulated report; and
- (c) the draft treasury management results for 2018/19 at Appendix 2 of the circulated report.

17. FINANCIAL INSTRUCTIONS WAIVERS

The Audit Manager presented the report setting out the number of times the Financial Instructions and Contract Procedure Rules had been waived and the reasons. The details of the waivers that had been processed since the March 2019 meeting were set out in the monitoring report and the Audit Manager explained the background to these.

RESOLVED the report be noted

Chairman



AUDIT SCRUTINY COMMITTEE

CHAIRMAN: Clir Sally Morgan EXECUTIVE PORTFOLIO HOLDER: Clir Alan Connett

DATE: 17 July 2019

REPORT OF: Chief Finance Officer

SUBJECT: STATEMENT OF ACCOUNTS 2018/19

PART I

RECOMMENDATION

That the Audit Scrutiny Committee recommend the statement of accounts 2018/19 for approval to Council subject to any final adjustments agreed with the external auditors which will be reported to Council when the audit is completed.

1. PURPOSE

To bring an update on the statement of accounts 2018/19 for Members to review and recommend to Council for approval.

2. BACKGROUND

- 2.1 The Accounts and Audit Regulations 2015 set out the requirements for the production and publication of the annual statement of accounts. A committee of the authority or the full Council must approve the statement for 2018/19 by the 31 July.
- 2.2 At the Audit Scrutiny meeting on 20 June the committee was introduced to the draft accounts and the results for the year 2018/19 including those for treasury management. The draft accounts were published on the 30 May.
- 2.3 Our external auditors (Grant Thornton) were due to complete their audit and provide their signed opinion by the end of July. This will no longer be completed by the end of July and arrangements are being made for the delayed audit to hopefully take place in August with approval in September. Any final adjustments will be reported to Council following conclusion of the audit. Any likely adjustments will be discussed at today's meeting and the next audit scrutiny meeting when Grant Thornton submit their findings.
- 2.4 The conclusion of the audit will be published by advertisement on the Teignbridge website as required by legislation. After approval the final accounts will be available on the website or a hard copy can be obtained. Members can access the accounts via this link: <u>Teignbridge website</u> and a hard copy is available in the Democratic Services department.

- 2.5 The Chartered Institute of Public Finance and Accountancy (CIPFA) Toolkit for Local Authority Audit Committees published in 2006 recommends the following focus in relation to the committee's review of the financial statements:
 - the suitability of accounting policies and treatments
 - any changes in, and compliance with, accounting policies and treatments
 - major judgemental arrears such as provisions
 - significant adjustments and material weaknesses in internal control reported by the external auditor

This report will concentrate on those areas.

3. STATEMENT OF ACCOUNTS 2018/19

- 3.1 The audit of the statement of accounts is currently being delayed due to resourcing issues identified by Grant Thornton our external auditors. Some minor work has been carried out and there are no known major adjustments to date. Grant Thornton will discuss any findings separately in their report when the audit is completed. There are no adjustments required to the Strata figures consolidated into the accounts of the Council.
- 3.2 The draft balance sheet shows a net worth of £13.9 million at 31 March 2019 compared to a net worth of £5.6 million at 31 March 2018. This is due mainly to a decrease in the pension fund deficit and an increase in the value of our property, plant and equipment.
- 3.3 The regulations require the formal approval of the accounts and this will be signified by the Chairman of the Council signing and dating the accounts on the page entitled The Statement of Responsibilities for the Statement of Accounts at the Council meeting. This statement is from the Chief Finance Officer and will be signed by him before presentation of the accounts to the Council meeting.

3.4 Accounting Policies and Treatments

Note 1 of the notes to the financial statements identifies the accounting policies which follow CIPFA recommendations in the latest Code of Practice on Local Authority Accounting in the United Kingdom 2018/19. The most significant policies relate to property, plant and equipment, charges to revenue, accruals, pensions, reserves and provisions as follows:

- All expenditure over £10,000 on the acquisition, creation or enhancement of property, plant and equipment is capitalised on an accruals basis in the accounts. These are valued on the basis recommended by CIPFA and in accordance with The Statement of Asset Valuation Principles and Guidance Notes issued by the Royal Institution of Chartered Surveyors. The majority of assets are valued at fair value with some at depreciated historical cost. Property, plant and equipment excluding land are depreciated over their remaining useful life on a straight line basis.
- Charges for depreciation and impairment are made to the comprehensive income and expenditure account by direct allocation to the relevant service

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and then reversed out in the movement in reserves statement. Capital charges therefore help show the true cost of services but have a neutral impact on the amount required to be raised from council tax.

- The accounts are maintained on an accruals basis in accordance with the Code of Practice on Local Authority Accounting. That is all sums due to or from the council during the year are included whether or not the cash has actually been received or paid in the year.
- Accounting for the council's defined benefit pension scheme is prepared under the requirements of International Accounting Standard 19. Thus entries are made in the accounts and the valuation of liabilities is shown in the balance sheet. The notes explain that the cost of benefits is charged as they are earned but this cost is reversed out so that the charge against council tax is based on the cash payable in the year.
- Reserves are maintained to meet general rather than specific future expenditure although some can be earmarked for specific purposes.
 Provisions are only recognised when there is a liability that is of uncertain timing or amount. Provisions are required where Teignbridge has a present obligation as a result of a past event.

3.5 Provisions

The main provisions are those for bad debts (now described as an impairment allowance for bad debts) and the most significant of these are for sundry debtors, council tax, and national non domestic rates. An appeals provision is also held for potential appeals against business rates valuations charged. These are as follows:

- A provision of £538,000 or 14% has been made against a year end balance of £3,714,000 for sundry debts. The majority of the debt relates to housing benefit overpayments where arrangement for regular affordable payments has been made. 20% is provided for small older debts still outstanding with specific appropriate provision for individual large debts. Write offs in the year were £111,000 or 0.8% of debt raised in year (2017/18 £157,000 or 1.0% of debt raised in year).
- The council tax gross debt at the year end was £3,402,000 (2017/18 £3,266,000) and write offs in the year were £165,000 (2017/18 £276,000). The write offs have remained low for each of the last five years at less than 0.3% of the debit raised. The debit raised in the year was £110 million. The bad debt provision for 2018/19 remains at £640,000 being 19% of the balance.
- For national non domestic rates the gross balance at the year end was £390,000 (2017/18 £397,000). Write offs were £78,000 (2017/18 £114,000). The value of the bad debt and appeals provision amounts to £2.25 million at 31 March 2019 to cover potential future bad debts and appeal adjustments on rating valuations. Write offs have remained low for each of the last five years

at less than 0.5% of the debit raised. The debit raised in the year was £39 million.

3.6 External Auditor Reports

All reports from Grant Thornton regarding internal control and any other relevant matters and the officer responses for review are brought to this audit scrutiny committee. The specific comments on these accounts will be in the Annual Governance Report (AGR) which will be on a future agenda as part of approving the audited accounts. The accounts adjustments suggested/noted in the AGR can be discussed by the committee at that item together with the draft management letter.

3.7 Letter of Representation

Our external auditor requires assurances from us on various financial matters including statutory and contractual requirements, reasonableness of estimates and provisions, responsibility for internal controls, various disclosures and information provided. These will be detailed in a letter which needs recommendation for approval at full Council and will be brought to the next meeting which recommends the audited accounts for approval.

4. MAIN IMPLICATIONS

The main implication that Members need to be aware of is that preparation and approval of the accounts is required by the Accounts and Audit Regulations 2015 and that if these regulations are not complied with the external auditor could qualify the accounts.

5. GROUPS TO BE CONSULTED

The draft accounts have been advertised as available for inspection and published on the website. As required by legislation these will be updated with the final version including the external audit opinion and Grant Thornton annual audit letter when completed and available. There is also a brief introduction on the website.

6. WITNESSES TO BE CALLED

None, but the external auditor will be in attendance at the audit scrutiny committee meeting when the accounts have been audited if there are any relevant questions that need to be answered.

7. TIME-SCALE

Members' approval and publication of the accounts for the year ended 31 March 2019 is required by 31 July 2019.

8. CONCLUSION

The draft accounts have been prepared in accordance with the relevant legislation and current best professional practice. They await finalisation of the external audit by Grant Thornton and any final adjustments will be reported to Audit Scrutiny and subsequently Full Council for approval after the end of July 2019.

Martin Flitcroft
Chief Finance Officer

Wards affected	All
Contact for any more information	Martin Flitcroft on 01626 215246 or Claire Moors on
	01626 215242
Background Papers (For Part I reports only)	2018/19 Year End Working Files
	The Accounts and Audit Regulations 2015
	The Chartered Institute of Public Finance and
	Accountancy Toolkit for Local Authority Audit
	Committees 2006
	CIPFA Code of Practice on Local Authority Accounting
	in the United Kingdom 2018/19
	The Statement of Valuation Principles and Guidance
	Notes – The Royal Institution of Chartered Surveyors
	Financial Reporting Standards
Key Decision	Yes
In Forward Plan	Yes
In O&S Work Programme	No



AUDIT SCRUTINY COMMITTEE

CHAIRMAN: Clir Sally Morgan

DATE: 17 July 2019

REPORT OF: Business Improvement and Development

SUBJECT: Strategic & Corporate Risk report

PART I

1. PURPOSE

To provide Members with an overview of the current status of the Strategic & Corporate risks.

2. BACKGROUND

There are 3 types of risk to manage and these are:

Strategic Risks – these are the big issues that impact heavily on our service delivery or are fundamental changes in the district or something that may cause a lot of bad publicity. These form part of the Strategic Risk Register and are managed by Business Leads and Business or Service Managers.

Corporate Risks – also called 'common risks' because they apply to many sections of the Council and we have corporate processes in place to deal with them e.g. Attacks on staff. These form part of the Corporate Risk Register and are managed by Business or Service Managers.

Service Risks - These are risks and opportunities that apply primarily to a service and that generally won't have too many consequences on the rest of the Council. These are managed by Business or Service Managers and Team Leaders.

In addition, reports to decision makers (both Members and the Strategic Leadership Team) should include an analysis of risks so these are considered when important decisions are made. Major projects or service changes should also have risk registers. These may be referred for inclusion in the Corporate or Strategic Risk Registers if they are likely to be significant issues.

The Strategic and Corporate Risk review will be submitted to Audit Scrutiny Committee twice a year in June and December. Strategic and Corporate risks are reviewed on a regular basis by the risk owner.

Guide to risk status

Reviews are prompted by automatic email reminders according to the risk's unmitigated score:

Unmitigated Risk Status Score	Risk status	Review Interval
9	Very high	Monthly
6	High	Quarterly
3-4	Medium	Twice a Year
1-2	Low	Annually

Guide to risk mitigation status:

- Action completed the mitigating action is a one-off action that has been completed and will not be repeated at a later date
- Action ongoing the mitigating action is in place and effective i.e. Reduces the risk to an acceptable level
- Action needed when a mitigating action has not started or is not fully effective i.e. is a
 cause for concern that needs urgent action

3. RISK OVERVIEW

There are 25 risks in the Strategic(ST) Risk register which are the risks we consider could impact heavily on our ability to deliver essential services and meet important objectives. In addition there are 12 corporate (CP) risks, 'common risks', that apply to many sections of the council and we have corporate processes in place to deal with them.

Of these 37 risks 6 have a Very High unmitigated risk score 9 (3x3) i.e. the risk if we took no action to reduce the risk. The risk Responsible Officers have actions (mitigations) in place to reduce these risks.

The risk matrix below shows how many risks have very high (9), high (6), medium (3-4) or low (1-2) mitigated risk scores i.e. the risk score taking into account the effectiveness of actions (mitigations) to reduce the risk.

- 1 risk has a high impact and high likelihood score of 9 (3x3)
- 5 risks have a high impact and medium likelihood score of 6 (3x2)

	3 - High	No Risks	No Risks	1 Risk <u>ST43,</u>
	2 - Medium		14 Risks <u>ST14, CP01, CP07, CP11, CP12,</u> <u>CP08, ST08, ST19, ST09, ST32, ST41,</u> <u>ST40, CP14, ST46,</u>	5 Risks <u>CP09, ST17, ST11, ST20, ST45,</u>
	1 - Low			11 Risks <u>CP13, ST02, ST29, ST21, ST06,</u> <u>CP16, ST37, ST42, CP03, ST44,</u> <u>CP15,</u>
		1 - Low	2 - Medium	3 - High
		Risk Impact		

Risk reviews

A programme for the review of each risk and its mitigations is in place. This includes a meeting with the responsible officer and those managing the risk to review the scope of the risk, causes and impact, and mitigations.

Since the last report in December 3 corporate and strategic risks have been reviewed with the responsible officer.

- **ST06** Statutory Requirements not met updates to mitigations
- **ST11** Breach of code of conduct by Members updates to mitigations
- **ST31** Climate Change the impact of not reducing our energy use or contribution to CO2 emissions new mitigations
- **CP09** Staff health & wellbeing new mitigation
- **ST37** Failure of ICT security measures leading to a cyber attack deleted mitigation

Details of the new and deleted risks are below

Risk	Reviewed by	Changes
CP09 Staff health & wellbeing	Tim Slater	New mitigation: Involvement in staff developing behavioural competencies to support delivery of Council values. Staff communications survey and Managing Director drop ins and briefings.
ST31 Climate change – the impact of not reducing our energy use and contribution to CO2 emissions	David Eaton	New Mitigation: Deliver energy reduction projects to reduce our carbon footprint, Risk: Climate Change - the impact of not reducing our energy use and contribution to CO2 emissions, Mitigation Information: Projects to reduce our carbon footprint includes PV (solar panels) on our buildings.
ST31 Climate change – the impact of not reducing our energy use and contribution to CO2 emissions	David Eaton	New Mitigation: Increase reliance on renewable energy resources: This includes PV (solar panels) on our buildings.
ST31 Climate change – the impact of not reducing our energy use and contribution to CO2 emissions	David Eaton	New Mitigation: Green travel options for staff: A current workplace travel plan.
ST31 Climate change – the impact of not reducing our energy use and contribution to CO2 emissions	David Eaton	New Mitigation: Using technology to reduce miles travelled by the workforce to deliver services: Smarter use of mobile technology to reduce our mileage.
ST46 Failure of ICT security measures leading to a cyber attack	Amanda Pujol	Deleted Mitigation: Communications Plan, The communications plan includes cyber incidents and has a plan on how to deal with them

Major projects/service changes

The current major council projects are listed in the table overleaf, which provides assurance that project risks have been assessed and registers or strategic risks are in place and being managed.

The One Teignbridge Transformation Board meets monthly to review major systems and the digital platform projects. This includes a review of the project risk registers.

The Capital Review Group meets every other month to review projects in the capital programme including key risks and issues.

	T10	Title	Description	Responsible Officer(s)	Up to date Risk Register in place
	GP	Energy Services Company	Formation of a public sector joint venture energy company to provide district heating networks	Simon Thornley	Yes
	GP	GESP	Joint Local Plan with Exeter, East Devon & Mid Devon	Simon Thornley	See ST40, 41, 43
<u>.</u>	IIP	Newton Abbot Town Centre Development and Market Walk	Newton Abbot town centre masterplan focussing on the redevelopment of the Markets area, Bradley Lane and Cricketfield Road car park	Tony Watson, Tom Butcher	Yes
	IIP	Brunswick Street, Teignmouth re- development	Delivery plan in process, focusing on re-development of vacant Brunswick Street sites, George St & Northumberland Place	Tony Watson, Donna Best	Yes
	OAA	Leisure Strategy	First stage of Leisure Strategy Development	Lorraine Montgomery	Yes
	ZH	Climate Emergency Action Plan	The Action Plan will detail the leadership role Teignbridge District will take in promoting community, public, business and other Council partnerships to achieve this Carbon Neutral 2030 Commitment throughout the District. The Action Plan will also outline adequate staff time and resources to undertake the actions to achieve the target. Report to Full Council within six months with an Action Plan, outlining how the Council will address this emergency. Report due at Overview & Scrutiny on 17th Sept.	David Eaton	See ST31

'One	Teignbridge' Project			
		Kay O'Flaherty, Amanda Pujol	Yes	
WE	Midland iTrent	HR/Payroll data management IT system	Martin Flitcroft, Tim Slater	Yes
WE	Open Portal	A project allowing customers to register online to view their personal "dashboard" containing council tax, NNDR and benefit information	Tracey Hooper, Rob Duddle	Yes(part of digital platform project)
WE	Anywhere 365	Cutting edge contact centre telephony & reporting	Amanda Pujol, Karen Land (STRATA)	Yes

4. RISK REPORT

A risk overview report is provided which includes details of the risk, its description, mitigations, unmitigated and mitigated risk scores and responsible officer(s).

Risk report with mitigations – Appendix A attached

Risk mitigations with Action needed status - explanatory notes

CP01 Attacks on staff

Mitigation	Mitigation	Info	Responsible	Date	Last
Status			Person	Identified	Review
					Date
Action needed	J	Staff Health & Safety training programme in place, maintained and reviewed. A Staff Induction programme in place. Training is included in the PDP process undertaken by line managers and should include training as identified by risk assessment.	John-Paul Bove	01/04/2008	30/05/2019

Review Note: Individual teams have individual arrangements for the management of lone working and violence. Some teams are actively monitoring and reviewing arrangements - others less so. STRATA currently developing lone worker solution - being trialled currently. Appropriate audit software would enable this process to be easier to monitor centrally.

Lone worker, violence and aggression and first responder policies and procedures currently under review and being consulted on by multiple departments.

Liaising with HR to progress how to reintroduce induction training to cover basic H&S information including conflict. Proposed providing basic H&S training to all staff to ensure we have records for all staff.

ST37 Failure of ICT infrastructure and systems not meeting business needs or not being fit for purpose

Mitigation	Mitigation	Info	Responsible	Date	Last
Status			Person	Identified	Review
					Date
Action	Strata and	Strata Business Continuity Plan in	David	21/11/2018	26/06/2019
needed		place for each LA to link into. This	Eaton		
		will ensure continuity in ICT			
	Continuity Plans	services and an emergency			
		website facility			

Review Note:

During the month of May, there were two significant service outages. One of these outages was on a Saturday and was caused by a failure of the Dell SAN (Storage Area Network) to complete a 'non service impacting' upgrade. Dell are continuing their

investigation into the root cause of this incident. The second outage occurred overnight on a normal business working day and was caused by a failure of both air conditioning units in the Civic Centre Data Centre. The issue was investigated by the maintenance provider, which led to changes being made to the way the Air Conditioning sensors are reading the operating temperatures within the Data Centre.

Unique Power Supplies are now being installed which will improve resilience if there is another power outage.

We are still awaiting the final version of the Strata BC Plan and this is due to be available by end of June.

ST44 Failure to adopt Local Plans: Greater Exeter Strategic Plan and Teignbridge Local Plan Review

Current unmitigated and mitigated status is High Impact and High Likelihood score 9 (3x3)

Mitigation	Mitigation	Info	Responsible	Date	Last
Status			Person	Identified	Review
					Date
Action	Political support	Ensure information to and	Simon	21/09/2017	28/05/2019
needed		involvement of leading and other	Thornley		
		councillors as appropriate during			
		plan preparation			

Review Note: There are uncertainties over the preparation of GESP specifically, with new administrations in a number of authorities. These need to be resolved before progress can be made, leading to timetable and other concerns. Mitigation in the form of briefing and involvement of new councillors and council leaderships will be necessary in short order. GESP itself will have an impact on the Teignbridge Local Plan review, and consideration of this will be required, which may include a further local development scheme review.

ST46 Failure of ICT security measures leading to a cyber attack

Mitigation	Mitigation	Info	Responsible	Date	Last
Status			Person	Identified	Review
					Date
Action	Cyber security	All staff to complete e-	Tim Slater	14/11/2018	24/06/2019
needed	awareness	learning/awareness training on cyber			
	training	security			
Action	Mobile	Mobile device/agile working policy that	Sue Heath	14/11/2018	24/06/2019
needed	device/agile	includes guidance on working outside			
	working policy	of our managed offices areas and the			
		use of own devices/pc's/laptops			

Review Note: The cyber security awareness training is pending LGA funding. In the meantime we are considering a cheaper alternative. Messaging and awareness continues to be raised through newsletters and posters.

The mobile device / agile working guidance will be picked up in the Acceptable Use policy which is to be finalised and launched this month (June).

5. MAIN IMPLICATIONS None

6. GROUPS TO BE CONSULTED None

7. WITNESSES TO BE CALLED None

8. TIME-SCALE

9. CONCLUSION

Effective risk management will aid decision making, focus and make better use of resources, provide a duty of care, comply with legislation, reduce costs and provide a continuity of service.

10. RECOMMENDATION

Review and approve the report.

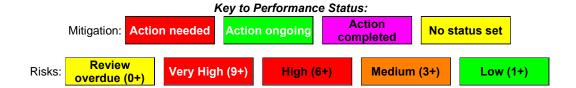
Wards affected	ALL
Contact for any more information	Kay O'Flaherty/Liz Gingell
Background Papers (For Part I reports only)	Appendix A – Risk management report
Key Decision	No
In Forward Plan	No
In O & S Work Programme	No





Report for 2019/20

Filtered by Folder: Strategic Leadership Team - 2. Corporate Risks (Risks), Strategic Leadership Team - 1. Strategic Risks (Risks)
Not Including Child Projects records, Including Mitigation records



Jnmitigat	ted Status: High (6)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood: 2 - Medium			
Mitigated	Status: Medium (4)	Mitigated Risk Impact: 2 - Medium	Mitigated Risk Likelihood: 2 - Medium			
	tified: 01 Apr 2008		Risk Responsible Officer: John-Paul Bove, P	aul Nicholls		
	records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Annual Health & Safety Review	Annual Health & Safety Review (audit) undertaken with Managmay be by physical audit or self answer format	ers by the Corporate Health & Safety Advisor NB: this	John-Paul Bove	26/01/2015	30/05/2019
Action ongoing	Employee Protection Register	Employee Protection Register to warn and inform staff and the	review process	David Eaton	18/12/2014	30/05/2019
Action ongoing	First responder	Suitably trained and nominated person(s) to respond to incider provide this function where appropriate, based on increased ris		Amanda Pujol	18/12/2014	30/05/2019
Action ongoing	Health & Safety Policy in place (current)	Policy in place but will always need maintaining & review Health & Safety policy in place, maintained and reviewed. This Aggression, Lone Working, Panic Alarm Function, Employee F Investigation. Staff wellbeing which is an important mitigation remains an HR	Protection Register (EPR), and Incident Reporting &	John-Paul Bove	01/04/2008	30/05/2019
Action ongoing	Health and Safety Coordination	Group to be established and maintained to ensure a co-ordina	roup to be established and maintained to ensure a co-ordinated response to all risks to staff. Meets quarterly.		01/11/2014	30/05/2019
Action Songoing	Home Safeguard monitoring system	The Home Safeguard system is used for the provision of out of	f hours emergency cover and lone worker monitoring.	Paul Nicholls	18/12/2014	30/05/2019
Action ongoing	Implementation of the Health & Safety Policy	All Managers to be responsible for implementing the Health & procedures within the policy document	Safety Policy as detailed in respective health & safety	Tony Watson	18/12/2014	30/05/2019
Action ongoing	Incident Support Responders	Suitably trained and nominated person(s) to respond to incider responder. Staff to be trained in de-escalation techniques	nts in Forde House to act in support of the first	John-Paul Bove	16/11/2018	30/05/2019
Action ongoing	Local procedures (Teams or Services)	To be developed and implemented by teams/services as they measures they formulate resulting from risk assessment.	will have differing ways of implementing control	Tony Watson	18/12/2014	30/05/2019
Action ongoing	Lone working procedure	Lone working procedure in place that includes the provision of worker record updating	mobile phones, personal attack alarms and lone	John-Paul Bove	01/04/2008	30/05/2019
ction eeded	Staff training	Staff training program in place but will always need maintaining A Staff Induction programme in place. Training is included in the PDP process undertaken by line ma assessment.		John-Paul Bove	01/04/2008	30/05/2019

Review Note: Individual teams have individual arrangements for the management of lone working and violence. Some teams are actively monitoring and reviewing arrangements - others less so. STRATA currently developing lone worker solution - being trialled currently. Appropriate audit software would enable this process to be easier to monitor centrally.

Lone worker, violence and aggression and first responder policies and procedures currently under review and being consulted on by multiple departments.

Liaising with HR to progress how to reintroduce induction training to cover basic H&S information including conflict. Proposed providing basic H&S training to all staff to ensure we have records for all staff.

<u>Risk: Partnership management</u> Lack of partnership management that can lead to poor performance/effectiveness, breakdown in working relationships, council budget pressures, poor customer service & service delivery.

Risk Code: CP03

Partnership includes risks associated with formal partnerships and those organisations we work with and provide funding for/advise/share information with, combined authorities, collaboration, devolution, Strata, Greater Exeter etc

Unmitigat	ed Status: Very High (9)		Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likeliho	ood: 3 - High			
Mitigated	Status: Medium (3)		Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihood	lihood: 1 - Low			
Date Ident	tified: 20 Jul 2016			Risk Responsible Officer	Kay OFlaherty			
Mitigation	records							
Mitigation Status	Mitigation	Info			Responsible Person	Date Identified	Last Review Date	
Action ongoing	A shared vision	An agreed shared vision	across different organisations that has benefits for	both organisations and local people	Philip Shears	20/07/2016	03/06/2019	
Action ongoing	Management of partnership risk by services	Partnership risk manage	ment within those services working with partners		Philip Shears	20/07/2016	03/06/2019	
Action ongoing	Partnership failure contingency	Have in place recourse to	o an independent mediator or critical friend		Philip Shears	21/07/2016	03/06/2019	
Action ongoing	Partnership governance		Vork together on governance arrangements to regulate the operations of the partnership; to provide structure to the nanagement of the partnership; to help to define roles and responsibilities; and sensure accountability		Philip Shears	20/07/2016	03/06/2019	
Action ongoing	Partnership list	List of current partnership	os and those we work with, reviewed annually by th	ne Corporate Management team	Kay OFlaherty	20/07/2016	03/06/2019	
Action ongoing	Partnership performance	A shared plan; defined ro	monitored and reviewed through: bles; financial monitoring; delivery of well defined ou we service delivery; good value for money; performations lenced decision making		Philip Shears	21/07/2016	03/06/2019	
Review No	ote: The list of partnership	is due for review with CM	Ր in July					

Unmitigat	ted Status: High (6)	Unmi	igated Risk Impact: 3 - High Unm	itigated Risk Likelihood: 2 - Medium			
	Status: Low (2)			gated Risk Likelihood: 1 - Low			
Date Iden	tified: 01 Apr 2008		Risk	Responsible Officer: Lucy Ford, Rosi	e Wilson		
Mitigation	n records						
Mitigation Status	Mitigation		Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Actively promote the ten year Counci when talking to suppliers/contractors		Actively promote ten year Council Strategy when talking to sup	pliers/contractors	Lucy Ford	01/04/2008	18/06/2019
Action ongoing	All new procurements have a standa approach with standardised tendering practises		All new procurements have a standardised approach with standardised tendering practises using an e-endering system, (ProContract) as well as using standard documentation (including standard T&C's).		Lucy Ford	01/04/2008	18/06/2019
Action completed	Contract management is on the 3 year procurement improvement plan		contract management toolkit will be developed and implemented, as per the 3-year improvement blan, which will be rolled out to managers as a means of ensuring good contractor performance.		Lucy Ford	01/04/2008	18/06/2019
Action ongoing	Contract Procedure Rules are in plac reviewed annually	e and are	contract Procedure Rules are in place to support the financial regulations within Teignbridge and are eviewed annually to ensure that they are contemporary with procurement legislation and policy.		Lucy Ford	01/04/2008	18/06/2019
Action ongoing	Contracts are awarded to suppliers demonstrating the right mix of quality value for money	and	Contracts are awarded to the most economically advantageous quality and price.	s tenderer, which is a combination of	Lucy Ford	01/04/2008	18/06/2019
Action ongoing	Factors that are proportionate to the the contract will be evaluated at the t stage	ender	We will take quality factors that are proportionate to the nature impact profile in to account when evaluating tenders to ensure selected to complete the contract.		Lucy Ford	01/04/2008	18/06/2019
Action P ongoing	Put relevant accreditation checks in p		We will seek to check relevant accreditation from contractors/sit is proportionate to do so. Such accreditation may include ISC certification.		Lucy Ford	01/04/2008	18/06/2019
Action ongoing	Seek quality assurance from contractors/suppliers		We will seek quality assurance from contractors/suppliers during may be in the form of certification (i.e. ISO 9001), quality policy method statement proposing how they will fulfil the contract.		Lucy Ford	01/04/2008	18/06/2019
Action ongoing	The Corporate Procurement Officer (supports all procurements over the v £50,000		The CPO supports all procurements over the value of £50,000,	, as per the Contract Procedure Rules.	Lucy Ford	01/04/2008	18/06/2019
Action ongoing	Training is provided, which emphasis importance of value for money in procurement		Corporate Procurement provides training on procurement, which for money, which extends to ensuring that the right supplier is sprovider and that the contract is adequately managed.		Lucy Ford	01/04/2008	18/06/2019

Risk: Fail		Risk Code	e: CP07			
		Unmitigated Risk Impact: 2 - Medium	Unmitigated Risk Likelih			
		Mitigated Risk Impact: 2 - Medium Mitigated Risk Likelihood: 2 - Medium				
	tified: 01 Apr 2008		Risk Responsible Office	r: Sue Heath		
Mitigation	Mitigation	Info		Responsible	Date	Last Review
Status	Miligation	IIIIO		Person	Identified	Date Date
Action ongoing	Anti Fraud Theft and Corruption Strategy	The Anti Fraud Theft and Corruption Strategy emphasises the Council's o corruption and sets out the procedures for investigation and prevention.	pposition to fraud theft and	Sue Heath	01/04/2008	25/06/2019
Action ongoing	Bank Reconciliation / Waybill Reconciliation / Budget & SD Arrears Monitoring	Financial Services undertake bank reconciliations to detect any banking ir (used to record income from outlying acticvities) are also reconciled regula		Martin Flitcroft	12/08/2008	25/06/2019
Action ongoing	Cash Handling Procedures	Managers of income collection functions are required to obtain signed star confirming that they have read and understood the cash handling requirer	tements from their staff ments of their post	Sue Heath	12/08/2008	25/06/2019
Action ongoing	Cashless Council	The Council is reducing the volume of payments by cash and encouraging payment.	g more automated	Amanda Pujol	13/01/2017	25/06/2019
Action ongoing	Code of Conduct	The Council expects its employees and members to comply with their result which are outlined on induction and provided on the intranet for reference		Tim Slater	01/04/2008	25/06/2019
Action ongoing	Employee References	The Council obtains references from potential employees regarding their lbefore making an offer of employment.	honesty and integrity	Tim Slater	01/04/2008	25/06/2019
Action Nongoir G	Financial Instructions	The Council's Financial Instructions specify the rules for income collection requirement for irregularities to be notified immediately to the Section 151		Sue Heath	01/04/2008	25/06/2019
Action ongoing	Fraud Awareness Guide for Managers	Fraud awareness guidance has been produced for managers to alert then	n to the risks of fraud.	Sue Heath	08/04/2009	25/06/2019
Action ongoing	Fraud Hotline / Web Form	A freephone Fraud Hotline and Web Form are provided and publicised, to and staff to report any concerns either in person or anonymously.	encourage both citizens	Sue Heath	01/04/2008	25/06/2019
Action ongoing	Internal Audit Function	The Council has an Internal Audit service which reviews declarations of in adequacy of controls designed to prevent loss of income and fraud within		Sue Heath	01/04/2008	25/06/2019
Action ongoing	PCIDSS	The Council is compliant with the Payment Card Industry Data Security St	tandard.	Amanda Pujol	13/01/2017	25/06/2019
Action ongoing	Prosecution of Offenders	The Council prosecutes offences of theft wherever possible and publicises other staff.	s this as a deterrent to	Sue Heath	01/04/2008	25/06/2019
Action ongoing	Secure Collection	Secure collection services are used where appropriate.		Martin Flitcroft	11/03/2013	25/06/2019
Action ongoing	Staff Training	Managers have responsibility to ensure staff employed on income collectitrained in the required procedures and systems are properly documented.		Tim Slater	01/04/2008	25/06/2019
Action ongoing	Whistleblowing Policy	The Council has a Whistleblowing Policy to encourage staff to raise concecorruption.	erns about fraud, theft or	Sue Heath	01/04/2008	25/06/2019
Review N	ote:					

	ncil service provision needs						Code: CP08
	Unmitigated Status: Medium (4) Unmitigated Risk Impact: 2 - Medium Unmitigated Risk Like					1	
Mitigated	Status: Medium (4)		Mitigated Risk Impact: 2 - Medium	Mitigated Risk Likelihoo	d: 2 - Medium		
Date Ident	ate Identified: 19 Mar 2008 Risk Responsible Officer: Tim Slater						
Mitigation	records						
Mitigation Status	Mitigation	Info			Responsible Person	Date Identified	Last Review Date
Action ongoing	Annual Learning and Development Needs Survey	Annual Lear reported to	ning and Development needs are ascertained annually v CLT/CLTe	a corporate training needs survey and	Tim Slater	29/11/2013	20/05/2019
Action ongoing	CPD & personal development support	CPD and ot	ner personal development opportunites are supported an	d prioritised by line managers	Tim Slater	05/11/2008	20/05/2019
Action ongoing	Monitoring of salary levels		s are monitored to ensure Council remains competitive. T e payment of market forces supplements for professional		Tim Slater	19/03/2008	20/05/2019
Action ongoing	Staff performance Reviews		ald have performance reviews to identify training and devoid department training.	elopment needs and have access to	Tim Slater	19/03/2008	20/05/2019
Action ongoing	Succession planning	Succession	planning identifies areas for targeted support and develo	oment opportunities	Tim Slater	19/03/2008	20/05/2019

Review Note: A revised staff competency framework and performance management scheme is being rolled out across the organisation during 2019. Reassessment against the Investor n People Standard is happening in April / May 2019, and a training needs analysis is being undertaken to inform the 2019/20 corporate training programme.

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<u> </u>					Code: CP09	
	ed Status: High (6)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood:	2 - Medium		0000.0100
	Status: High (6)	Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihood: 2			
	tified: 19 Mar 2008	. 3	Risk Responsible Officer: Tir			
Mitigation	records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Benchmarking with other LA's	Benchmarking/ joint working with HR partner councils on sha	aring good practice and reviewing policies etc	Rachel Shannon	03/05/2017	25/04/2019
Action ongoing	Monitoring of staff absence rates & reporting to SLT / CMT	Staff absence rates are monitored and reported to SLT / CM Business Lead on a monthly basis	T. sickness figures are provided to a	Rachel Shannon	19/03/2008	25/04/2019
Action ongoing	Promotion of health & wellbeing	Providing staff opportunities to improve their physical and meachievements and good practices	ental health and wellbeing, promoting	Tim Slater	03/05/2017	25/04/2019
Action ongoing	Regular meetings with trade unions and staff forum	Regular meetings with trade unions and staff forums		Tim Slater	19/03/2008	25/04/2019
Action ongoing	Staff engagement	Involvement in staff developing behavioural competencies to communications survey and Managing Director drop ins and		Tim Slater	15/01/2019	25/04/2019
Action ongoing	Supporting managers to support staff	Providing a range of tools and coaching to equip managers t	to support and manage their staff effectively	Tim Slater	03/05/2017	25/04/2019
Action ongoing	Systems & procedures for short & long term absences	Systems and procedures in place to deal with short term and	d long term absences	Tim Slater	19/03/2008	25/04/2019

Review Note: Current the organisation is going through a programme of change, and has budgetary challenges. It also faces an evolving external environment (Brexit). Hence the current mitigation status. It is anticipated that this will reduce as internal and external challenges are mitigated further.

Risk: Brea	sk: Breach of Code of Conduct by Members Breach of code of conduct by Members conduct bringing the Council into disrepute.						Risk Co	de: CP11
Unmitigat	ed Status: High (6)		Unmitigated Risk Impact: 3 - High	l	Jnmitigated Risk Likelihood	od: 2 - Medium		
Mitigated	Status: Medium (4)		Mitigated Risk Impact: 2 - Medium		Witigated Risk Likelihood: 2	- Medium		
Date Ident	Date Identified: 05 Sep 2007 Risk Responsible Officer: Kare							
Mitigation	records							
Mitigation Status	Mitigation	Info				Responsible Person	Date Identified	Last Review Date
Action completed	A database is kept of members interests	A database is I	database is kept of members interests. This will be reviewed following District Councillor Elections.		Karen Trickey	05/09/2007	17/06/2019	
Action completed	Members' induction training		Members receive training upon election about probity ethics and the code of conduct following District Councillor elections in May 2019		Karen Trickey	05/09/2007	17/06/2019	
Action completed	Members sign up to the code		Monitoring Officer has ensured all members have sign bers following District Councillor elections in May 201		by the code and issues	Karen Trickey	05/09/2007	17/06/2019
Action ongoing	Ongoing Guidance to Members		Officer and the Deputy Monitoring Officer provide or on and application of the Code of Conduct.	going support and	advice to members regarding	Karen Trickey	29/08/2014	17/06/2019
Action ongoing	Regular Reminders to Members	Regular remind	ders are provided to members to keep their registers	of interests up to d	ate.	Karen Trickey	29/08/2014	17/06/2019
Action ongoing	Standards Committee appointment		es a Standards Committee that is appointed in accord ommittee has responsibility to promote high standard		lations and members are	Karen Trickey	05/09/2007	17/06/2019

Review Note: Since January 2019 a more robust approach has been taken to addressing complaints against members, complaints being dealt with quickly. The Standards Committee has also reviewed the Code of Conduct, amendments having been made to help address minority of members' unwillingness to adhere to standards. In addition reminders have been sent in May / June to councillors reminding them of the need to complete their register of interest.

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	ed Status: Medium (4) Status: Medium (4)	Unmitigated Risk Impact: 2 - Medium Mitigated Risk Impact: 2 - Medium		Likelihood: 2 - Medi elihood: 2 - Medium		
ate Ident	ified: 19 Mar 2008		Risk Responsible	Officer: Tim Slater		
itigation	records					
itigation tatus	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
ction ngoing	Benchmarking with other LA's	Benchmarking/ joint working with HR partner councils of policies etc.	n sharing good practice and reviewing	Rachel Shannon	03/05/2017	25/04/2019
	Code of Conduct review & guidance issue	Code of Conduct reviewed and updated following any b	reaches of it and guidance issued to staff	Tim Slater	19/03/2008	25/04/2019
ction ngoing	Continuous monitoring and improvement	Reporting to CLT and the implementation of lessons lea	rned	Tim Slater	04/11/2016	25/04/2019
ction ngoing	Induction for new staff and managers	Induction for new staff and managers including code of	conduct	Tim Slater	19/03/2008	25/04/2019
ction ngoing	Investigations undertaken	Investigations undertaken by trained managers, HR and Disciplinary action taken when appropriate	I Internal Audit.	Tim Slater	19/03/2008	25/04/2019

Risk: Safeguarding All children, young people and adults have the right to be safe, happy and healthy and deserve protection from abuse. The council is committed to safeguarding from harm all children, young people and adults with care and support needs using any council services and involved in any of their activities, and to treat them with respect during their dealings with the council, our partners and contractors.

Risk

Code: CP13

Unmitigated Status: High (6)
Unmitigated Risk Impact: 3 - High
Mitigated Status: Medium (3)
Mitigated Risk Impact: 3 - High
Date Identified: 08 Nov 2007

Unmitigated Risk Impact: 3 - High
Mitigated Risk Likelihood: 1 - Low
Risk Responsible Officer: Rebecca Hewitt

Date lacin	Misk responsible officer. Resource from the first responsible officer.					
Mitigation	records					
Mitigation Status	Mitigation	Info	Responsible Person	Date Identified	Last Review Date	
Action ongoing	Communication of safeguarding	Engagement in local and national campaigns and promoting aspects of the Safeguarding Policy internally	Rebecca Hewitt	07/11/2016	17/05/2019	
Action ongoing	Compliance with the Safeguarding Policy	All officers must have undertaken the E-Learning Safeguarding Training and read the Safeguarding Policy on the Bridge.	Tim Slater	08/11/2007	17/05/2019	
Action ongoing	DBS checks	Designated job roles require a DBS check (Disclosure and Barring Service).	Tim Slater	08/11/2007	17/05/2019	
Action ongoing	Existing staff with frequent contact with vulnerable people will recieve Safeguarding Training .	All existing staff who have frequent or occasional contact with children and young people will receive a higher level of Safeguarding Training by Devon County Council Safeguarding Childrens Board every three years.	Tim Slater	27/11/2009	17/05/2019	
Action Songoin	Joint Working	Devon Safeguarding Network set with all the local authorities that come under Devon-Led by Teignbridge.	Rebecca Hewitt	25/07/2012	17/05/2019	
Action ongoing	Raise awareness of Safeguarding Policy with all existing staff	Link to Safeguarding Policy to be included in Chief Execs Bulletin periodically.	Rebecca Hewitt	08/08/2008	17/05/2019	
Action ongoing	Safeguarding Policy Review	Safeguarding Policy to be regularly reviewed.	Rebecca Hewitt	27/11/2009	17/05/2019	
Action ongoing	Safeguarding protection policy in place	Safeguarding policy in place	Rebecca Hewitt	08/11/2007	17/05/2019	
Action ongoing	Safeguarding training	All new staff will receive Safeguarding training within 6 months of starting their job. Safeguarding training is offered on the corporate training programme	Tim Slater	08/11/2007	17/05/2019	

Review Note: The Safeguarding at Events guide is now complete and training is currently being planned. Work is underway to improve the data collection around cases managed by the team. A number of cases have been referred due to risk of suicide. Work has been undertaken with the Community Safety Partnership to raise awareness of suicide prevention. 345 frontline staff attended briefings including 86 Teignbridge staff. More than 70 staff attended half day Safe Talk sessions.

Work continues to be developed across Devon through the Devon Safeguarding Officers network that Rebecca Hewitt attends.

Teignbridge has also been included in the Senior Safeguarding Supervisors Network which officers peer review of cases. This is led by the NHS and is really valuable for cross agency scrutiny and advice.

Risk: Non-compliance with the Data Protection Act and General Data Protection Regulations. The GDPR and DPA place additional requirements on the council that include gaining consent for data processing, informing individuals how their data will be processed and greater rights for individuals to access their data and request deletion of their data.

These cover all personal data including name, address, data of high telephone number, back details, leasting data, letternet Protected (IP) addresses and cooking IDs, plus constitute personal data.

Risk Code: CP14

These cover all personal data including name, address, date of birth, telephone number, bank details, location data, Internet Protocol (IP) addresses and cookie IDs, plus sensitive personal data such as race, ethnicity, political opinions, physical or mental health conditions, religious or philosophical beliefs, trade union membership, sexual life/sexual orientation, genetic and biometric data.

Unmitigated Status: Very High (9)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood: 3 - High
Mitigated Status: Medium (4)	Mitigated Risk Impact: 2 - Medium	Mitigated Risk Likelihood: 2 - Medium
Date Identified: 22 Aug 2017		Risk Responsible Officer: Sue Heath

ate identified: 22 Aug 2017 Risk Responsible Officer: Sue Heath						
records						
Mitigation	Info	Responsible Person	Date Identified	Last Review Date		
A dedicated Data Protection Officer to ensure compliance with the GDPR	A dedicated Data Protection Officer to ensure compliance with legislation.	Sue Heath	22/08/2017	21/06/2019		
Advice and process for third party use of our data, not under contract	Advice and process for third party use of our data, not under contract	Marie Downey	22/08/2017	21/06/2019		
Data Protection Impact Assessment (DPIA)	DPIA's are undertaken for all new system changes to ensure Data Protection by Design principles are followed.	Sue Heath	06/07/2018	21/06/2019		
Data protection training including changes due to GDPR	Data protection training is mandatory for all staff. Data Guardians attained GDPR certificate.	Sue Heath	22/08/2017	21/06/2019		
GDPR clause in our contracts	GDPR clause in our contracts to mitigate against data breaches by our contractors.	Marie Downey	22/08/2017	21/06/2019		
Information Asset register	Data asset register held by services including what personal data we hold, where it came from and who it is shared with.	Sue Heath	22/08/2017	21/06/2019		
Information Management Group	Officer group in place to promote best practice and processes, reviewing risk and data breaches. The group includes Strata, Communications, Legal, and Audit.	Sue Heath	22/08/2017	21/06/2019		
Personal data consent management	Processes or procedures for opting in/out of data storage & processing, in place, where applicable.	Sue Heath	22/08/2017	21/06/2019		
Personal data processing	Processes or procedures for personal data processing and record of what the processes and the lawful basis for processing, in place.	Sue Heath	22/08/2017	21/06/2019		
Process or procedure in place to report, respond to and review a data breach.	Review of breaches by the Information Management Group, reporting to SLT and incorporation of lessons learned into training points that staff are made aware of through their team meetings and Your newsletter.	Sue Heath	22/08/2017	21/06/2019		
Promotion of data protection awareness and GDPR	Through CMT, Information Governance Group, Audit Scrutiny, CABIG, Your newsletter, Metacompliance, Data Guardians etc.	Sue Heath	22/08/2017	21/06/2019		
Records retention schedule	Out of date or unused personal data stored needing checks with records retention schedule and deleting if applicable	Sue Heath	22/08/2017	21/06/2019		
Service Data Guardians	Corporate responsibility for compliance with DPA and GDPR is shared across the organisation by trained Data Guardians.	Sue Heath	14/05/2018	21/06/2019		
Technical measures to ensure data security	Strata ensure data security for our IT including end point security and access levels management through Active Directory.	Amanda Pujol	14/05/2018	21/06/2019		
	Mitigation A dedicated Data Protection Officer to ensure compliance with the GDPR Advice and process for third party use of our data, not under contract Data Protection Impact Assessment (DPIA) Data protection training including changes due to GDPR GDPR clause in our contracts Information Asset register Information Management Group Personal data consent management Personal data processing Process or procedure in place to report, respond to and review a data breach. Promotion of data protection awareness and GDPR Records retention schedule Service Data Guardians Technical measures to ensure data	Mitigation Info A dedicated Data Protection Officer to ensure compliance with the GDPR A dedicated Data Protection Officer to ensure compliance with legislation. Advice and process for third party use of our data, not under contract Advice and process for third party use of our data, not under contract Data Protection Impact Assessment (DPIA) DPIA's are undertaken for all new system changes to ensure Data Protection by Design principles are followed. Data protection training including changes due to GDPR Data protection training is mandatory for all staff. Data Guardians attained GDPR certificate. Data Guardians attained GDPR certificate. GDPR clause in our contracts GDPR clause in our contracts to mitigate against data breaches by our contractors. Information Asset register Data asset register held by services including what personal data we hold, where it came from and who it is shared with. Information Management Group Officer group in place to promote best practice and processes, reviewing risk and data breaches. The group includes Strata, Communications, Legal, and Audit. Personal data consent management Processes or procedures for personal data processing and record of what the processes and the lawful basis for processes or procedures for personal data processing and record of what the processes and the lawful basis for processes or procedures for personal data processing and record of what the processes and the lawful basis for processes ing. in place. Process	Mitigation Info Responsible Person A dedicated Data Protection Officer to ensure compliance with the GDPR A dedicated Data Protection Officer to ensure compliance with the GDPR Sue Heath ensure compliance with the GDPR Advice and process for third party use of our data, not under contract Marie Downey Data Protection Impact Assessment (DPIA) DPIA's are undertaken for all new system changes to ensure Data Protection by Design principles are followed. Sue Heath Data protection training including changes due to GDPR Data protection training is mandatory for all staff. Sue Heath GDPR clause in our contracts GDPR clause in our contracts GDPR clause in our contracts to mitigate against data breaches by our contractors. Marie Downey Information Asset register Data series register held by services including what personal data we hold, where it came from and who it is shared with. Sue Heath Information Management Group Officer group in place to promote best practice and processes, reviewing risk and data breaches. The group includes Strata, Communications, Legal, and Audit. Sue Heath Personal data consent management Processes or procedures for opting in/out of data storage & processing, in place, where applicable. Sue Heath Processes or procedure in place to report, respond to and review a data breach. Review of breaches by the Information Management Group, repor	Mitigation Info Responsible Date Person Date Person A dedicated Data Protection Officer on Ensure compliance with legislation. Sue Heath 22/08/2017 A dedicated Data Protection Officer on Ensure compliance with the GDPR on Sure compliance with the GDPR on Sure compliance with the GDPR of Compliance		

Review Note: A check of staff completion of GDPR training has been undertaken. 84% had done it. Chasing the remaining16%. (Note many of these are refuse and cleansing). Focusing also on good data management. Awareness raised at CMT, CABIG and with Data Guardians to clear Global, delete old databases, and manage emails as records, deleting them from the system where possible.

Risk: Project management Poor project planning and management lead to failure of the project. Either failure of the whole project or part of it and the outcomes and efficiencies expected Risk are not achieved.

Code: CP15

Opportunities to improve efficiency, use of our assets, increase income, provide 24/7 online services, improve the customer experience.

Unmitigated Status: High (6)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood:	igated Risk Likelihood: 2 - Medium			
Mitigated Status: Medium (3)	Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihood: 1 - Low				
Date Identified: 15 Nov 2017	Risk Responsible Officer: Kay	y OFlaherty				
Mitigation records						
Mitigation Mitigation	Info		Responsible	Date	Last Review	

Mitigation records								
Mitigation Status	Mitigation	Info	Responsible Person	Date Identified	Last Review Date			
Action ongoing	Corporate project management method	Ensure this is complied with for all projects using the project toolbox from small to medium projects and Prince 2 principles for large projects	Philip Shears	02/10/2017	02/04/2019			
Action ongoing	Effective monitoring and reporting of project risks	Regular monitoring and formal reporting of all aspects of the project progress to SLT/CMT, PH's, the Capital Programme Review Board and One Teignbridge Transformation Board	Philip Shears	02/10/2017	02/04/2019			
Action ongoing	Key council projects risk management list	Links to the current risk registers for key & major council projects	Liz Gingell	02/10/2017	02/04/2019			
Action ongoing	Project assurance	Ensure that project assurance for major projects is provided by either an auditor or other suitably qualified officer	Philip Shears	02/10/2017	02/04/2019			
Action ongoing	Project lessons learned	Ensure lessons learned from running major projects are captured and reported to CMT	Kay OFlaherty	02/10/2017	02/04/2019			
Action ongoing	Project management expertise	Make sure necessary and appropriate training is available for all those managing key council projects	Tim Slater	02/10/2017	02/04/2019			
Action ongoing	Project risk management by services	Project risks (threats and opportunities) identified and assessed before the project starts and then managed and monitored by the project team	Philip Shears	02/10/2017	02/04/2019			
Action ongoing	Project risk reporting to SLT and Audit Scrutiny	Reporting on key/major project risk to SLT and Audit Scrutiny	Liz Gingell	02/10/2017	02/04/2019			
Action ongoing	Risk information provided for all key decisions	Risk information to be provided for all PH(Exec) & Council decisions, this to be included within the report templates.	Karen Trickey	02/10/2017	02/04/2019			

Review Note: The progress of larger projects including risk & issues, key milestones and finance is reported on a regular basis to the One Teignbridge Transformation Board and Capital Programme Review Group. We continue to work on ensuring the management of small and medium projects is appropriate and adequate. Training in project management is available as required and 15 officers attended project management training during March.

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Risk: Lack of Effective Risk Management The Council fails to manage its risks properly which impacts on its ability to achieve its goals.					Risk Code: CP16				
Unmitigated Status: High (6)		Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood: 2 -	Unmitigated Risk Likelihood: 2 - Medium					
Mitigated Status: Medium (3)		Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihood: 1 - Lo	Mitigated Risk Likelihood: 1 - Low					
Date Ident	Date Identified: 01 Oct 2008 Risk Responsible Officer: Philip Shears								
Mitigation records									
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date			
Action ongoing	Audit of Risk Management Arrangements	Internal Audit review the risk management arrangements and report their findings to Corporate Leadership Team & Audit Scrutiny Committee who are responsible for monitoring the management of risk.			16/10/2008	15/05/2019			
Action ongoing	Review of Strategic and Corporate Risks and new emerging risks and opportunities	Strategic and Corporate risks are reviewed by Corporate Leadership Team & Audit Scrutiny Committee twice a year. This includes looking at new emerging risks and opportunities.		Liz Gingell	16/10/2008	15/05/2019			
Action ongoing	Risk Management Arrangements for Partnerships	Risk Management arrangements in place for significant partnerships i.e. Building Control and Crime and Disorder Reduction Partnership.		Kay OFlaherty	27/08/2009	15/05/2019			
Action ongoing	Risk Management is Embedded	Risk Management is embedded through the use of the corporate SPAR.net database with automatic reminders to prompt risk reviews; requirement for risks to be considered in decision making reports and capital programme PIDs (i.e. projects).		Liz Gingell	16/10/2008	15/05/2019			
Action ongoing	Risk Management Strategy	A Risk Management Strategy is in place, is periodically reviewed and updated, and made available to staff.		Kay OFlaherty	16/10/2008	15/05/2019			
Action ongoing	Risk Management Training	Risk Management training is available in the corporate training programme and guidance available on the intranet. Risk Management training is available to Members. The Customer Access & Improvement Group also receive regular risk management training/updates.		Liz Gingell	27/08/2009	15/05/2019			

Review Note: guidance are available on the intranet and risk training is available for teams or one to one on request. Corporate and Strategic risks continue to be reviewed by the Audit Scrutiny Committee and Strategic Leadership Team. Partnership risk registers are in place for our key partners such as Strata and the Building Control Partnership. The audit of risk management arrangements in April achieved a good audit assurance opinion.

•		nanage finance Budget r	restraints/lack of finances, due to local & na	tional changes in service demand that effect levels of spend or	income leading t		k de: ST02
budget imi	ted Status: Very Hig	nh (9)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood: 3 - High		- 00	ue. 3102
	Status: Medium (3)	· · ·	Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihood: 1 - Low			
	tified: 01 Apr 2008		, J	Risk Responsible Officer: Martin Flitcroft,	Philip Shears		
Mitigation	records				-		
Mitigation Status	Mitigation	Info			Responsible Person	Date Identified	Last Review Date
Action ongoing	Budget Preparation	The current budget setting process involved projecting Teignbridge's financial position over the next three years. There is a plan for income and expenditure which is monitored monthly. The three year plan was estimated taking account of the latest figures for reducing government grants. The plan and balanced was approved and published in February.					18/06/2019
Action ongoing	Budget Report	An annual budget report to SLT, Executive and Council includes details of major changes & horizon scanning, used when setting the balanced budget			Martin Flitcroft	07/12/2016	18/06/2019
Action ongoing	Budget Review	The budget is subject to an ongoing review to identify areas of concern with a resulting monthly report to CMT and quarterly report to Executive. Budget proposals for the next three years are balanced.			Martin Flitcroft	05/09/2008	18/06/2019
Action ongoing	Budget Risk Analysis	Part of the budget process is a sensitivity and risk analysis where key factors are identified and assessed with a summary and conclusion by the Chief Finance Officer.		Martin Flitcroft	08/09/2008	18/06/2019	
Action ongoing	General Reserves Monitoring	General Reserves are set annually and monitored regularly to ensure a minimum requirement is maintained to cover major budget variations. Reserves are being increased to approximately £2m for the next three years. This will allow us to take advantage of opportunities to increase income and deal with unexpected budget pressures.			Martin Flitcroft	08/09/2008	18/06/2019
Action ongoing	Service Reviews	Business challenge exercitosely monitored.	cise (now BEST 2020) completed annually.	This identifies budget pressures and savings, which are	Philip Shears	06/12/2010	18/06/2019
Review N	ote:						

reviewed by Legal & Finance

Provision of in-house legal training

ongoing Action

Risk: Statutory Requirements Not Met Government requirements not being met (was legal challenge) leading to intervention by Central Gov. or other regulatory bodies leading to legal Risk challenge, poor audit reports and compensation claims. Code: ST06 **Unmitigated Status: Very High (9)** Unmitigated Risk Impact: 3 - High Unmitigated Risk Likelihood: 3 - High Mitigated Status: Medium (3) Mitigated Risk Impact: 3 - High Mitigated Risk Likelihood: 1 - Low Date Identified: 19 Jul 2006 Risk Responsible Officer: Philip Shears, Karen Trickey Mitigation records Mitigation Mitigation Info Responsible Date Last Review Status Person Identified Date Commit adequate resources to achieving government Commit adequate resources to achieving government requirements and reporting Philip Shears 17/06/2008 26/06/2019 Action ongoing requirements and reporting schedules schedules Council's planned programme of Audit inspections Council's planned programme of Audit inspections to provide assurance to Senior Sue Heath 17/06/2008 26/06/2019 Action Management ongoing Ensure a current up to date set of Financial Procedure Ensure a current up to date set of Financial Procedure Rules are maintained Sue Heath 26/06/2019 Action 17/06/2008 ongoing Rules are maintained Ensure appointment of appropriate professional and Ensure that appropriate professional and technical officers are appointed across the Tim Slater 17/06/2008 26/06/2019 Action technical Officers authority to ensure that legislative and procedural requirments are met ongoing Ensure that the Council's Constitution is fit for purpose Action Ensure that the Council's Constitution is fit for purpose Karen Trickey 17/06/2008 26/06/2019 ongoing Formal reports to Executive/Council/Committee to be Formal reports to Executive/Council/Committee should be seen by Monitoring Officer Karen Trickey Action 11/06/2008 26/06/2019

Review Note: Group Leaders will be reviewing the constitution in June/July. Committee report templates are being reviewed and will include a specific table for completion by the S151 Officer and Monitoring Officer. Standards training has taken place and training is planned for specific units in response to needs following discussion with officers.

Provision of in-house legal training e.g Member Committee training, data protection e-

Karen Trickey

11/06/2008

26/06/2019

and S.151 Officer

learning

		d demand on Council services e.g. housing benefits.	ability to deliver our Council Strategy and may lead to increased unem	pioyment, a com		sk ode: ST08
	ed Status: High (6)	Unmitigated Risk Impact: 2 - Medium	Unmitigated Risk Likelihood: 3 - High		U(Jue. 5100
	Status: Medium (4)	Mitigated Risk Impact: 2 - Medium	Mitigated Risk Likelihood: 2 - Medium			
	tified: 01 Apr 2008	д	Risk Responsible Officer: Martin Flitcroft, Philip Shears,	Tony Watson		
Mitigation	records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
	Annual Review of the Council Strategy	The Ten Year Council Strategy 2016-25 was approved Committee.	by Council in April 2016. Quarterly monitoring report to O&S	Philip Shears	03/12/2008	16/05/2019
	Assessing the Disposal/Acquisition of Assets		se with development potential based on the current financial climate. contunities for the acquisition of assets for redevelopment,	Tony Watson	01/04/2008	16/05/2019
Action ongoing	Budget Set	Meetings held with Members the public & local business Business Rates.	ses to discuss the levels of fees and charges, Council Tax and	Martin Flitcroft	24/11/2008	16/05/2019
Action ongoing	Council Reserves	The Council maintains reserves at a level that is able to Full sensitivity and risk analysis included in the final bud	cover major variations from budget in both expenditure and income. dget which is approved by Council every year.	Martin Flitcroft	24/11/2008	16/05/2019
Action ongoing	Financial Management		ing for major variations which impact on the level of reserves. This evey, council tax support, and business rates retention monitoring. to the requirement to re-align resources.	Martin Flitcroft	24/11/2008	16/05/2019
	Monitor the Economic Situation	maximising value for local people. Through the Econom	ate and adjust plans accordingly to achieve the corporate goals, whilst nic Development Delivery Plan, economic trends for the district were eview so that it aligns with the Local Plan and current trends.	Tony Watson	01/04/2008	16/05/2019
Action ongoing	Responding to redundancies	businesses and employees where mass redundancies a matching skills to vacancies. For smaller scale redunda	n at Job Centre Plus (JCP) to provide advice and support to are made. Including joint working on retraining and upskilling plus incies, joint working to support people back to work as quickly as inployment levels and understand when intervention and assistance	Tony Watson	15/09/2017	16/05/2019

ongoing

Risk: Inadequately prepared to manage the impacts of a major emergency in the District Inadequately prepared to manage the impacts of an emergency affecting the public, Risk business environment and/or organisation. Code: ST09 An inadequate or inappropriate response to a major or environmental emergency affecting the civil community or the Council itself. **Unmitigated Status: High (6) Unmitigated Risk Impact: 3 - High** Unmitigated Risk Likelihood: 2 - Medium Mitigated Status: Medium (4) Mitigated Risk Impact: 2 - Medium Mitigated Risk Likelihood: 2 - Medium Date Identified: 01 Apr 2008 Risk Responsible Officer: Philip Shears Mitigation records Mitigation Mitigation Info Responsible Date Last Review Status Person Identified Date Appointment of Emergency Planning Officer To carry out the related tasks **David Eaton** 01/04/2008 14/05/2019 ongoing Devon Emergency Planning Services Devon Emergency Planning Services started on 1st April and provides capacity and resilience to David Eaton 01/04/2016 14/05/2019 ongoing the authority. Multi agency working and intelligence sharing Multi agency working and intelligence sharing through the Devon and Torbay Prevent Rebecca Hewitt 17/12/2015 14/05/2019 Action ongoing Partnership Action Publication and regular review of the Corporate Full review of the plan at regular intervals or after a significant incident **David Eaton** 18/12/2014 14/05/2019 Emergency Plan & Business Continuity Plan ongoing Action Publication of the Corporate Emergency Plan Identification of the Council's roles, responsibilities and tasks required in dealing with emergency David Eaton 01/04/2008 14/05/2019 ongoing incidents. Identifying the the interaction and cooperation required with the multi agency response Action Reciprocal support agreement with other Devon A Memorandum of Understanding exists signed by all Devon Chief Executives stating that **David Eaton** 01/04/2008 14/05/2019 reciprocal assistance and resources will be made available ongoing Research and Consultation on Emergency Regular liaison with governmant agencies and local responders to distribute best practice and **David Eaton** 14/05/2019 01/04/2008 Action ongoir Response Procedures knowledge on common usage of equipment and communications sysytems Training of Council staff Training and exercises on emergency response, roles, responsibilities and tasks David Eaton 01/04/2008 14/05/2019 Action

Review Note: Devon Emergency Planning Services is now a full partnership arrangement with all district, county and unitary authorities in Devon. This has improved our resilience and capacity to respond to a major incident.

	ure to Comply with Health & Safety Legisla of corporate manslaughter, prosecution, loss	ation Failure to comply with Health and Safety Legislation lead of reputation and high insurance costs.	ling to damage of property or equipment,	loss, injury or deat	th of staff or	Risk Code: ST11
Unmitigat	ed Status: Very High (9)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood: 3 - High			
Mitigated	Status: High (6)	Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihood: 2 - Medium			
Date Iden	tified: 01 Apr 2008		Risk Responsible Officer: Paul Nichol	ls, Philip Shears		
Mitigation	records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Adequate Health and Safety resources available	The Council makes available adequate time, money and resoland safety to be carried out.	ource for measures necessary for health	Philip Shears	16/10/2018	19/06/2019
Action ongoing	Approved Policies and procedures in place	Health and Safety Policy and procedures in place and subject	t to regular revisions.	John-Paul Bove	16/10/2018	19/06/2019
Action ongoing	Health and Safety communication	Annual reports produced each year. Regular Health and Safe	ety Committee meetings take place.	John-Paul Bove	01/11/2014	19/06/2019
Action ongoing	Health and Safety Manager provided	Health and Safety Manager in post to advise managers on ho	ow to comply with their duties.	John-Paul Bove	16/10/2018	19/06/2019
Action ongoing	Health and Safety training	Induction training is given at start of employment. Managers i training given in house or by external provider.	dentify training needs and appropriate	John-Paul Bove	01/04/2008	19/06/2019
Action ongoing	Overview of compliance	Health & Safety Manager to escalate to Head of Service or M not properly managing health and safety duties/responsibilities		John-Paul Bove	01/11/2014	19/06/2019
Action ongoing	Risk assessments in place	Managers produce risk assessments and have access to advaudits risk assessments as necessary.	rice from H&S Manager. H&S manager	John-Paul Bove	16/10/2018	19/06/2019
Action ongoing	Safety audits	Periodic H&S audits of teams and services based on hazard assessment programme co-ordinated by H&S manager.	and risk carried out through self-	John-Paul Bove	01/04/2008	19/06/2019
Action ongoing	Systems to report, record, monitor accident and near miss reports	Reporting policy in place and effectively being applied		John-Paul Bove	16/10/2018	19/06/2019

Review Note: Current induction training under review. Met with HR to look at means of delivery and to look at how training is recorded. HR agreed to look into re-establishing something like the managers toolkit training to increase risk assessment knowledge to relevant levels. Basic Risk Assessment training was carried out for STRATA managers.

Training planned for Waste staff in October in safe vehicle movements, asbestos and violence and aggression. Evidence that vehicle movement risks are not being properly managed - met with new Ops Manager to address going forward.

Investigating risk management systems to assist in monitoring health and safety information to enable risks to be more easily foreseen. Escalated with Firmstep the need to have electronic reporting systems created to be able to record and monitor near misses and accidents and aid in prevention.

		to loss and / or reputational damage to the Council.			Risk Code: ST	14
		nitigated Risk Impact: 2 - Medium	Unmitigated Risk Likelihood: 3 - High			
	` ,	gated Risk Impact: 2 - Medium	Mitigated Risk Likelihood: 2 - Medium			
Date Ident	tified: 26 Jul 2006		Risk Responsible Officer: Sue Heath, F	Philip Shears		
Mitigation	records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Anti Fraud & Corruption Leaflet	User friendly guide produced and distributed periodically.		Sue Heath	29/09/2006	24/06/2019
Action ongoing	Anti Fraud and Theft Strategy and Whistleblowing Policy	Whistleblowing Policy exists to encourage staff to raise matte and Corruption Strategy sets out Council's approach to fraud internally and externally.		Sue Heath	31/07/2006	24/06/2019
Action ongoing	Anti Fraud Guidance for Managers	Managers' Anti Fraud Awareness guidance document has be Council sites and to Managers.	en produced and made available at all	Sue Heath	27/08/2009	24/06/2019
Action ongoing	Anti Fraud, Theft and Corruption Strategy	Anti Fraud, Theft and Corruption Strategy sets out the steps it	t will take to deal with fraud.	Sue Heath	08/09/2008	24/06/2019
Action ongoing	Bank Reconciliations	Bank and Waybill reconciliations are undertaken independent income for banking.	tly by Finacial Services to detect losses of	Martin Flitcroft	08/09/2008	24/06/2019
Action ongoing	Financial Instructions and Contract Procedure Rules	We have Financial Instructions and Contract Procedure Rules these are reviewed annually to ensure that they are contemporand best practice.		Sue Heath	08/09/2008	24/06/2019
Action ongoir	Fraud Risk Analysis	Fraud risk analysis maintained for awareness of fraud risks ad	cross the council.	Sue Heath	06/06/2014	24/06/2019
Action Congoing	Internal Audit	Risk based internal audit plan includes fraud risk assessment	t.	Sue Heath	27/09/2006	24/06/2019
Action ongoing	Raising awareness of the Council's position of non-tolerance to fraud & corruption	Where appropriate, instances of proven fraud are publicised t position of non-tolerance.	to raise awareness of the Council's	Sue Heath	08/09/2008	24/06/2019
Action ongoing	References are obtained for new employees	References are obtained for new employees.		Tim Slater	08/09/2008	24/06/2019
Action ongoing	Self Assessment against Best Practice	A self assesment against best practice checklists such as Properiodically.	otecting the Public Purse is undertaken	Sue Heath	27/11/2009	24/06/2019
Action ongoing	Staff and Member Codes of Conduct	Staff and Members' Codes of Conduct set out standards requavailable thereafter on the intranet.	ired - these are issued at induction and	Tim Slater	28/07/2006	24/06/2019
Action ongoing	Suppliers Notified of Whistleblowing Policy	Suppliers that do business with the Council are advised of our procedures.	r Anti Fraud and Whistleblowing	Sue Heath	31/07/2006	24/06/2019
Action	Whistleblowing Hotline and Anti Fraud Publicised	Freephone Whistleblowing Hotline is provided for anyone to a citizens through Teignbridge Connect Magazine and on the Ir		Sue Heath	29/11/2006	24/06/2019

Review Note: The Freephone hotline has been reviewed in the light of the global comms project and has been decommissioned due to cost outweighing benefit. Customers will still be able to report fraud online and by general number.

Risk: Inability to Recruit and Retain Staff Getting the right people in the right job at the right time' so that any loss of staff does not have a significant or prolonged impact on service delivery and continuity. Risk Code: S							
Unmitigat	ed Status: High (6)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood: 2 - Mediur	n			
Mitigated	Status: High (6)	Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihood: 2 - Medium				
Date Iden	tified: 19 Mar 2008		Risk Responsible Officer: Philip Shears	, Tim Slater			
Mitigation	records						
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date	
Action ongoing	Benchmarking with other LA's	Benchmarking/ joint working with HR partner councils on sharing	ng good practice and reviewing policies etc	Rachel Shannon	03/05/2017	25/04/2019	
Action ongoing	Consistent management to create 'Team Teignbridge'	Consistent management practices to create 'Team Teignbridge leading well and motivating their staff.	e'; making sure managers are consistent in	Philip Shears	03/05/2017	25/04/2019	
Action ongoing	Council operates a pay agreement	Council operates a pay agreement that allows for the payment posts.	of market forces supplements for all	Tim Slater	19/03/2008	25/04/2019	
Action ongoing	Enhancing recruitment practices	Making sure recruitment targets the right audiences and promo	otes the benefits of working for Teignbridge	Tim Slater	03/05/2017	25/04/2019	
Action ongoing	Salary levels are monitored to ensure Council remains competitive.	Salary levels are monitored to ensure Council remains competi scheme used for job evaluation	itive with other Councils. Hay Management	Tim Slater	19/03/2008	25/04/2019	
Action ongoing	Screening of potential new employees	Screening of new employees including DBS checking where ap	opropriate and taking up references	Tim Slater	03/05/2017	25/04/2019	
Action Oongoing	Staff performance reviews	All staff have performance reviews to identify training and deve corporate and department training courses as recommended by		Tim Slater	19/03/2008	25/04/2019	
Action ongoing	Voluntary Redundancy Programme	Voluntary redundancy programme considers applications base evaulation of the impact of skills lost.	d on certain criteria which includes	Tim Slater	19/06/2011	25/04/2019	
Action ongoing	Work Force planning	Work force planning identifies service people resourcing needs development activity. The Council also has a market forces pol		Tim Slater	19/03/2008	25/04/2019	

Review Note: The Council competes with other local authorities for specialist staff. This is a risk which requires on-going management through workforce planning and market review.

Risk: Poo	r or Ineffective Business Contin	uity Manag	ement Inability to provide Council services			Risk Code: ST19	
Unmitigat	ed Status: High (6)		Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelih	nood: 2 - Medium		
Mitigated	Status: Medium (4)		Mitigated Risk Impact: 2 - Medium	Mitigated Risk Likelihoo	d: 2 - Medium		
Date Ident	tified: 09 Jun 2008			Risk Responsible Office	er: Tony Watson		
Mitigation	records						
Mitigation Status	Mitigation	Info			Responsible Person	Date Identified	Last Review Date
Action ongoing	Business Continuity Planning	Council's C	on of the Council's critical services that must be maintained, the detail corporate Emergency and Business Continuity Plan. See of a relevant manager's 'Business Continuity Checklist'	is contained within the	David Eaton	17/10/2008	14/05/2019
	Management of service business continuity	Managers t	o manage the business continuity of their service(s)		Tony Watson	18/12/2014	14/05/2019
	Regular business continuity health checks	implemente	ck on the individual service area business continuity arrangements to ed and are effective f advice and training where needed	ensure they have been	David Eaton	18/12/2014	14/05/2019
Review No	ote: Strata are continuing to impro	ve the resilie	ence and business continuity arrangements for our IT systems.			'	

4

Risk: Poo	Risk C	ode: ST20				
Unmitigat	ed Status: High (6)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likeli	hood: 2 - Medium		
Mitigated	Status: High (6)	Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihoo	od: 2 - Medium		
Date Ident	tified: 12 Mar 2003		Risk Responsible Office	er: Philip Shears		
Mitigation	records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Elections project plan	There is a project plan for elections		Cathy Ruelens	11/06/2008	10/06/2019
Action ongoing	Electoral guidance followed	The Council considers and acts on guidance issued by the E	lectoral Commission	Cathy Ruelens	11/06/2008	10/06/2019
Action ongoing	Electoral law & systems training	Members of staff have on-going training in Electoral law and System	the eXpress Election Management	Cathy Ruelens	11/06/2008	10/06/2019
Action ongoing	External Performance Plan	The Returning Officer has to complete real time performance Commission	monitoring by the Electoral	Cathy Ruelens	11/02/2013	10/06/2019
Action ongoing	Key staff elections training	There is a specific training programme for key staff involved	in elections	Cathy Ruelens	11/06/2008	10/06/2019
Action ongoing	Planning meetings	Returning Officer and Deputy Returning Officer have regular elections	meetings to plan in advance of major	Cathy Ruelens	01/09/2008	10/06/2019
Action Action Completed	Qualified Council Election's Co- ordinator	The Council's Elections Co-ordinator is qualified to a standar Electoral Administrators	d recognised by the Association of	Cathy Ruelens	11/06/2008	10/06/2019
Action ongoing	Refresher/Awareness Training	Regular Officer attendance at Electoral Commission events to others' experiences.	o identify Best Practice and learn from	Cathy Ruelens	23/06/2010	10/06/2019
Action ongoing	Risk Management workshop	A Risk Management workshop is held as part of the preparate	tion for major elections	Cathy Ruelens	11/06/2008	10/06/2019

Review Note: Unplanned elections put a huge strain on a small team. The unplanned EU elections were not as high profile as an unscheduled general election or referendum would be. An unscheduled national election in late summer/autumn would present us with particularly difficult circumstances during the annual household canvass.

Unmitigate	ed Status: High (6)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood: 2 - I	Medium		
Mitigated:	Status: Medium (3)	Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihood: 1 - Lov	V		
Date Ident	ified: 19 Mar 2008		Risk Responsible Officer: Amand	a Pujol		
Mitigation	records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Access to expert advice, senior practitioners, external professional services	Access to expert advice, senior practitioners, external professio	nal services as required	Sue Heath	19/03/2008	16/05/2019
	Commitment to and access to continuous professional development for professional staff	Commitment to and access to CPD for professional staff		Tim Slater	19/03/2008	16/05/2019
Action ongoing	Data Quality Policy	Data Quality Policy in place a reviewed on a regular basis		Eve Bates	14/05/2018	16/05/2019
Action ongoing	Good project management practices	Good project management practices		Kay OFlaherty	01/04/2008	16/05/2019
	Increase staff awareness of data quality through the Customer Access and Business Improvement Group	Network of Officers from each service area who oversee custom their services. They meet every 6-8 weeks to review the latest ir improvement work such as ICT, risk, equality, consultation, data share new 'big' ideas and innovation	nfo all all aspects of customer access and	Kay OFlaherty	19/03/2008	16/05/2019
Action ongoing	Regular checks / auditing of data	Regular checks / auditing of data on a risk basis		Sue Heath	01/04/2008	16/05/2019
	Systems and procedures to manage & monitor performance data quality	Systems and procedures in place to manage and monitor performant principles e.g sign-off procedures within the Councils performant		Kay OFlaherty	01/04/2008	16/05/2019
Action ongoing	Training of key staff on data quality	Training of key staff on data quality		Eve Bates	14/05/2018	16/05/2019

		imitigated Risk Impact: 2 - Medium	s of income, poor VfM and poor budgetary control. Unmitigated Risk Likelihood: 2 - Medium			ode: ST24
		tigated Risk Impact: 2 - Medium	Mitigated Risk Likelihood: 1 - Low			
	tified: 01 Apr 2008		Risk Responsible Officer: Martin Flitcroft, Lorraine Montgomery, Amanda F	Pujol, Philip Sh	ears, Tony W	/atson
Mitigation	records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Automated controls included in corporate systems	Automated controls are designed into co in budget.	orporate systems where possible eg: unable to raise order unless sufficient funds	Sue Heath	08/09/2008	15/05/2019
Action ongoing	Bank and Waybill Reconciliations undertaken by Financial Services	Bank and Waybill Reconciliations undert	taken by Financial Services to detect income losses.	Martin Flitcroft	08/09/2008	15/05/2019
Action ongoing	Financial Instructions Awareness and Contract Procedure Rules training		inancial Instructions awareness is included at induction for new staff and thereafter available on intranet. Training on the contract Procedure Rules is offered by the Corporate Procurement Officer.			
Action ongoing	Financial Instructions Format	Financial Instructions are targeted at spethem.	ecific staff. They are set out in sections that correspond to who should read	Sue Heath	08/09/2008	15/05/2019
Action ongoing	Financial Instructions Monitoring	Financial Instructions are monitored and under the Anti Fraud & Corruption Policy	reviewed by Internal Audit and non compliance due to fraud is investigated /.	Sue Heath	08/09/2008	15/05/2019
Action Congoing	FMS Training	FMS training is provided both on-line and	d on a one-to-one basis. Financial Training package for managers is available.	Martin Flitcroft	08/09/2008	15/05/2019
Action ongoing	Internal Audit / Procurement Officer Advice / Waiver Requests	Internal Audit and the Procurement Offic Waivers are reported to the Audit Scrutin	eer provide advice on interpretation and deal with Waiver requests. ny Committee.	Sue Heath	08/09/2008	15/05/2019
Action ongoing	Monthly Management Accounts	Monthly management accounts are com	pleted which should aid detection of irregularities.	Martin Flitcroft	08/09/2008	15/05/2019
Action ongoing	Procurement Officer	where the value is under £50,000 but the compliance with the Contract Procedure	icer (CPO) assists with all procurement exercises over £50,000 and in instances e responsible officer requires support and guidance. The CPO promotes Rules. A Procurement Champions group chaired by the Procurement Officer procurement matters and promote good practice.	Lucy Ford	18/06/2011	15/05/2019
Action ongoing	Trained professional staff responsible for compiling annual accounts		r compiling annual accounts with up to date knowledge of current accounting regular seminars and subscription to advisor	Martin Flitcroft	08/09/2008	15/05/2019

Risk: High	n Levels of Customer Dissat	tisfaction Inadequate customer contact standards and poor customer service leading to increased complaints and loss	of reputation.	Risk	Code: ST25
	ed Status: Medium (4)	Unmitigated Risk Impact: 2 - Medium Unmitigated Risk Likelihood: 2 - Medium			
Mitigated	Status: Low (2)	Mitigated Risk Impact: 2 - Medium Mitigated Risk Likelihood: 1 - Low			
	tified: 01 Apr 2008	Risk Responsible Officer: Tracey Hooper, Kay OFI	herty, Philip Shear	S	
Mitigation	records				
Mitigation Status	Mitigation	Info	Responsible Person	Date Identified	Last Review Date
Action ongoing	Business Efficiency Service Transition (BEST) 2020	The BEST2020 process identifies strengths and weaknesses in performance monitoring, customer satisfaction levels, financial management, technical solutions and demand management. Followed buy an in-depth process review this w ensure that all service areas are fit for purpose and designed around the needs of the customer. This should result in improved satisfaction levels.	Kay OFlaherty	10/03/2016	20/06/2019
Action ongoing	Complaints Review Board	The Complaints Review Board was set up in February 2016. The role of the group is to review and close all complaints a quarterly basis. Complaints will be reviewed to identify any corporate lessons learned that can be shared in order to reduce similar complaints happening in the future. Training is being provided across the council to ensure a consistent approach to handling customer complaints.	on Kay OFlaherty	10/03/2016	20/06/2019
Action ongoing	Customer Comments and Complaints system (Firmstep)	Power BI reporting used to monitor and track complaints to ensure they are dealt with in a timely fashion. Can also be used to look at trends to focus on areas for improvement	Tracey Hooper	01/04/2008	20/06/2019
Action completed	Customer Journey Mapping	Customer Journey Mapping exercises are being carried out as part of ongoing service reviews. Customers are invited work through specific processes with officers from the service and representatives from the BID team. The customers have the opportunity to highlight what their experience was at each stage of the process, this will help to ensure that reviewed processes are designed around customer needs.		10/03/2016	20/06/2019
Action completed	Customer Management	A range of initiatives are being rolled out to ensure effective customer service and a consistent approach to managing customer interaction. The Customer Charter is being re-issued to all staff, customer management training has been rout to all front facing staff and an e-learning module on customer service is now incorporated into the induction process		10/03/2016	20/06/2019
	Customer Services training for reception staff to NVQ IvI 3 or similar	Customer Services training for reception staff to NVQ IvI 3 or similar	Tracey Hooper	01/04/2008	20/06/2019
Action ongoing	Customer Standards & Principles	2019-20 - A new set of standards and principles have been approved by SLT following the recommendations of the Customer Support Function Working Group. Work is in progress to imbed these across the Council. The Customer Chis being reviewed as part of this process	Tracey Hooper	20/06/2019	20/06/2019
Action ongoing	Staff induction training and staff handbook	Staff induction training and staff handbook	Tim Slater	01/04/2008	20/06/2019

Review Note: Following the merger of the frontline Revenue & Benefits team with the Customer Service Team to form the new Customer Support Team staff have been asked to complete a self-assessment form to identify training needs. We are now preparing a training programme to upskill staff where appropriate to ensure the needs of our customers are properly met.

Risk: Poo	or Public Relations Management Poor	reputation due to bad /inadequate/ inaccurate reporting.	F	Risk Code: ST	26
Unmitiga	ted Status: High (6)	Unmitigated Risk Impact: 3 - High Unmitigated Risk Likelihood: 2	- Medium		
	Status: Low (2)	Mitigated Risk Impact: 2 - Medium Mitigated Risk Likelihood: 1 - L			
	tified: 19 Mar 2008	Risk Responsible Officer: Phili	p Shears		
Mitigation					
Mitigation Status	Mitigation	Info	Responsible Person	Date Identified	Last Review Date
Action ongoing	Comms Catch-ups	Regular meeting with Business Leads and Managers to discuss all corporate communication and PR issues surrounding their service. Happen on rolling basis covering each service every 8 weeks approx.	Emma Pearcy	04/11/2011	22/05/2019
Action ongoing	Communications Strategy	Strategy for members and staff to guide corporate communications, dealing with the media and how we communicate with customers. Reviewed and updates, as required and where appropriate, every four years.	Emma Pearcy	29/05/2014	22/05/2019
Action ongoing	Devon Communications Group	Sharing of best practice and intelligence with Devon-wide group of public sector PR professionals, flagging up issues early, ensuring joint-approach to major issues, and improving knowledge of regional issues.	Emma Pearcy	23/09/2010	22/05/2019
Action ongoing	Raising awareness of good communications and reputation management	Continued action to raise awareness of importance of good communications and reputation management at all levels throughout the Authority. This includes being part of CLT(e) as well as specific Task and Finish Groups for major projects.	Emma Pearcy	19/03/2008	22/05/2019
Action ongoing	Regular Media Enquiry Reports	Weekly media enquiry reports to CLT and all councillors detailing press queries and issuing press statements (reactive and proactive) through Vuelio software.	Emma Pearcy	25/11/2013	22/05/2019
Action ongoing	Regular monitoring of management performance through PR PDP's	Regular monitoring of management performance through PDP's of Chief Executive / Service Lead and Media & Comms Manager	Emma Pearcy	19/03/2008	22/05/2019
Action ongoing	Regular Portfolio Holder meetings	Regular PH meetings to monitor progress, quality of press releases and other forms of internal / external communication are usual practice.	Emma Pearcy	19/03/2008	22/05/2019
Action ongoing	Social Media Policy	The development and implementation of a Social Media Policy which sets out the requirements of staff when using social media for corporate purposes. Includes guidelines for use, roles and responsibilities.	Emma Pearcy	29/05/2014	22/05/2019
Action ongoing	Use of strategic issues management involving proactive PR planning	Use of strategic issues management involving proactive PR planning	Emma Pearcy	19/03/2008	22/05/2019
Action ongoing	Vuelio	A software system for logging press releases, queries, responses and interview requests; along with hosting Devonwide contacts, reporting functions and monitoring. Hosted securely offiste (approved for DP and by ICT), it is available from any internet-enabled device with a	Emma Pearcy	04/05/2012	22/05/2019
		browser, and greatly improves TDC press office record-keeping.			
Review N	ote:				

Risk: Majo	or damage to our physical premises and	or working environment Major damage to our physical prem	ises and/or working environment.		Ris	k Code: ST28
Unmitigate	ed Status: Medium (3)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood: 1 -	Low		
Mitigated	Status: Low (2)	Mitigated Risk Impact: 2 - Medium	Mitigated Risk Likelihood: 1 - Lo	W		
Date Ident	ified: 01 Oct 2008		Risk Responsible Officer: David	Eaton, Philip She	ars	
Mitigation	records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Business Continuity Plan	Detailed procedures for the recovery from emergency ir premises	cidents affecting the Councils	David Eaton	15/01/2009	18/06/2019
Action ongoing	Identification of alternative premises	Alternative premises need to be identified should the no unavailable	rmal council facilities be	David Eaton	15/01/2009	18/06/2019
	Risk Analysis of Councils premises and infrastructure	Regular monitoring of maintenance requirements and coair conditioning	ontractors eg fire alarms, generator,	Daron Hand	15/01/2009	18/06/2019
Action ongoing	Salvage Plan	Map of the critical filing and storage to be prioritised for	salvage	David Eaton	15/01/2009	18/06/2019
Review No	ote:					

4

Leadership training programmes for managers and

Regular individual, team & service performance monitoring

Revised management structure to be considered by Council

Staff have the necessary skills for future new models of

Meetings with PH/Leader that identify strengths,

to enable the Council to respond to change

Systems & procedures & policies to deal with

weaknesses, opportunities & threats

underperformance/lack of capability

Action

ongoing Action

ongoing

Action

ongoing

ongoing Action

ongoing

supervisors

by Managers,

service delivery

Risk: Failure to maintain sufficient management capacity & capability Failure to maintain sufficient management capacity & capability to deliver business as usual & implement Risk Code: ST29 change New income generation opportunities and a greater commercial focus leading to increased financial and reputational risk. Changes to services leading to poor service delivery **Unmitigated Status: High (6) Unmitigated Risk Impact: 3 - High** Unmitigated Risk Likelihood: 2 - Medium Mitigated Risk Impact: 3 - High Mitigated Status: Medium (3) Mitigated Risk Likelihood: 1 - Low Date Identified: 19 Mar 2008 Risk Responsible Officer: Philip Shears Mitigation records Mitigation Mitigation Info Responsible Date Last Review Status Person Identified Date Annual business efficiency and service transition reviews BEST 2020 business efficiency and service transition reviews carried out for every Kay OFlaherty 01/09/2015 26/06/2019 ongoing service each year. Continuing Professional Development opportunities Continuing CPD opportunities Tim Slater 19/03/2008 26/06/2019 ongoing Tim Slater 26/06/2019 Action Continuing review of staffing Continuing review of staffing 27/06/2018 ongoing Action Due diligence Financial, legal, governance, organisational due diligence e.g for new investments, Philip Shears 03/05/2017 26/06/2019 governance arrangements ongoing External Officer networking and using the learning from Regular attendance at seminars, conferences, forums, groups etc to keep up to date Philip Shears 05/11/2008 26/06/2019 Action with change and to seek guidance from peers and to use the learning from others ongoing Action Regular internal and external auditing of services provided directly and through Sue Heath 26/06/2019 Internal and external auditing 03/05/2017 ongoing partners/joint ventures

Leadership training programmes for managers and supervisors

failure to perform / achieve targets / ineffectual management

and services by CLTe, PH's and O&S

respond to change

capability

Meetings with PH / Leader that identify strengths, weaknesses, opportunities & threats,

Revised management structure to be considered by Council to enable the Council to

Systems and procedures & policies in place to deal with underperformance / lack of

Staff have the necessary skills for future new models of service delivery

Regular PDP's to measure achievement of objectives/capability, regular review of team Philip Shears

Tim Slater

Philip Shears

Philip Shears

Tim Slater

Tim Slater

19/03/2008

19/03/2008

19/03/2008

27/06/2018

03/05/2017

19/03/2008

26/06/2019

26/06/2019

26/06/2019

26/06/2019

26/06/2019

26/06/2019

Review Note: SW prudential employers are reviewing the job descriptions for management roles. The external auditors report considers due diligence for new investments and governance. Staff policies are currently being reviewed.

Risk: Climate Change - the impact of not reducing our energy use and contribution to CO2 emissions. The impact of not reducing our energy use and contribution to the levels of

Promote and encourage behaviour that reduce our This includes reducing our waste and energy consumption through behavioural changes such David Eaton

Smarter use of mobile technology to reduce our mileage

as switching of lights & PC's, using office recycling schemes

Risk Code: ST31

01/04/2008

16/04/2019

David Eaton

17/04/2019

17/04/2019

Unmitigated Risk Likelihood: 2 - Medium

If unchecked, the Council's energy use will continue to rise unabated and will create:-

• unnecessary financial pressure

Unmitigated Status: Medium (4)

loss of reputation as a community leader

environmental impact

workforce to deliver services

Action

• loss or reduction of the Zero Heroes T10 Council Strategy programme

Using technology to reduce miles travelled by the

Mitigated	Status: Low (2)	Mitigated Risk Impact: 2 - Medium Mitigated R	isk Likelihood: 1 - Low	ihood: 1 - Low			
Date Iden	tified: 01 Apr 2008	Risk Respo	nsible Officer: Tony Watson				
Mitigation	records						
Mitigation Status	Mitigation	Info	Responsible Person	Date Identified	Last Review Date		
Action ongoing	Deliver energy reduction projects to reduce our carbon footprint	Projects to reduce our carbon footprint include a replacement heating system for House.	Forde David Eaton	16/04/2019	17/04/2019		
Action ongoing	Green travel options for staff	A current workplace travel plan	David Eaton	16/04/2019	17/04/2019		
Action ongoing	Increase reliance on renewable energy resources	This includes PV (solar panels) on our buildings	David Eaton	16/04/2019	17/04/2019		
	Monitor all utilities consumption (electricity, gas, water)	Monitor all utilities consumption (electricity, gas, water) ensuring that exceptions consumption are investigated	to the normal David Eaton	01/04/2008	17/04/2019		

Review Note: Reviewed the mitigation and updated. Included links to key projects and PI's that are being delivered via the Zero Heroes Programme of work.

Unmitigated Risk Impact: 2 - Medium

Risk: Non Compliance with Section 106 Agreements and CIL notices Non Compliance with Section 106 Agreements and CIL notices					Risk Code: ST32	
Unmitigate	ed Status: Medium (4)	Unmitigated Risk Impact: 2 - Medium	Unmitigated Risk Likelih	ood: 2 - Medium		
Mitigated	Status: Medium (4)	Mitigated Risk Impact: 2 - Medium	Mitigated Risk Likelihood	d: 2 - Medium		
Date Ident	Date Identified: 09 Mar 2009 Risk Responsible Officer: Philip Shears					
Mitigation	records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Meetings with departments	Ongoing meetings with departments	regarding spending of money	Rosalyn Eastman	21/08/2009	26/06/2019
	Monitor issue of relevant CIL notices and receip monies	t of CIL Monitor issue of relevant CIL notice	s and receipt of CIL monies	amsin Cook	28/03/2017	26/06/2019
	Monitor monies received from time constrained agreements and not yet spent	Spread sheet provided by accounta discuss with departments at meeting		Rosalyn Eastman	21/08/2009	26/06/2019

Review Note: Section 106 monies continue to be monitored closely by planning and accountants with outstanding balances chased and regular contact kept with departments regarding monies to be spent within timescales.

CIL monies are being recorded and monitored via Exacom software but we still have to dual run with the old system as we are awaiting completion of the finance link between Winnix and Exacom so that we can complete the Exacom project. This is expected to take place imminently

This leaves us open to some diminishing risk as the monies involved are significant we need this project to be completed as soon as possible.

Following the introduction of Exacom for CIL monies, we will be transferring S106 monitoring into the system as well to further increase the robustness of our monitoring and collection activities.



Risk: Failure of ICT infrastructure and systems not meeting business needs or not being fit for purpose. The key outcomes of the projects are:

Reduce cost...through economies of scale and reduced duplication of effort

• Reduce risk...by having a larger ICT team with less reliance on key individuals and more time to manage new complex technologies

• Improve capability for change...through creating capacity within the ICT team for transformation effort rather than just "business as usual"

The risks arising following the formation of a new company, Strata Service Solutions Ltd, wholly owned by Teignbridge DC, Exeter CC and East Devon DC to deliver and manage ICT services for all 3 Councils.

Failure of the shared service and failure by Strata to provide the ICT service required.

Unmitigated Status: High (6)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood: 2 - Medium
Mitigated Status: Medium (3)	Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihood: 1 - Low
Date Identified: 18 Dec 2014		Risk Responsible Officer: Amanda Pujol

Risk

Code: ST37

Mitigation	records				
Mitigation Status	Mitigation	Info	Responsible Person	Date Identified	Last Review Date
Action ongoing	Annual auditing	Annual auditing of Strata to be carried out (Devon Audit Partnership)	Sue Heath	18/12/2014	26/06/2019
Action ongoing	Business plan approved annually	The business plan sets out the intended projects and identifies funding	Paul Nicholls	04/07/2017	26/06/2019
Action ongoing	Good communication	Good communication to all staff about the changes, the impact on staff and engagement with staff on their views and needs	Emma Pearcy	18/12/2014	26/06/2019
Action ongoing	ICT Requirements Board review meetings	The corporate intelligent client function will be fulfilled by the ICT Requirements Board (IRB), a sub-group of CMT.	Philip Shears	18/12/2014	26/06/2019
Action ongoir	Monitoring and review of performance	Regular performance monitoring via agreed KPIs and customer satisfaction surveys to include finance. Regular review of performance.	Philip Shears	18/12/2014	26/06/2019
Action ongoing	Robust governance	Robust governance in place in accordance with the Shareholder Agreement for the ICT partnership. The Joint Executive Committee and Joint Scrutiny Committee are meeting bi-monthly, and the Strata Board meets every 4 weeks, with appropriate representation from Teignbridge at all levels	Philip Shears	18/12/2014	26/06/2019
Action needed		Strata Business Continuity Plan in place for each LA to link into. This will ensure continuity in ICT services and an emergency website facility	David Eaton	21/11/2018	26/06/2019

Review Note: During the month of May, there were two significant service outages. One of these outages was on a Saturday and was caused by a failure of the Dell SAN (Storage Area Network) to complete a 'non service impacting' upgrade. Dell are continuing their investigation into the root cause of this incident. The second outage occurred overnight on a normal business working day and was caused by a failure of both air conditioning units in the Civic Centre Data Centre. The issue was investigated by the maintenance provider, which led to changes being made to the way the Air Conditioning sensors are reading the operating temperatures within the Data Centre.

Unique Power Supplies are now being installed which will improve resilience if there is another power outage.

We are still awaiting the final version of the Strata BC Plan and this is due to be available by end of June.

	al Plan - Infrastructure Delivery Delay Infrasents in the Local Plan	tructure delay; risk of not delivering infrastructure as	per the Infrastructure Delivery Plan rec	uired for the successful	delivery of the	Risk Code: ST40
Unmitigat	ted Status: High (6) Unmitig	gated Risk Impact: 2 - Medium	Unmitigated Risk Likelihood: 3 -	High		
Mitigated	Status: Medium (4) Mitigate	ed Risk Impact: 2 - Medium	Mitigated Risk Likelihood: 2 - Mo	edium		
Date Iden	tified: 23 Oct 2012		Risk Responsible Officer: Philip	Shears, Simon Thornl	ley	
Mitigation	n records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Direct Involvement	Direct involvement in design, costing and provision	on of infrastructure as necessary.	Simon Thornley	24/10/2012	15/04/2019
Action ongoing	Funding Streams	Ensure we are fully aware of all potential funding	streams and make appropriate bids.	Simon Thornley	24/10/2012	15/04/2019
Action ongoing	Ongoing Review of Infrastructure Delivery Pla	n Keep Infrastructure Delivery Plan under review.		Simon Thornley	24/10/2012	15/04/2019
Action ongoing	Planning Application Process	Planning application and pre-application process	S.	Rosalyn Eastman	24/10/2012	15/04/2019
Action ongoing	S.106 and Planning Conditions	Section 106 Agreements and Planning Condition	ns to be used.	Rosalyn Eastman	24/10/2012	15/04/2019
Action ongoing	Work with Stakeholders	Work with agencies, developers, land owners an	d other stakeholders.	Simon Thornley	24/10/2012	15/04/2019
Revie w\ N	ote:					

	ate retention, an out of date local plan and	I and developers having different priorities. This could lead under-delivery of the 5 yr supply leading to a possible loss nitigated Risk Impact: 2 - Medium				Code: ST41
	<u> </u>	gated Risk Impact: 2 - Medium	Mitigated Risk Likelihood: 2 - Mediu			
Date Iden	tified: 23 Oct 2012		Risk Responsible Officer: Philip She	ars, Simon Thornley		
Mitigation	records					
Mitigation Status	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
Action ongoing	Achievable Allocations	Ensure allocations are achievable and available in plan	n preparation.	Simon Thornley	24/10/2012	15/04/2019
Action ongoing	Infrastructure Investment	Invest in infrastructure necessary for development via Infrastructure Levy and through bids into other funds.	New Homes Bonus and Community	Simon Thornley	24/10/2012	15/04/2019
Action ongoing	Viablity Evidence	Prepare and take account of appropriate viablity eviden	Prepare and take account of appropriate viablity evidence.		24/10/2012	15/04/2019
Action ongoing	Work with Developers, Landowners and other Stakeholders	Work with developers, landowners and other stakehold	ders to encourage development.	Simon Thornley	24/10/2012	15/04/2019

Unmitigated Status: High (6)

Risk: Failure to deliver the Council Strategy
Failure to deliver the key objectives and outcomes of the Council Strategy due to: no money to deliver, no capacity to deliver, a loss of political willingness, change of political direction – local and national, a change of view and priorities by our partners, loss of key staff and local intelligence, unreliable data leading to poor decisions & direction, a lack of engagement of staff, unforeseen issues outside of our control, , too broad a spread of actions, poor leadership, poor planning, governance and monitoring of performance leading to: missed opportunities, moving out of scope of the project, duplication, lost opportunities due to sole focus on the strategy objectives, a loss of reputation, customer satisfaction and trust, unplanned changes, a lack of co-ordination and direction and the risk of over promising and under delivering.

Unmitigated Risk Impact: 3 - High

Risk Code: ST42

Ommuga	leu Status, High (v)	Olimitigated Kisk impact. 3 - mgm	Likeiiiiood. 2 - Wiediuiii		
Mitigated Status: Medium (3)		Mitigated Risk Impact: 3 - High Mitigated Risk Like	elihood: 1 - Low		
Date Iden	tified: 20 Jul 2016	Officer: Philip Shears			
Mitigatior	records				
Mitigation Status	Mitigation	Info	Responsible Person	Date Identified	Last Review Date
Action ongoing	Budget planning	Financial monitoring of each T10 and inclusion in the annual budget planning cycle	Steve Wotton	20/07/2016	15/05/2019
Action ongoing	Clear links to other Council and partner strategies and plans	Links to other strategies and plans to be monitored for changes/updates and the impact of assessed on the relevant T10 programme	of these Simon Thornley	20/07/2016	15/05/2019
Action ongoing	Communication planning	Regular planned communications and engagement with Members, partners, the public	Emma Pearcy	20/07/2016	15/05/2019
Action ongoing	Ensure adequate staff resources	Adequate staff to be maintained to deliver the key objectives of the strategy	Philip Shears	20/07/2016	15/05/2019
Action ongoing	Overall project and programme oversight	By CLT to, redirect resources, provide direction, avoid duplication and keep the T10 progretack	rammes on Philip Shears	20/07/2016	15/05/2019
Action ongoing	Partnership relationship management	Good relationship maintenance with our partners, through keeping them up to date and in where appropriate with T10 programme projects and PIs	nvolved Philip Shears	20/07/2016	15/05/2019
Action Oongoing	Programme Managers/Business Managers meetings with Portfolio Holders	Regular meetings between Business Leads and Portfolio Holders to keep them up to date progress and any issues arising	e with Philip Shears	20/07/2016	15/05/2019
Action ongoing	Project planning	Project management by the Business Improvement and Development (BID) team. System procedures in place to ensure effective forward planning, evidence gathering, monitoring etc		20/07/2016	15/05/2019
Action ongoing	Regular progress monitoring	Reporting to CLT, Informal Leadership & O&S on progress with the T10 programme outcomplanning for changes to meet new requirements, external challenges/demands etc	omes, Liz Gingell	20/07/2016	15/05/2019
Action ongoing	Review mechanism	To deal with significant changes	Simon Thornley	20/07/2016	15/05/2019

Unmitigated Risk Likelihood: 2 - Medium

Review Note: Progress is reported to the O&S Committee each quarter. A annual meeting of the T10 programme managers in March provided an opportunity to review how the strategy is progressing and to discuss new ideas. A strategy review mechanism is included in the performance management framework and is due in 2019.

Risk: Failure to adopt Local Plans: Greater Exeter Strategic Plan and Teignbridge Local Plan Review Councillors do not agree to the plan's contents, or in the case of the GESP no agreement between councils can be reached.

Risk Code: ST43

The Local Plan Inspector finds the local plan unsound or legally flawed and cannot recommend its adoption

Unmitigated Status: Very High (9)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood: 3 - High
Mitigated Status: Very High (9)	Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihood: 3 - High
Date Identified: 21 Sep 2017		Risk Responsible Officer: Philip Shears, Simon Thornley

wiitigated	Status: Very High (9)	Mitigated Risk Impact: 3 - High Mitigated Risk Likelihood: 3 - High			
Date Iden	tified: 21 Sep 2017	Risk Responsible Officer: Philip Shears	Simon Thornley		
Mitigation	records				
Mitigation Status	Mitigation	Info	Responsible Person	Date Identified	Last Review Date
Action ongoing	Appropriate SEA and HRA	Ensure that appropriate resources are put into SA/SEA and HRA during plan preparation and consider external review before submission	Simon Thornley	21/09/2017	03/06/2019
Action ongoing	Conformity with GESP	Ensure that work on the Teignbridge Local Plan review continues to take full account of emerging GESP strategy, and vice versa	Simon Thornley	15/11/2017	03/06/2019
Action ongoing	Consultation	Prepare consultation strategies for local plans and review before each proposed consultation stage, checking against SCI and legal requirements	Simon Thornley	21/09/2017	03/06/2019
Action ongoing	Critical review of plans and policies	Ensure that plans and policies are reviewed, internally and (where considered necessary) externally before publication and submission	Simon Thornley	21/09/2017	03/06/2019
Action ongoir	Duty to cooperate agreements	Ensure duty to cooperate statements are prepared and agreed with all relevant outside bodies at an appropriate level before plans are submitted	Simon Thornley	21/09/2017	03/06/2019
Action ongoing	Duty to cooperate processes	Setting up, maintaining and/or taking a full part in duty to cooperate discussions and maintaining appropriate records of discussions and agreements, including in particular the Devon DTC protocol	Simon Thornley	21/09/2017	03/06/2019
Action ongoing	Evidence	Preparing and maintaining a proportionate evidence base during the preparation of local plans. Critically assess the need to update and reflect evidence before submitting a plan.	Simon Thornley	21/09/2017	03/06/2019
Action ongoing	National Planning Policy	Maintaining an up to date knowledge of national planning policies (NPPF, PPG, ministerial statements and white papers in particular)	Simon Thornley	21/09/2017	03/06/2019
Action needed	Political support	Ensure information to and involvement of leading and other councillors as appropriate during plan preparation	Simon Thornley	21/09/2017	03/06/2019
Action ongoing	Qualified staff	Employing sufficient numbers of suitably qualified and experienced staff within the spatial planning team	Simon Thornley	21/09/2017	03/06/2019
Action ongoing	Review other plans	Reviewing the progress of other local authorities' plans and inspector's comments/questions and reports to pick up on latest trends and policy interpretations	Simon Thornley	21/09/2017	03/06/2019
Action ongoing	Training	Ensuring that appropriate Continual Professional Development and other training is undertaken by spatial planning team members	Simon Thornley	21/09/2017	03/06/2019

Review Note: There are uncertainties over the preparation of GESP specifically, with new administrations in a number of authorities. These need to be resolved before progress can be made, leading to timetable and other concerns. Mitigation in the form of briefing and involvement of new councillors and council leaderships will be necessary in short order. GESP itself will have an impact on the Teignbridge Local Plan review, and consideration of this will be required, which may include a further local development scheme review.

Risk: Flood risk management A lack of appropriate flood risk management of Council land and/or property.

A lack of management of flood risk associated with new development through increased surface water runoff or development in flood risk areas through the lack of planning guidance.

A lack of working with partners such as the Environment Agency, Devon County Council and other Risk Management Authorities.

Unmitigated Status: High (6)	Unmitigated Risk Impact: 3 - High	Unmitigated Risk Likelihood: 2 - Medium
Mitigated Status: Medium (3)	Mitigated Risk Impact: 3 - High	Mitigated Risk Likelihood: 1 - Low

Date Identified: 15 Aug 2017 Risk Responsible Officer: Tony Watson

Mitigation	records				
Mitigation Status	Mitigation	Info	Responsible Person	Date Identified	Last Review Date
Action ongoing	- Local Flood Risk Management Strategy	Work in accordance to the principals set out in the Lead Local Flood Authority's Local Flood Risk Management Strategy for the management of flood risk within the district.	Richard Rainbow	05/11/2018	10/06/2019
Action ongoing	Coastal flood and Erosion works	Promote Coastal Flood and Erosion works within the district including improvement works on our own assets	Richard Rainbow	15/08/2017	10/06/2019
Action ongoing	Flood risk management schemes	Promote flood risk management schemes within the district together with improvement works to our own assets	Richard Rainbow	15/08/2017	10/06/2019
Action ongoing	Planning guidance and application review	Planning application review and associated provision of guidance to the planning authority with regard to flood risk management, surface water disposal and coastal erosion	Rosalyn Eastman	15/08/2017	10/06/2019
	Regular meetings with key partners	Regular meetings with key partners including the Environment Agency, Devon County Council and other Risk Management Authorities	Richard Rainbow	15/08/2017	10/06/2019

Risk Code: ST44

Risk

Code: ST45

Review Note: Management of Flood Risk within the district together with our response and proactive measures is continually reviewed by the Drainage and Coastal team and funding opportunities are sought from various sources to proactively deal with any issues which come to light.

Risk: Flood risk resilience A lack of flood risk management plans including supporting of Community Plans and Emergency Flood Response plans.

A lack of flood risk resilience associated with new development through increased surface water runoff or inappropriate development in flood risk areas through the lack of planning

A lack of working with partners such as the Environment Agency, Devon County Council and other Risk Management Authority.

Unmitigated Risk Impact: 3 - High **Unmitigated Status: High (6)** Unmitigated Risk Likelihood: 2 - Medium Mitigated Risk Impact: 3 - High Mitigated Status: High (6) Mitigated Risk Likelihood: 2 - Medium Risk Responsible Officer: Tony Watson

Date Identified: 05 Nov 2018

S

Mitigation	Mitigation records						
Mitigation Status	Mitigation	Info	Responsible Person	Date Identified	Last Review Date		
	Local Flood Risk Management Strategy	Work in accordance to the principals set out in the Lead Local Flood Authority's Local Flood Risk Management Strategy for the management of flood risk within the district associated with all sources	Richard Rainbow	05/11/2018	10/06/2019		
Action ongoing	Local Resilience Forum	Work in accordance with the Multi-Agency Flood Plan and continued development of TDC's Flooding Response Plan	Richard Rainbow	05/11/2018	10/06/2019		
Action ongoing	Planning Guidance and Review	Planning application review and associated provision of guidance to the planning authority with regard to flood risk management, surface water disposal and coastal erosion	Rosalyn Eastman	05/11/2018	10/06/2019		
	Promotion of Flood Resilience schemes	Promotion of community flood plans and individual property protection schemes. Work with partner organisations to promote an increase in awareness of flood risk and promote resilience measures	Richard Rainbow	05/11/2018	10/06/2019		

Review Note: Management of Flood Risk Resilience and its emergency response is continually reviewed jointly by the Drainage and Coastal team and the Emergency Planning Officer. Where appropriate resilience projects and funding opportunities are sought from various sources to proactively increase resilience in the district.

		ading to a cyber attack Failure to identify, assess and put in place ervice delivery. This could lead to financial loss, service delivery fa				Risk Code: ST46
reputation	ad Chahuar Mama Himb (O)	Hamitimated Disk Immedia 2 - High	Hamilianted Diele Likeli	haad O Hinh		
	ed Status: Very High (9) Status: Medium (4)	Unmitigated Risk Impact: 3 - High Mitigated Risk Impact: 2 - Medium	Unmitigated Risk Likeli Mitigated Risk Likeliho			
	tified: 14 Nov 2018	willigated Risk impact: 2 - Medium	Risk Responsible Offic		<u> </u>	
Mitigation			Kisk Kesponsible Offic	er. Amanua Puju	<i>1</i> 1	
	Mitigation	Info		Responsible Person	Date Identified	Last Review Date
	Cyber security awareness training	All staff to complete e-learning/awareness training on cyber securit	у	Tim Slater	14/11/2018	24/06/2019
	Cyber security risk management regime	Make sure that the 10 Steps to cyber security are followed		Laurence Whitlock	14/11/2018	24/06/2019
	ICT Business Continuity Plan	The ICT Business Continuity plan includes cyber risk together with	our response to any cyber attacks	David Eaton	14/11/2018	24/06/2019
	ICT cyber security lead	ICT cyber security lead for Teignbridge DC		Sue Heath	14/11/2018	24/06/2019
Action ongoing	Incident response policy	There is an incident response policy that covers any security risks/information, that defines the procedure to record these	threats or incidents to premises and	Sue Heath	14/11/2018	24/06/2019
Action ongoing	Information governance group	An Information Governance Group that has quarterly meetings incli reports to SLT on cyber risk	usive of a discussion on cyber risk and	Sue Heath	14/11/2018	24/06/2019
	Internal audit review	Testing and assurance on cyber risk is included in Strata's Internal		Laurence Whitlock	14/11/2018	24/06/2019
Action	Mobile device/agile working policy	Mobile device/agile working policy that includes guidance on working the use of own devices/pc's/laptops	ng outside of our managed offices areas and	Sue Heath	14/11/2018	24/06/2019
Action ongoing	Strata Monthly Report	An overview of threats and incidents is included in the Stata month		Laurence Whitlock	14/11/2018	24/06/2019
Action ongoing	User awareness	Regular messages and updates on cyber risk to staff. Clearly displa	ayed posters and messages in workplaces	Jane Sanders	14/11/2018	24/06/2019

Review Note: The cyber security awareness training is pending LGA funding. In the meantime we are considering a cheaper alternative. Messaging and awareness continues to be raised through newsletters and posters.

The mobile device / agile working guidance will be picked up in the Acceptable Use policy which is to be finalised and launched this month.

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TEIGNBRIDGE DISTRICT COUNCIL

AUDIT SCRUTINY COMMITTEE

CHAIRMAN: Cllr Sally Morgan

DATE: 17 July 2019

REPORT OF: Audit and Information Governance Manager

SUBJECT: INTERNAL AUDIT PLAN 2019-2020

PARTI

RECOMMENDATION

To approve the Internal Audit Plan and Charter.

1. PURPOSE

1.1 This report presents the planned work of internal audit work for 2019-20, and the internal audit terms of reference, also known as the Charter, for members' approval.

2. BACKGROUND

- 2.1 The Council is required under the Accounts and Audit Regulations (2015), to maintain an adequate and effective internal audit service which evaluates the effectiveness of the Council's risk management, control and governance processes.
- 2.2 Audit work must be carried out in conformance with the Public Sector Internal Audit Standards which require the preparation of an audit plan to determine the priorities of the internal audit activity. The plan should outline the assignments to be carried out and the resources required.
- 2.3 The minimal level of audit is not prescribed but it must be considered sufficient to give an annual evidence based assurance opinion at the end of the year.

3. AUDIT PLAN 2018-2019

3.1 This year's proposed plan is attached at **Appendix A.**

TEIGNBRIDGE DISTRICT COUNCIL

- 3.2 The following factors are taken into account in planning this year's audit work:
 - the Teignbridge Ten projects and strategic priorities;
 - the contents of Risk Registers;
 - value or volume of transactions and complexity of systems or functions;
 - vulnerability or past susceptibility to fraud or error;
 - time since last audited and results of any other reviews;
 - knowledge gained through our audits and from corporate work e.g. BEST2020;
 - changes to systems either planned or known to have occurred;
 - local, national and legislative issues;
 - views of the senior management and statutory officers
- 3.3 The Plan must be viewed as a working document, subject to in-year changes as necessary given the challenges Local Authorities are currently exposed to.
- 3.4 **Resources** the Plan will be delivered by a mixture of in house resource (Auditor and Audit and Information Governance Manager) supplemented by a small budget for external resource. This provides a total of approximately 280 net days. Where assurance has been provided by other bodies, we will make use of this where appropriate to do so.

4. AUDIT CHARTER

- 4.1 Internal Audit's purpose, authority and responsibility must be formally defined to give it the status to carry out its work independently and objectively.
- 4.2 This is covered by a **Charter** attached at **Appendix B** which members are asked to review and approve.

5. RECOMMENDATION

5.1 Members are recommended to **approve** the **Audit Plan** and **Charter.**

Sue Heath - Audit Manager

Wards affected	N/A
Contact for any more information	Sue Heath – Audit Manager – 01626 215258
Background Papers (For Part I reports only)	Public Sector Internal Audit Standards
	Council Strategy and Risk Registers
Key Decision	N
In Audit Scrutiny Work Programme	Υ

2019/20



SYSTEM OR ACTIVITY TO BE AUDITED

TEIGNBRIDGE DISTRICT COUNCIL

INTERNAL AUDIT - ANNUAL AUDIT PLAN 2019-2020

"Internal auditing is an independent, objective, assurance activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes." *Public Sector Internal Audit Standards*.

Teignbridge (*see project key below)

NB: Audit Plans should be considered flexible and adjustable, to address emerging risks, organisational changes, and revised priorities during the year.

	P	10 roject		Days
(5	Financial Systems Assurance			
59	(Core systems are those areas that are fundamental to providing assurance for internal financial control)	g controls		
	BENEFITS & COUNCIL TAX SUPPORT	1/6/9	Ensures accurate and timely payment of Housing Benefit and Council Tax Support.	10
	COUNCIL TAX	All	Calculates, collects and accounts for Council Tax including recovery procedures for non-payment.	10
	PAYROLL	All	Ensures prompt and accurate payment of employees. (The new Midland iTrent Payroll system will go live during this audit year.)	10
	NDR (Business Rates)	All	Calculates, collects and accounts for Non-Domestic Rates including recovery procedures for non-payment. A counter fraud element will be inlcuded to help ensure maximum business rates income is collected.	10
	DEBTORS	All	Invoices, accounts for, and recovers debts due to the authority.	10

	SYSTEM OR ACTIVITY TO BE AUDITED	Teignbridge 10 Project	(*see project key below)	2019/20 Days
	Financial Systems Assurance (Cont.)			
	Timanetal dystems Assurance (dont.)			
	MAIN ACCOUNTING & BUDGETARY CONTROL	All	Accounts for the Council's activities and ensures budgetary requirements are met. Verification of approved budget to the Financial Management System. Good Financial Management and Budgetary control are essential as funding reductions continue.	10
	Other Systems Assurance			
	PARTNERSHIPS AND FUNDING AGREEMENTS	All	To provide assurance that good governance arrangements are in place for partnerships and other funding arrangements so that expected outcomes are being achieved through appropriate monitoring of financial, performance, and risk management.	10
	HOUSING - EMPTY HOMES	1/5	Review of the arrangements in place to reduce numbers of empty homes.	10
<u>ာ</u>	HOUSING - DISABLED FACILITY GRANTS	1/5	Review and testing of the systems for administering and accounting for housing grants.	15
	HOUSING - FINANCE	All	Review and test collection of income and debt recovery for all housing related finance (emergency accommodation, deposit and rental guarantees etc.).	10
	HOUSING - RETURNS (LAHS & LADR)	All	Testing of the accuracy, and certification of mandatory housing data returns.	5
	CEMETERIES	All	Review and testing of the controls in place to manage cemetery risks taking account of the new Epitath system being implemented.	10
	ECOFLEX SCHEME	1/4/5/9	Probity check on grants allocated and eligiblity checks for this energy efficiency scheme to ensure it is operating as intended.	10
	COMMUNITY INFRASTRUCTURE LEVY (CIL)	1/3/4/6/8	Testing of CIL calculation and collection systems to ensure accurate billing and collection and application of exemptions.	10

SYSTEM OR ACTIVITY TO BE AUDITED	Teignbridge 10 Project	(*see project key below)	2019/20 Days
Risk Based Auditing			
RISK REGISTER	All	This project covers risk management and sample testing the mitigations within the Council's Risk Registers. The processes in place to manage risks (mitigations) will be verified to ensure that they are operating in practice and provide assurance that key risks are being managed.	10
Information Management and ICT Systems			
INFORMATION GOVERNACE & SECURITY	All	Information Governance including the Data Protection Officer role is now combined with Internal Audit. There is therefore a rolling programnme of information governance work being undertaken by the team. In order to provide independent assurance, a self assessment will be undertaken this year and this will be validated independently by third party.	10
ICT	All	Teignbridge's ICT services are delivered by Strata and audited by the Devon Audit Partnership (DAP). An allocation of time has been included to pick up any risks we may need to assure that are not covered by DAP.	5
Fraud / Special Investigations / Other Requested Work			
COUNTER FRAUD	All	Fraud risk assessment; Anti Fraud & Corruption Strategy; Whistleblowing Policy; Anti Money Laundering Policy.	10
CONTINGENCY	All	Contingency for fraud, irregularity and other investigative work or ad hoc requests for projects.	20
Governance Work			
CORPORATE GOVERNANCE REVIEW	All	Review and assessment of governance arrangements. Collating supporting evidence to support the Annual Governance Statement. Involves a one-to-one interview with all Business Managers and consultation with other stakeholders.	10

Internal Audit - Annual Plan 2019-2020

SYSTEM OR ACTIVITY TO BE AUDITED	Teignbridge 10 Project	(*see project key below)	2019/20 Days
Advice / Consultancy			
Advisor Consultancy			
ADVICE AND CONSULTANCY	All	Allowance for time spent on providing general advice to officers, management and members.	20
Other (Non Audit) Work			
ANNUAL GOVERNANCE STATEMENT (AGS)	All	Co-ordinate production of the AGS following Governance Review above.	5
FINANCIAL INSTRUCTIONS and CONTRACT PROCEDURE RULES	All	Ongoing review and updating. Provision of advice to officers and allowance of time for dealing with Waivers and monitoring reports to Audit Scrutiny.	10
NATIONAL FRAUD INITIATIVE (NFI) DATA MATCHING	All	The Audit and Information Governance Manager performs the NFI Key Contact Role and co-ordinates the investigation of matches.	10
Audit Management & Administration			
AUDIT ADMINISTRATION and KNOWLEDGE	-	General admin: time recording / orders / invoices / team meetings / corporate meetings / one to one meetings / training etc.	20
AUDIT FOLLOW UP	-	Involves ensuring previously agreed actions have been implemented.	10
TOTAL RESOURCES REQUIRED 2019-2020			280
Resource Available (days):			
Internal: Auditor and Audit and Information Governance	e Manager:		200
External Resource:			80
TOTAL RESOURCES AVAILABLE 2019-2020			280

Project

KEY TO THE COUNCIL'S PROJECTS

- Project 1: A ROOF OVER OUR HEADS provide more, better and affordable homes
- **Project 2: CLEAN SCENE** keep the district clean
- Project 3: GOING TO TOWN invest in town centres
- Project 4: GREAT PLACES TO LIVE AND WORK provide well designed, quality neighbourhoods
- Project 5: HEALTH AT THE HEART improve health and wellbeing
- Project 6: INVESTING IN PROSPERITY create jobs and wealth
- Project 7: MOVING UP A GEAR improve travel options
- Project 8: OUT AND ABOUT AND ACTIVE provide opportunities for healthy active lifestyles
- O Project 9: STRONG COMMUNITIES liaise with, help and support our communities
 - Project 10: ZERO HEROES to reduce waste and carbon emissions

"All": This encompasses the "What else we will do" elements of the Strategy which include: effective spending; increased income; be customer focussed; work in new smarter ways; continuously improve efficiency; deliver services fairly.

Sue Heath Audit Manager June 2019

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INTERNAL AUDIT CHARTER 2019-2020

INTRODUCTION

This document describes the purpose, authority, and principle responsibilities of the Council's Internal Audit Section.

DEFINITION. FUNCTION and MISSION OF INTERNAL AUDIT

Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve the Council's operations. It helps the Council accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

Internal Audit will advise management where internal control systems can be improved, and seek to promote compliance with corporate policies and procedures, and accomplishment of corporate priorities, through its systematic review of the Council's activities. It aims to enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.

AUTHORITY, INDEPENDENCE, and OBJECTIVITY

Internal Audit's statutory authority is derived from Section 151 of the Local Government Act 1972 and the Accounts and Audit Regulations which state that:

"a relevant body must undertake an adequate and effective internal audit of its accounting records and of its system of internal control in accordance with the proper practices in relation to internal control...".

To be effective, Internal Audit must remain sufficiently independent of the activities it audits to enable auditors to perform their duties in a manner which facilitates impartial and professional judgements and recommendations. Internal Auditors should ideally have no operational responsibilities. Where this is unavoidable, assurance over such functions will be overseen by a third party outside the internal audit activity.

Internal Audit forms part of the Council's Corporate Services. The Audit Manager reports organisationally to the Head of Corporate Services, and functionally to the Audit Scrutiny Committee (who act as "the Board" for the purposes of the Public Sector Audit Standards) on audit matters. Close liaison with the Section 151 Officer (responsible for financial affairs) is maintained to ensure his Section151 duties are fulfilled, and the Audit Manager has direct access to the Managing Director as and when required.

Internal Audit staff have unrestricted access at any time to such records, assets, personnel and premises, including those of partner organisations, as necessary for the proper fulfilment of their responsibilities. Any officer, or member of the Council shall, if required, make available such documents or records required for audit purposes and shall supply the auditor with such information and explanation as considered necessary for that purpose.

This statutory role and rights of access are recognised and endorsed within the Council's Financial Instructions (Constitution) and Internal Audit Manual.

STANDARDS & PROFESSIONALISM

There is a statutory requirement for Internal Audit to work in accordance with 'proper audit practices'. Proper practice is defined by the Public Sector Internal Audit Standards which are used to guide audit activity. Team members are also governed by the Code of Ethics of their professional body as well as the Council's internal Code of Conduct.

For an internal audit function to be effective, the following core principles must be present:

- Integrity
- Competence and due professional care
- Is objective and free from undue influence (independent)
- Aligns with strategies, objectives and risks of the organisation
- Demonstrates quality and continuous improvement
- Effective communication
- Promotes organisational improvement
- Is insightful, proactive and future focussed

SCOPE AND RESPONSIBILITIES

Heads of Service and Service Managers are responsible for ensuring that internal control arrangements are sufficient to address the risks facing their services.

The scope of Internal Audit allows for unrestricted coverage of the control environment comprising risk management and corporate governance. This means that all of the Council's operations, resources, services and responsibilities are included. Where the scope of Internal Audit's work extends to services provided through partnership, an assessment will be made as to whether Internal Audit staff conduct assurance work themselves, or rely on assurance provided by others.

Internal Audit activity includes:

- Reviewing, appraising and reporting on the soundness and adequacy of systems of internal control, whether operations are being carried out as planned, and corporate priorities being met
- Reviewing, appraising and reporting on the reliability and integrity of financial and management information, including data quality and performance measurement
- Assessing and reporting on the extent to which assets and interests are accounted for and safeguarded from loss
- Supporting and encouraging improvements in the efficiency, economy and effectiveness of services
- Provision of advice on all aspects of risk and control, including interpretation of the Council's Financial Instructions and Contract Procedure Rules
- Advising on control and risk implications of enhancements to existing/new systems
- Promoting and encouraging best practice in the Council's risk management and governance processes through review and appraisal of arrangements
- Working in partnership with other bodies to secure robust internal control that protects the Council's interests
- Co-ordinating with the work of external auditors and other review functions
- Investigating frauds and irregularities where necessary and undertaking other special investigations where appropriate

INTERNAL AUDIT MANAGEMENT

The Audit and Information Governance Manager is responsible for:

- Managing the Internal Audit service, determining the scope and methods of audit activity
- Ensuring that Internal Audit staff operate within current auditing standards and ethical standards of the professional bodies of which internal auditors are members
- Ensuring that Internal Audit staff are impartial, unbiased, and avoid conflicts of interest
- Developing operational Audit Plans based on an assessment of risk and in consultation with senior management; submission of Audit Plans to the Audit Scrutiny Committee for approval; and implementation thereafter
- Taking account of the adequacy and outcomes of risk management, performance management and other assurance processes when compiling Audit Plans
- Maintaining a suitably resourced, professional audit staff with sufficient knowledge, skills and experience to carry out Audit Plans
- Liaison with the Council's external auditors to achieve co-ordination of work where possible both with external audit and other review agencies where appropriate
- Reporting to the Strategic Leadership Team (i.e. "senior management" as defined by the Public Sector Internal Audit Standards) and the Audit Scrutiny Committee on the results of audit activities, and the effectiveness of the actions taken by management to implement agreed recommendations
- Reviewing the Council's risk management and governance arrangements
- Providing the Strategic Leadership Team and the Audit Scrutiny Committee with an annual assurance statement on the adequacy of the Council's internal control systems

FRAUD AND CORRUPTION

Managing the risk of fraud and corruption is the responsibility of management. Internal Audit procedures alone, cannot guarantee that fraud and corruption will be detected. Internal Audit does not have responsibility for the prevention or detection of fraud and corruption. Internal Auditors will, however, be alert in all their work to the risks and exposures that could provide opportunity for fraud or corruption. They will investigate suspected frauds and irregularities where appropriate, and will act upon reports received via the Council's Whistleblowing Policy in accordance with its Anti Fraud, Theft and Corruption Strategy.

The Audit Manager must be informed of all suspected or detected fraud, corruption or improprieties so they may be considered in terms of the adequacy of the relevant internal controls, and be evaluated for the annual opinion on the control environment.

AUDIT REPORTING

Audit assignments will be the subject of formal reports in order to communicate the findings of the audit and encourage management to take prompt mitigating action if risks have been identified.

Reports will be issued in draft form to the managers responsible for the area under review for agreement of the factual accuracy of findings. On receipt of management comments, including acceptance or rejection of recommendations, reports will be finalised with agreed action dates where applicable. Each report will include an opinion on the adequacy of the control environment governing the activity that has been audited. Reports with Fair or Poor assurance ratings will be reviewed by the Strategic Leadership Team to ensure actions to address risks are adequate.

Full audit reports will be provided to members of the Audit Scrutiny Committee and a summary of all audit work provided quarterly. If the failure to implement an audit recommendation is deemed to present the Council with an unacceptable risk, the matter will be reported to the Audit Scrutiny Committee and the manager concerned may be required to give an explanation.

At the end of each audit year, the Audit Manager will deliver an annual assurance opinion and report which can be used to inform the Council's Annual Governance Statement. The annual opinion will conclude on the overall adequacy of the framework of governance, risk and control, and will summarise the work that supports the opinion.

LOCAL AND NATIONAL ISSUES AND RISKS

The annual audit planning process ensures that new or emerging risks are considered. The Audit Manager consults the Corporate Management Team on the issues and risks inherent to their service areas and identify any potential areas of concern for audit review. Risk registers are examined to ensure high scoring risks are taken into account. The audit 'universe' (list of auditable activities) and resulting plan are further informed by the review of Council minutes; corporate knowledge, and issues arising from past audits, BEST2020 service reviews.

The Audit Plan is approved by the Audit Scrutiny Committee, however, it is recognised that this is flexible and can be revised should unforeseen issues arise throughout the year.

Individual audit projects within the plan focus on the control systems for key risks within each area. Both systems based and risk based approaches may be used. Mitigating actions from the operational risk register may also be tested to assess how well risks are being managed.

Awareness of national issues is maintained through membership of and subscription to professional bodies such as the Chartered Institute of Internal Auditors and the Chartered Institute of Public Finance Accountants' advisory services; Better Governance Forum; liaison with external audit; and with colleagues in other local authorities.

In 2016 the Council launched a 10 year Strategy. Project Managers are assigned to lead on 10 key themes. The Audit Plan indicates which strategic project each audit contributes to.

PROVISION OF THE SERVICE

The service is provided by an in-house Audit and Information Governance Manager and Auditor. This is supplemented by a small budget to buy in external resource where needed. Some of the internal audit time is, however, directed to corporate work such as working groups and service reviews.

The audit team deliver audit work in accordance with the Public Sector Internal Audit Standards.

Service delivery is monitored through a quality assurance and improvement programme which includes key performance indicators such as achievement of the Audit Plan, customer feedback, assessment against the Public Sector Internal Audit Standards, and a value for money indicator which can be used to benchmark the cost of the service if required.

Internal Audit Charter Revision 6: June 2019 The current level of resources (outlined above) is considered sufficient to deliver this year's Plan. Additional requests for work will be controlled to ensure they are kept within available contingency allowance, and do not compromise assurance work.

Auditors are encouraged to develop their skills and knowledge through undertaking various training programmes. The Council recognises both CIPFA and the Chartered Institute of Internal Auditors (CIIA) qualification for internal auditing. Both internal audit staff members have CIIA qualifications.

Training needs are assessed on an ongoing basis and are formally reviewed during annual staff Personal Development and Performance meetings. The aim is to ensure auditors are operating at a level which fulfils client requirements and meets professional standards.

If the necessary skills for a particular assignment were not available in house, the additional resources budget provides flexibility to source these externally, as required.



TEIGNBRIDGE DISTRICT COUNCIL AUDIT SCRUTINY COMMITTEE

AUDIT SCRUTINY COMMITTEE

CHAIRMAN: Cllr Sally Morgan

DATE: 17 July 2019

REPORT OF: Coastal Officer

SUBJECT: TEIGN ESTUARY AND COASTAL PARTNERSHIP -

DELIVERY PLAN

PARTI

RECOMMENDATION

To note the report.

1. PURPOSE

1.1 To advise members of recent progress of the requested development of a Delivery Plan for the Teign Estuary and Coastal Partnership (TECP).

2. BACKGROUND

- 2.1 The TECP is a multi-agency Partnership led and hosted by the Council which undertakes and offers wider guidance for Integrated Coastal Management within the District, together with a similar approach to other connected initiatives such as the Stover Canal and Templer Way, water quality, environmental enhancement and coastal economic development. Contributory Partners include; Teignmouth Harbour Commission, Associated British Ports, Environment Agency, Devon County Council, and the Town Councils of Dawlish, Teignmouth, Kingsteignton and Newton Abbot. These Partners form the TECP Steering Group together with an independent Stakeholder Representative.
- 2.2 As previously reported the TECP had undertaken a Strategic Priority determining process (public consultation, online and internal) to guide the work of the Partnership over the period 2019-24. The results of this process were considered by the TECP Steering Group in June 2019.
- 2.3 The Audit and Scrutiny Committee had requested that TECP's Strategic Priorities be accompanied by an Annual Action Plan which also referenced the Council's Strategy and Super-Ten projects. A draft format had been presented to the Committee and this was also adopted as an Annual Delivery Plan by the TECP Steering Group in June.

TEIGNBRIDGE DISTRICT COUNCIL AUDIT SCRUTINY COMMITTEE

3. TECP Delivery Plan 2019-2020

- 3.1 The agreed format of the TECP Delivery Plan offers a concise rolling summary of Partnership activities to both report project progress against identified Strategic Priorities, and to encourage engagement with professional and public stakeholders. Given the wide range of potential Coastal Management activities the Partnership resolved to maintain the ability respond to events, opportunities, external funding streams and resource availability as these arise, with priorities and rolling updates being directed by the quarterly meetings of the Steering Group. A SMART methodology will be applied to the monitoring of the Delivery Plan, through the production of an end of financial year update.
- 3.2 The TECP Delivery Plan and end of year update are being made publically accessible through an updated suite of information on the Partnership webpages.
- 3.3 The TECP Delivery Plan is presented as Appendix A.

4. CONCLUSION AND RECOMMENDATION

4.1 Members are recommended to note the report.

Graeme Smith - Coastal Officer

Wards affected	All Coastal and Estuarine Wards
Contact for any more information	Graeme Smith – Coastal Officer - 01626 215748
Background Papers (For Part I reports only)	
Key Decision	N
In Forward Plan	N
In Audit Scrutiny Work Programme	N