

CORPORATE RISK REGISTER – SUMMARY

Key		
Risk exposure score	Risk description	Colour code / score
16 – 25	High /Very High	Red
11 – 15	Medium	Amber
0 – 10	Very Low / Low NB: Removed from Register after review by Fire Authority	Green

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Likelihood	5					
	4					
	3					
	2					
	1					
		1	2	3	4	5
	Impact					

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Ref	Risk Description	current risk rating - red/amber/green	Current score			Target Score			Direction of Travel since April 2015
			Likelihood	Impact	Total	Likelihood	Impact	Total	
06g/h	Failure to comply with and/or properly manage the Authority's legal and moral responsibilities for the health, safety and welfare of its employees under all relevant Health and Safety legislation and guidance, including the Corporate Manslaughter and Corporate Homicide Act 2007. This risk includes failure to have appropriate policies and procedures in place to manage driving and vehicle related risks.	Green	2	3	6	2	3	6	↓
<p>Risk Owner – Director of Professional Services</p> <p>The risk is about the ability of the Service to ensure effective management of the health, safety and welfare of all employees including road related risks.</p>									

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Key controls in place

All control measures in place to mitigate this risk have been reviewed to give a more accurate interpretation of the risk. The review has resulted in a decrease in the score from amber 15 to green 6. The proposal is to remove this risk from the live Corporate Risk Register and place it on the green list where it will still be monitored.

The Health and Safety Committee is in place to oversee strategic decision making relating to Health and Safety. The Health and Safety Committee meet quarterly and monitor the Health and Safety Policy and other Safety, Health, Environment and Fire issues.

Reports are issued to SMT and Standards and Governance Committee regularly which details the latest statistical figures and developments within Health and Safety.

Road risk issues are overseen by the Road Risk Management Group which reports to the Health and Safety Committee. A Drivers Handbook has been issued to staff which incorporates all HFRS driving policies and other legislation and guidance. Driver licence checks are carried out for all drivers and there is a comprehensive driver training programme in place to ensure response drivers are suitably qualified and that they maintain their qualifications.

Summary of proposed controls

Current developments include the investigation of a Health and Safety Management System and an Accident Management System to record safety events. These systems will provide a managing and monitoring facility in one single depository. The Health and Safety Department are also developing the Health and Safety Maintenance of Competence Scheme for operational staff and Health and Safety training for green book staff.

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Ref	Risk Description	current risk rating - red/amber/green	Current score			Target Score			Direction of Travel since April 2015
09b	Failure to maintain operational response at specific Retained Duty System (RDS) fire stations	Red	4	4	16	1	4	4	➔
<p>Risk owner – Area Manager Service Delivery</p> <p>This risk is concerned with ensuring that we have the appropriate level of staffing and cover to ensure the effective running of the retained duty system (RDS).</p> <p>Key controls in place</p> <p>The introduction of new contracts, availability and post/role share opportunities provides greater flexibility for working and cover for Retained staff. A new centralised training planner has been developed and introduced to help reduce the workload placed on RDS Manager’s. Several drill nights have been rescheduled to maximise the training opportunities across the county for Retained staff and the conducting of standard tests of equipment has been moved out of drill nights to maximise the amount of training time available.</p>									

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Summary of proposed controls

This risk remains unchanged at red 16. The majority of the proposed control measures relate to the Risk Review project and can be addressed directly by Service Delivery.

The proposal is to remove this risk from the Corporate Risk Register and move it onto the Service Delivery Risk Register where it will be managed and monitored.

Ref	Risk Description	current risk rating - red/amber/green	Current score			Target Score			Direction of Travel since April 2015
11	Failure to protect vulnerable members of the community and our staff in the course of our service delivery, where there is contact between them.	Amber	3	5	15	1	5	5	↑

Risk owners – Director of Service Delivery

This risk relates to ensuring we have safeguarded our workforce and the community against risks they are faced with as a result of carrying out our services.

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Key controls in place

All staff whose primary role involves working with youths and vulnerable groups have had the appropriate Disclosure and Barring Service (DBS) checks. All other staff, who at some point may come into contact with youths and vulnerable people, have had the basic Criminal Records Bureau (CRB) checks. The checks include staff involved with safeguarding, schools education, and our Firesetters initiative.

Children and Young People policies and procedures have been developed and implemented to ensure youth engagement initiatives are undertaken to comply with best practice and mitigate risk.

The Service is represented on all Adult and Children Safeguarding Boards.

Staff working with vulnerable people are able to access and attend safeguarding training available via Hampshire County Council and other partners.

All HFRS safeguarding policies and procedures are subject to an annual Section 11 Children's Audit which is submitted to the Hampshire Children's Safeguarding Board.

A dedicated Safeguarding Lead Officer is in post to ensure policies and procedures are implemented to follow legislation.

Summary of proposed controls

The Care Act 2015, which provides legislation to which organisations adhere to, has recently been updated. This has resulted in several pieces of work which HFRS must complete in order to be compliant. This work is being undertaken by the Safeguarding Team which sits in the Community Safety Department of Service Delivery.

The risk is being well controlled due to all the control measures currently in place and due to outstanding work progressing well. The remaining work can be managed and monitored by the Service Delivery Team from the Service Delivery Risk Register. It is proposed to remove this risk from the Corporate Risk Register and move it to the Service Delivery Risk Register.

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Ref	Risk Description	current risk rating - red/amber/green	Current score			Target Score			Direction of Travel since April 2015
			Likelihood	Impact	Total	Likelihood	Impact	Total	
17	The provision of information and communications technology that does not meet the needs of the business to promote and support improvement and innovation.	Green	2	4	8	2	4	8	→
<p>The risk concerns ensuring we have adequate information and communications technology available to meet the Service's needs.</p> <p>Risk Owner – Director of Professional Services</p> <p>Key controls in place</p> <p>Continuous improvement has been embedded in to the culture of the Information Services department. A robust Information Communications Technology (ICT) strategy is in place and is endorsed by SMT. This ensures the long and short term ICT requirements for the Service are met. Effective resource planning is in place to ensure that there is optimum investment in ICT where it is required. There is a system in place to capture and respond to feedback from customers. The Head of ICT is involved in the Joint Working in Hampshire Programme to ensure that the needs of the</p>									

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Service are met in the future. Part of the Joint Working in Hampshire Programme was an ICT options appraisal which scrutinised possible future ICT arrangements. The findings of the ICT Options appraisal were accepted by Directors in December 2014. The recommendations within the report will be implemented via an ICT Transformation project which will review the complete scope of the ICT provision to ensure the right direction is taken to best meet the Service's needs in terms of improvement, innovation and meeting financial challenge.

The Head of Service Team (HoST) have oversight of ICT plans to ensure they support other business plans and support the needs of the Service. Via HoST there is also closer liaison between ICT and other departments within the Service. This ensures that potential ICT related opportunities for efficiency, improvement and innovation are included within the wider business plans.

Summary of proposed controls

This risk has been reviewed and all control measures are effectively mitigating the risk. The current score remains unchanged at green 8 and it is therefore proposed to remove this from the live Corporate Risk Register and onto the green list where it will still be monitored.

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Ref	Risk Description	current risk rating - red/amber/green	Current score			Target Score			Direction of Travel since April 2015
18a	Failure to adequately plan the Authority's services within its financial resources in the medium term	Green	2	5	10	1	5	5	→
<p>Risk owner – Chief Officer/Director of Professional Services</p> <p>This entry aims to ensure adequate planning controls are put into place to control the current risks faced as a result of cuts in government grants and funding.</p> <p>Key controls in place</p> <p>A Medium Term Financial Strategy (2014/18) is in place and has been approved by the Authority and is overseen by the Safer Stronger Board (SSB). The Budget Alignment Group (BAG) has developed a financial plan for the period up until 2018 which has been approved by SSB and the Finance and General Purposes Committee.</p> <p>The annual planning cycle has been revised to include planning of resources to deliver organisational requirements and an assessment of projected income.</p> <p>Summary of proposed controls</p> <p>This risk is currently being well controlled due to all the control measures in place. The current score of green 10 remains</p>									

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unchanged. It is proposed to remove this risk entry from the live Corporate Risk Register onto the green list where it will be monitored.

Ref	Risk Description	current risk rating - red/amber/green	Current score			Target Score			Direction of Travel since April 2015
18b	Failure to adequately manage the Authority's services within its financial resources in the medium term	Green	2	5	10	1	5	5	↓

Risk owner – Chief Officer/Director of Professional Services

This entry aims to ensure adequate controls are put into place to manage the current risks faced as a result of cuts in government grants and funding.

Key controls in place

A review of budget monitoring has taken place. The Safer Stronger Board (SSB) oversee, at a corporate level, the financial challenge and relate this to achieving the Service plan. Directors hold formal monthly meetings on financial matters. This is attended by the Chief Financial Officer and the Principal Accountant for Operational Finance (Police / Fire).

The Finance and General Purposes Committee scrutinise the Medium Term Financial Plan, draft budgets and actual budgets. The Head of Service Team are responsible for managing critical revenue budgets and are supported by the Head of Finance. Regular 1 to 1 meetings are held quarterly with all budget holders.

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The IBC portal has provided managers with access to additional financial reports and allows better understanding and control of budgets. A programme of financial management training for all budget holders has taken place and financial procedures and policies have been reviewed with improvements implemented.

Capital budgets are regularly reviewed to ensure effective investment.

Summary of proposed controls

Additional controls to mitigate this risk have been implemented which has resulted in a decrease in the overall score. The risk is being well controlled and is scored at green 10. It is proposed to remove this risk entry from the Corporate risk Register and add it to the green list where it will be monitored.

Ref	Risk Description	current risk rating - red/amber/green	Current score			Target Score			Direction of Travel since April 2015
			2	5	10	1	4	4	
19	Failure to maintain accurate data in order to ensure correct training records for operational staff.	Green	2	5	10	1	4	4	↓

Risk owner – Director of Service Delivery

This risk entry was developed as a result of the identification that we currently do not have accurate training record data for operational staff.

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Key controls in place

Since the identification of this risk, several controls measures have been worked on to prevent the risk materialising. Wholetime and Retained workforces have been re-trained to ensure they can confidently and correctly enter training records onto FireWatch. Station Manager training sessions focusing on IPDS event recording took place which emphasised the importance of quality assuring record entries. A robust quality assurance system has been implemented to ensure compliance and accuracy of training records.

Report writing training has been completed for all training department personnel, the FireWatch implementation team and Business Intelligence. This has enabled HFRS to develop a reporting and management information capability.

Summary of proposed controls

The FireWatch Team and the Training Department have completed a lot of work to ensure the control measures to mitigate this risk are in place. This has resulted in the score lowering to green 10 It is proposed to remove this risk from the Corporate Risk Register and add it to the green list where it will be monitored.

Ref	Risk Description	current risk rating - red/amber/green	Current score			Target Score			Direction of Travel since April 2015
8	Impact of Members of the Authority continuing to pursue local interests and priorities	Green	3	3	9	1	5	5	→
Risk owner – Chief Officer									

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This is a risk entry which was previously on the green risk register and has been brought back to the live risk register to ensure controls are still in place. The entry relates to ensuring mechanisms are in place to support Members of the Fire Authority to carry out their role.

Key controls in place

Communication to members is regular and all members are invited to attend the Corporate Management Team (CMT) meetings. A code of Conduct and a Members Charter is place for members. Management maintain close relationships with Members to help improve an understanding of local actions in the context of corporate aims and activities. Members have received 1-1 briefings from the Risk Review team. The briefings have included details on the proposals. Members have also been given engagement and awareness sessions.

This risk remains unchanged at green 9 and is being effectively managed. It is proposed to remove this risk entry onto the Corporate Risk Register and add it to the green list where it will be monitored.

Ref	Risk Description	current risk rating - red/amber/green	Current score			Target Score			Direction of Travel since April 2015
			4	5	20	2	5	10	
22	Due to a reliance on, or an association with, a third party, our ability to directly manage and control aspects of our business could diminish	Red	4	5	20	2	5	10	n/a

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Risk owner – Director of Professional Services

This new risk entry has been created to ensure controls are in place to manage the partnership work currently being undertaken and to safeguard the Service against future partnership work.

Proposed controls

There are significant proposed controls for this risk entry which are currently being worked through. The partnerships policy has been agreed by HoST along with a partnerships register to log and monitor partnerships, which will be held in a central location. A process will be agreed for the setting up and management of partnerships and this will include for each formal partnership; the creation of a stakeholder map, the checking of partnerships agreements by the legal team and finance, liabilities clearly defined, a consideration of data protection given and that Intellectual Property Rights clear.

A communication plan for how to deal with adverse publicity connected with a partnership will be created and training and development will be available for those who are given the responsibility of establishing a partnership.

A library of example partnership agreements will be created along with some FAQ's to assist others.

The Scheme of Delegation will also be amended to make reference to partnerships and to ensure it is clear what authorisation is required for the entering of partnerships.

Ref	Risk Description	current risk rating - red/amber/green	Current score			Target Score			Direction of Travel since April 2015
			2	4	8	1	4	4	
23	Decrease in Organisational	Green	2	4	8	1	4	4	n/a

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Performance					
<p>Risk owner – Head of HR and Workforce Development</p> <p>This new risk entry has been created to ensure that adequate controls are in place to mitigate the impacts associated with a decrease in organisational performance.</p> <p>Although scored green, it is expected that due to the significant change taking place throughout the organisation, that the score of this risk entry will fluctuate up and down over the coming months. For this reason the control measures will be monitored and the risk entry will stay on the live corporate risk register until it is felt that the risk has been mitigated and controlled.</p> <p>Key controls in place</p> <p>Two of our Service Priorities are designed to specifically target organisational performance and are actively working towards improving this – ‘People and Leadership’ and ‘Engagement’.</p> <p>Engagement 15 has been established to involve every member of staff in the Risk Review Consultation process. The Professional Services Directorate are undergoing a redesign of which all staff are being consulted and there is a ‘Leading through change: the art and science’ 4 day programme open to non operational staff.</p> <p>The ‘Health Assured’ support line for employees is an established resource for staff. A leadership framework and cultural vision has been created to set out how change is approached within the Service. There is a clear medium term financial plan and transformational reserve in place to support pressures on capacity where required.</p> <p>There are new style Senior Management Visits (SMV’s) and a variety of communication methods (passive and interactive) are used to send messages to staff.</p> <p>HFRS are Investors in People accredited and a member of Stonewall.</p>					

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There is an internal audit programme to identify areas of improvement across the Service and continued learning and joint working is being sought across all areas.

Proposed controls

The Service Delivery Directorate is undergoing a redesign.

The new style SMV's will incorporate a data collection element, the system for facilitating this will be developed. There will be a review of email use and of the PDR process.

The Chief's visits identified 7 themes to be investigated further and work to address these themes will be undertaken. An internal Communications Strategy is being developed and a Performance Framework is being created. A Performance Framework Tool project is in its infancy. The aim of this project is to provide a tool that measures organisational performance. An Impact Assessment tool is also being developed.

A peer review has been carried out during November 2015. Improvements identified from the Peer Review will be implemented as appropriate.

Ref	Risk Description	current risk rating - red/amber/green	Current score			Target Score			Direction of Travel since April 2015
24	Failure to identify and capitalise on opportunities for improvement (internally and externally)	Amber	3	4	12	1	3	3	→

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Risk owner – Director of Community Safety

This new risk entry has been created to ensure there are controls in place to mitigate the impacts associated with failing to identify and capitalise on opportunities for improvement.

Key controls in place

The Safer Stronger Board is in place to oversee project delivery and the Project Management Office is established to ensure appropriate governance overall projects and to support training and development of project managers. End states and Priorities are being re set to ensure they are clear and precise and to ensure teams are focused on delivering them. The Service Plan sets out direction and purpose and provides a sense of improvement priorities.

A New Product Development process is in place and provides opportunities for creative and innovative ideas.

There is a Group Manager Operations Development to ensure that improvements are made and opportunities capitalised in relation to firefighting and rescue tactics, equipment and technology.

Proposed controls

The Community Safety Structure is being aligned to ensure new and emerging opportunities to engage with Health are being explored.

We will improve communications around Transformation ensuring that the whole organisation understands their opportunities to influence change and innovation. A more systematic approach to product development will be implemented.

There is a members review of the governance arrangements of the Fire Authority. There will be an internal review of governance and meeting structures and the terms of reference for HFRS committees will be reviewed to align them with the Service Plan Priorities. The Pathway 2020 is underway and a Leadership Development Programme is in

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development.

The ICT Transformation project will provide improvements as will the Estates Transformation project and the Strategic Asset Management Plan. Both Directorates are undergoing redesign to ensure opportunities to improve services are implemented.

The intranet will be a focus of improvement and redesign and an system for evaluating projects and activities will be introduced.