

COMPLETED ACTIONS February - May 2018

Process area	REF.	ACTION	Action Priority	RESPONSIBLE OFFICER	DATE BY	IMPLEMENTATION STATUS	% COMPLETE	ON-TRACK RAG STATUS	RESPONSIBLE OFFICER UPDATE AS AT 31.10.17	REVIEW DATE
A. RISK MANAGEMENT	2	• Risk Management Strategy and Framework to be reviewed by Audit Committee.	H	Governance & Risk Manager	30.09.17	completed	100%		Presented to the Audit Committee 15th January 2018	31.12.17
	4	• Refresh and cascade the risk management strategy and framework	H	Governance & Risk Manager	31.03.18	completed	100%		Work has started to embed the risk management strategy throughout the business through involvement with service area DMT's. Service plans and related risk registers and KPI's are included in a new format. The governance team are working with the service areas to complete these documents prior to the new financial year.	31.03.18
B. REVIEW ALL CURRENT PROJECT PROCESSES	8	Identify and log all projects currently live and in the pipeline. Perform reviews of each project for feasibility and governance assurance.  Ensure all relevant projects to go through a gateway or similar process, including a) Categorise and apply rigorous but proportionate methodologies and documentation. b) Requirement for a Project Initiation Document (PID), minuted project/programme meetings and a full risk assessment c) Programmes/projects will be required to be maintained on central paper records with clear documented minutes of meetings and professional advice received.	H	Borough Secretary	30.09.17	completed	100%		A register will be produced and maintained centrally and reviewed by Management Board.  Individual project registers for IT and 'other' will be merged into one main document with reference numbers allocated once approved by Corporate Management Board.	30.6.18

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	9	<p>Risk reporting to be reviewed ensuring that there is an effective cascade and tracking of risk through governance arrangements</p> <p>Refreshed monitoring and tracking process ie project/service risks may also become a corporate risk</p> <p>Clarity on risk exception reporting process. Corporate, service and project risks are to be reviewed monthly.</p>	H	Borough Secretary	31.3.18	completed	100%		<p>A revised risk register template has been implemented and incorporates a service risk log, information risk log, fraud risk log and health and safety risk log.</p> <p>The governance team will be working with each directorate and service areas to record the risks within their areas; the registers will be updated each quarter.</p> <p>Once updated, the risk registers will be presented to the Corporate Improvement Board for review and where appropriate, identified risks will be escalated to management board for inclusion in the corporate risk register.</p> <p>The corporate risk register will also be reviewed quarterly with recommendations made to management board in relation to adding/deleting new and existing risks.</p>	31.12.17
<b>C. PROGRAMME &amp; PROJECT SUPPORT</b>	14	<ul style="list-style-type: none"> <li>Mandatory Training programme on project programmes and major projects competencies to be completed as part of the Licence to Practice Programme and to be written into staff contracts</li> </ul>	H	Governance & Risk Manager	31.12.17	completed	100%		<p>Major programme and project management training is included in LTP as a high-priority module. Mandatory training element will be progressed in line with roll-out of the project management framework to start March 2018 onwards.</p>	30.6.18
<b>G. GOVERNANCE</b>	33	<ul style="list-style-type: none"> <li>Carry out a fundamental review of all current NBC governance arrangements against the CIPFA/SOLACE 2016 standard.</li> <li>full gap analysis and action plan to address any identified weaknesses</li> <li>Update the local code with annual reporting against the code to Audit Committee</li> </ul> <p>External validation report of progress against the standard</p>	H	Governance & Risk Manager	30.09.17	completed	100%		<p>An assessment has been carried out and the results are:</p> <p>Actions in place/partly in place = 84%</p> <p>Not in place = 16%</p> <p>Quite a number of actions relate to the update of policies and procedures.</p> <p>A full gap analysis was presented at the January 2018 Audit Committee. The actions to be addressed will be ongoing over the next two years with a view to gaining accreditation in the third year. The actions needed are intrinsically linked to the change in management and culture within NBC.</p>	Annual review