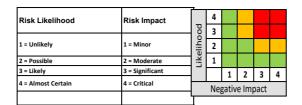
## CORPORATE RISK PROFILE



## Appendix 3

						Current Score Target Sc							,	Assurance						
						(Februa					Targe	et Score								
ID.							_						I ∟		1st Line	2nd	Line	3rd	Line	
ID	Risk Areas	Risk Description	Cause	Impact	Current Controls	Impact	Likelinood	Mitigating Actions	Owner	Source of Assurance	Impact	Likelihood		Overall Assurance	Management Assurance	Specialist Functions	Risk and Assurance	Internal Audit	External Assurance	
R01 \$	Strategic Planning	The priorities set out in the City Plan do not address the needs of the City as whole.	Corporate planning process does not adequately reflect the views of the community.  Various sections of the community are not engaged.  The Council does not understand the impact of external factors on the community.	welfare and future prosperity of our communities.	COG. JLT. City Plan. Strategic Risk Profile. Corporate Service Plan Template	4 1	1 4	City Plan driven by required outcomes and commissioning activity.	Director of Corporate Affairs	Risk and Assurance Team Internal Audit Governance questionnaire	4	1 4	Stra	itegic Planning	x	Performance	х	х		
R02		Strategic plans are not adequately communicated on a timely basis to relevant Council officers and external partners responsible for delivering plans.	Lack of timetable re corporate / service planning Lack of communication of plans	Lack of delivery of plans by those partners/services responsible	COG. JLT. City Plan. Strategic Risk Profile. Corporate Service Plan Template	4 1	1 4	Communication of the City Plan continues across the Council and Partners. Service planning process to ensure that service plans reflect delivery of the City Plan.	All Assistant Directors/Directors	Risk and Assurance Team Internal Audit	4	1 4				Performance	х	х		
R03 (	Commissioning	Commissioning decisions are not based on appropriate intelligence	Appropriate intelligence is not gathered, e.g. performance data is incomplete, is out of date, or is not appropriately analysed or assessed to determine the needs of the community Do not engage with the appropriate sectors of the community / market		Community engagement arrangements. Intelligence Service. Performance Management Framework.	4 2	2 8	Identify intelligence required and potential sources to inform decisions. Develop engagement plans to gather the required information.  Analyse the information and use the results to inform the commissioning decisions.	All Assistant Directors/Directors	Governance questionnaire Internal Audit Corporate Performance Management	4	1 4	Con	nmissioning	x				х	
R04		Most appropriate and cost effective commissioning option to meet identified needs and achieve commissioning priorities and outcomes is not chosen.	Failure to identify and evaluate relevant possible commissioning options of delivering services taking into account the resources available. Failure to build or shape capacity in 'market' and cooperative working e.g. partnerships to enable effective service options not in place to help achieve commissioning priorities and outcomes Inadequate options appraisal process Lack of resource or expertise Lack of Provider/Supplier capacity due to the impact of external factors.			4 2	2 8	Options appraisal undertaken on service design following assessment of customer needs.  Appropriate procedure followed to commission the preferred option, e.g., procurement, service redesign.	All Assistant Directors/Directors	Cabinet reports Internal Audit	4	1 4					x		x	
R05		Commissioning assessment process is not undertaken on a timely or regular basis.	Inadequate resources. Insufficient forward planning for contracted services.	Changes in needs of community are not identified promptly. Inappropriate use of limited resources. Community's real needs are not met. Existing arrangements/contracts extended where it may not be the optimal solution	Service Plans.	4 2	2 8	Review of performance to ensure service delivery mode is delivering outcomes. Commissioning Cycle to include planned review date either linked to outcome or contract timescales.	All Assistant I Directors/Directors	Internal Audit	3	1 3					х			
R06	Service Delivery Arrangement	s Service Plans do not include actions to achieve the City Plan priorities	Service plans are not driven by the City Plan	Fail to meet the needs of the City	Service Planning Process aligned to City Plan. Performance Management Framework.	4 2	2 8	Service Planning process is driven by the City Plan. Service Planning Process is communicated to all Assistant Directors.	All Assistant Directors/Directors	Internal Audit Corporate Performance Management	3	2 6		vice Delivery angements		Performance		×	х	
R07		The level of services delivered by the council does not meet customer needs and/or expectations.	Lack of understanding of the priorities Lack of financial resources to invest in changing arrangements Lack of benchmarking to identify service development opportunities Lack of management time to consider delivery improvements Capability issues Lack of capacity due to increased demand as a result of external factors	customers not achieved. Reputational damage. Wasted resources.	Service Planning Process. Performance management arrangements. Transformation Programme. Strategic Risk Profile	4 3	3 1	Performance in relation to the delivery of outcomes is regularly monitored.	All Assistant Directors/Directors	Corporate Performance Management Internal Audit Governance questionnaire	4	1 4			x		×	×		

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R08		Performance targets are not set or do not clearly identify the acceptable levels of service delivery performance.	Lack of understanding of how to measure acceptable performance.	Unable to understand if performance levels are acceptable.	Corporate performance management process.	3 2	2 6	Targets should be set for all performance measures (where appropriate to do so) to clarify acceptable levels of performance.	All Assistant Directors/Directors	Governance questionnaire Corporate Performance management Internal Audit	3	1 3	3		х	Performance	х	х	
R09		Management fail to take prompt effective action in response to unacceptable performance results reported or fails to follow up to ensure remedial action is effective.	Lack of time to consider performance. Performance information not accurate timely or understood. Management not held to account for performance. Lack of resource or control to make necessary changes.		Corporate Performance management. Performance Clinics	. 3 2	2 6	Management review performance on a regular basis and take appropriate action to rectify unacceptable performance.	All Assistant Directors/Directors	Corporate Performance management arrangements Internal Audit Governance questionnaire	3	1 3	3		х	Performance		x	
R10		Services fail to monitor their financial resources to ensure effective delivery of planned services.	Lack of time spent on budget monitoring. Lack of understanding of the service's financial position. Lack of complete or timely financial information.	Services not effectively delivered due to lack of resources.	Budget managers guidance. Financial Resources support.	4 1	1 4	Managers continue to engage with Financial Resources to understand the financial performance of their services areas	All Assistant Directors/Directors	Financial Resources Internal Audit Governance questionnaire	4	1 4	1			Performance			
R11		Services do not meet the needs of the City as key risks are not identified or appropriately managed.	Potential barriers to the delivery of services are not identified or assessed.	Services not effectively delivered. Waste of resources.	Service Planning process.	3 3	3 9	Services should continue to identify risks to service delivery during the service planning process and consider appropriate mitigating actions.	All Assistant Directors/Directors	Risk and Assurance Internal Audit Governance questionnaire	3	1 3	3			Performance			
R12	Partnership / Integrated Working	and other partner(s) conflict/are not	Reducing resources forces partners to concentrate on their own priorities at the expense of partnership priorities. Lack of communication of plans between partners. Lack of partnership performance monitoring. Increased demand on limited resources due to the impact of external factors	Unable to achieve City priorities and support communities.	City Plan. Partnership Boards. Partnership Framework.	4 2	2 8	Continue engagement with partners regarding activity being undertakn to contribute to the delivery of the City Plan	All Assistant Directors/Directors	Internal Audit	4	1 4	ı	Partnership / Integrated Working				x	
R13		Lack of understanding by each partner as to objectives, and nature of partnership (e.g. responsibilities, if applicable, sharing of profits, costs or losses, dispute resolution, governance, decision making, planning, risk sharing).	Lack of formal comprehensive written partnership agreement.	Delay in delivery of plans and outcomes for community. Lack of delivery of priorities.	Partnership Framework.	4 2	2 8	All Assistant Directors should be reminded of the requirements of the partnership Code of Practice. Partnership agreement in place with each partner setting out the expectations of each party and the required reporting arrangements.	All Assistant Directors/Directors	Governance questionnaire Internal Audit	4	1 4	1		х			х	
R14	Procurement	The product or service procured does not deliver the intended outcomes.	Poor specification. Lack of understanding of what is needed by commissioner. Poor communication between commissioner and procurement. Limited capacity of providers/suppliers due to external factors. Inadequate evaluation process	Fail to obtain value for money. Objectives/outcomes are not achieved. Most appropriate commissioning options are no obtained.	Procedure Rules.	3 1	1 3	The Council's procurement procedures continue to be followed and good procurement practice is undertaken	All Assistant Directors/Directors	Internal Audit Risk and Assurance	3	1 3	3	Procurement			х	х	
R15		Procurement breaches legal and Council requirements.	Lack of procurement procedure rules and training. Lack of knowledge of legal/Council requirements. Failure to adhere to requirements (deliberate, e.g. corruption or accidental).	Legal/financial penalties. Challenge, delays in award of contracts. Loss of reputation.	Procurement Procedure Rules in place. Procurement have skilled staff. Corporate Procurement support council officers.	2 1	1 2	failure to comply with Procurement Procedure Rules.	Assistant Director of Assurance and Property Services  All Assistant Directors/Directors	Internal Audit	2	1 2	2				x	х	
R16		Value for money not obtained.	Lack of competition. Corruption. Inappropriate specification. Poor procurement planning.	Poor quality of goods/services and customer service. Pay higher prices - waste of scarce resources.	Procurement Procedure Rules in place. Procurement have skilled staff. Corporate Procurement support council officers.	3 2	2 6	Commissioners engage with Corporate procurement in enough time to undertake an appropriate and legal procurement process.	All Assistant Directors/Directors	Internal Audit	3	1 3	3					х	
R17	Relationship / Contract Management	Contracts do not deliver the required objectives/outcomes.	Lack of clear contract/specification provisions in place to allow effective management of the contract. Lack of appreciation of importance of contract management during the procurement process. Lack of clarity of clear measures and standards required by commissioner in specification to allow for contract management post award. Lack of contract management activity following contract award	Fail to obtain value for money, i.e. pay too much or poor service obtained.  Objectives are not achieved. Excessive resources used on dispute resolution.	management framework. Corporate	4 2	2 8	Contract management arrangements should be in place for all key contracts entered into by the Council.	All Assistant Directors/Directors	Governance questionnaire Internal Audit	4	1 4	ı	Relationship / Contract Management	x	Performance	x	x	

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R18	Legality	Council fails to act within its statutory powers.	Lack of Constitution, Procedure rules and / or delegation scheme etc. Constitution, procedure rules, delegation scheme are not communicated or understood by officers.  Decision makers have lack of access to legal expertise. Lack of awareness of officers as to their legal responsibilities.  Changes in law are not recognised and implemented.	Council's actions are found to be ultra vires. Financial penalties. Legal challenge. Loss of reputation. Delay in delivery of outcomes.	Constitution and Procedure Rules.	3 1	Ongoing review of decisions by Law Governance. Officers continue of changes in legitimpact on their se	and Go to be aware islation that Dire	sistant Director of Law and overnance Assistant rectors/Directors	Law and Governance Governance questionnaire Internal Audit	3 1	3	Legality	×	Law and Governance	×	x	
R19	Risk Management	Failure to identify and manage the major risks and opportunities to delivering priorities and plans.	Risk Management process is not aligned with delivering priorities. Senior Management/Members do not monitor the management of key risks to the Council.  Risk appetite of the Council is not identified and communicated.	Priorities are not achieved. Loss of reputation. Potential financial penalties.	Risk Management Policy and Strategy. Integrated Assurance Framework. Strategic Risk Profile	3 2	The Council's stracorporate risks an assessed and ma through COG and and Governance Risk Management Strategy to be rev	re identified, Assinaged Ser dithe Audit Committee. It Policy and	sistant Director of surance and Property rvices	Risk and Assurance Team Audit and Governance Committee Governance questionnaire	3 1	3	Risk Management	х		x	х	
R20	Corporate Performance Management	Performance reporting fails to give a full and accurate picture of the progress in achieving strategic priorities and outcomes.	Performance reporting does not address all priority issues. Performance indicators are inappropriate. Performance targets not set to aid evaluation of performance. Performance data reported is inaccurate, out of date, difficult to understand or incomplete. Performance reporting not timely.	Reporting does not identify if achievement of all priorities are on track or if interventions are required.  Appropriate remedial actions are delayed.	Performance Management Framework.	3 1	Management revi performance on a basis and take ap action to rectify ur performance.	regular Cor opropriate	rector of Strategy and proprate Affairs	Corporate performance management Internal Audit	3 1	3	Performance Reporting		Performance		х	
R21	Financial Management	Strategic financial plans do not align to Council priorities, objectives and direction as set out in the City Plan.	processes are not coordinated to		MTFS Budget consultation process	4 1	The strategic final should be aligned priorities in the Cit	with the	rector of Finance	Financial Resources	4 1	4	Financial Management					
R22		Strategic financial plans are at risk due to all critical factors likely to affect the Council's finances moving forward, e.g. changes to funding streams, changes in amounts of funding, inflation, pay awards, potential liabilities etc.	Poor intelligence gathering or horizon scanning. Lack of resources. Lack of consultation/communication with senior officers. Lack of clarity of the financial support from Government.	Decisions made with inaccurate information. Plans made which are not adequately resourced. Failure to achieve plans and outcomes for community. Council financial resources overstretched.	Strategic financial planning process. Strategic Risk Register.	4 3	Appropriate const intelligence gathe undertaken in ass Council's short to term financial pos	ering is sessing the medium	rector of Finance	Financial Resources External Audit	3 1	3						
R23		Financial reporting fails to reflect on how financial changes in one area impacts on other areas of the council.	Financial savings in one area may have a more than proportionate increase in other service areas	Savings plans are not achieved in practice.	Financial Reporting Procedures.	3 1	The Council's fina position is regular to COG and Mem	rly reported	rector of Finance	Financial Resources	3 1	3			Financial Resources		х	
R24		The Council does not take all opportunities to pursue external funding when available.	Lack of awareness of funding streams available. Lack of planning regarding priorities to be able to react to available funding.	priorities in an efficient way. Some priorities may not be	External Funding Team. Strategic funding group.	3 1	Ensure that horizo considers change sources of funding	s in future	rector of Finance	Internal audit	3 1	3			Financial Resources			
R25		The Council does not maximise the use of external funding that has been allocated.	Lack of planning Lack of awareness of the terms and conditions of the funding Delays in project completion	Loss of grant income. Some priorities may not be delivered.	Financial monitoring. Project management standards.	3 2	The Council monit of all grant monies there is no loss.		rector of Finance	Internal Audit	3 1	3			Financial Resources			
R26		Financial reporting fails to give a full and accurate picture of the progress to achieving corporate financial priorities and targets.	Financial reporting does not address all priority issues Financial performance measures are inappropriate Financial targets not set to aid evaluation of performance Financial performance data reported is inaccurate, out of date, difficult to understand or incomplete Financial performance reporting not timely	Financial reporting does not identify if achievement of all priorities are on track or if interventions are required. Appropriate remedial actions are delayed.	Corporate Performance Reporting. Performance Clinics.	3 1	Financial perform reporting is aligne performance repo identify any poten inaccuracies or inconsistencies.	ed to orting to	rector of Finance	Financial Resources Corporate Performance Management	3 1	3			Financial Resources		х	
R27		The Council fails to pay its employees (and those of other clients) accurately and on time.	Lack of resources to process the changes to the payroll Lack of a clear timetable for the submission of information Lack or payroll staff with the required training	Delay in making salary payments. Claims from employees for costs incurred for late payment of bills. Loss of reputation as a payrol provider.	Policies and procedures in place for operating the payroll system. Employee self service.	3 1	Controls in place that the payroll run complete and acc operate efficiently	ns are Ena	rector of Smart Cities and labling Services	Internal Audit	3 1	3					х	х
R28		The Council fails to make payments to its suppliers and clients accurately and on time.		Loss of reputation with suppliers. Claims for interest for late payments.	Procedures in place within the Purchase to Pay system	3 1	Procedures requiremaking payments and on time are up and fully understowithin the paymen	accurately Sm p to date Ser ood by staff	rector of Finance/Director of nart Cities and Enabling rvices	Internal Audit	3 1	3					х	х

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R29		The Council fails to process payments for benefits accurately or on time.	Poor assessment procedures. Lack of timetable for assessing claims Delay in the processing of claims.	Customers do not receive the correct amount of benefit resulting in financial hardship. Customers receive their payments late causing unnecessary debt.	procedures and	4 1	Established procedures are in place and followed by adequately trained staff for the assessment and processing of benefit claims.		Internal Audit	4 1 4					х	х
R30	Income Collection (including CT/NNDR)	Council fails to bill and or promptly collect the income that is due to its.	Lack of resources. Inadequate procedures for raising accurate bills. Inappropriate methods to allow customers to pay bills. Over generous credit terms. Economic conditions increase the number of bad debtors. Procedures fail to identify non payments. Ineffective enforcement of credit control arrangements.	Financial loss. Unable to balance the budget.	Financial procedure rules. Performance indicators in place.	3 1	Regular monitoring that the income received is in line wit that expected as per the Council's budget.	Director of Finance	Financial Resources Internal Audit	3 1 3	Income Collection (including CT/NNDR)				х	х
R31		Prosperity within the City fails to grow resulting in the expected level of income being uncollectable.	Number of businesses in the City reduces or does not grow. Increased number of families suffering financial hardship.  Debts increase and become harder to recover.  External factors have resulted in a worsening financial and domestic situation of many residents.	Financial loss. Negative impact on cashflow. Inability to achieve financial targets.	City Plan. Strategic financial planning.	3 4	Clear performance measures and regular monitoring of the debtor position highlight potential loss of income.		Financial Resources Internal Audit	3 2 6						
R32	Capital Programme Management	Capital projects do not support the delivery of strategic priorities and desired outcomes.	Capital projects are based on available funding and not linked to priorities. Inadequate business cases for projects.	Priorities are not delivered. City does not have the required infrastructure. Poor integration of city developments.	Capital Programme Board	3 1	The Capital Programme is directly aligned to the City Plan and strategic priorities.	Director of Finance	Financial Resources Internal Audit	3 1 3	Capital Programme Management		Financial Resources	×	х	
R33		The intended benefits of capital projects are not identified and/or realised.	Lack of awareness of funding conditions Poor planning Poor monitoring of projects Lack of monitoring of the realisation of benefits after the completion of the projects	Loss of funding. Council resources used to fill funding gaps. Other planned projects postponed. Lack of delivery of the Council priorities.		3 3	Corporate approach to planning and monitoring of th delivery of the benefits of each project and the wider Capital Programme.	All Assistant e Directors/Directors	Financial Resources Internal Audit	3 2 6				x	Х	
R34	People Management	The council does not have the required skills and capacity to deliver the City's priorities.	Shrinking workforce leading to a reduction in capacity and skills. Rapid loss of key/senior officers and associated expertise. Lack of effective workforce planning to ensure Council has workforce to meet the needs of Council going forward. Insufficient resources to maintain effective HR management resource and arrangements. Insufficient training and development. Staff absence due to sickness.	Lack of or delay or increased costs in delivering priorities.	Corporate Performance Management.	3 3	Workforce planning strategy place that is appropriately monitored to ensure its is effectively implemented. People Management Improvement Programme in place	n Director of Smart Cities and Enabling Services	People Management Internal Audit Governance questionnaire	3 2 6	HR Management	х	Health and Safety	x	х	
R35		Reduction in productivity and morale of workforce.	Increasing workloads. Instability due to ongoing changes. Job insecurity. Increased demand / pressures due to external factors.	High absence/sickness rates. Stress related absence. Lower standards of service delivery. Increased costs. Increased homeworking has had a positive impact of staff morale.	Corporate Performance management. Performance Clinics.	4 2	Recognition of reduced capacity. Employees feeling valued an supported.	All Assistant Directors/Directors	People Management Internal Audit	4 2 8			People Management			
R36	Health and Safety	Council officers do not fully understand H&S roles and responsibilities.	Roles and responsibilities not clearly documented and/or communicated effectively. Loss of knowledge from organisationa change and staff churn. Ineffective training and awareness programme. Lack of easy access to relevant documents on the Hub.	Lack of ownership and accountability for H&S. Inconsistent approach to the management of H&S issues across directorates, divisions and teams. Reduced compliance with quality standards and best practice. Inability to adequately prevent incidents occurring. Inadequate documentation and controls leading to injury and death.	and Safety Statement of Intent.	4 2	H&S Strategy/Policy to be reviewed and revised. Revised Strategy/Policy to be agreed by COG.	Assistant Director of Assurance and Property Services	Internal Audit Governance questionnaire	4 1 4	Health and Safety		Health and Safety	x	X	

ID Risk Areas	Risk Description	Cause	Impact	Current Controls	Impact	Mitigating Actions	Owner	Source of Assurance	Impact	Rating	Overall Assurance	Management Assurance	Specialist Functions	Risk and Assurance	Internal Audit	External Assurance
R37	The council's key H&S risks are not identified, understood or agreed.	Lack of effective coordinated corporate approach to the identification of H&S risks. Lack of awareness or prioritisation of H&S across Chief officers, managers and operational colleagues. Lack of clear responsibilities of premises managers, landlords and leaseholders.		process in place.	4 2	Continue to monitor Health and Safety Risks through the assurance framework and work with relevant colleagues to manage the risks in place.	Assistant Director of Assurance and Property Services	Internal Audit Governance questionnaire	4	1 4			Health and Safety		х	
R38	Appropriate action plans are not developed and agreed to manage the council's key H&S risks.	Lack of joined up corporate approach to the management of H&S risks. Lack of effective process to develop clear and robust action plans to establish relevant controls and officer ownership.	established and/or operated appropriately. Inconsistent and disjointed		4 2	Continue to oversee the management of Health and Safety risks through the Executive Group and annual reporting to COG.	Assistant Director of Assurance and Property Services	Internal Audit Governance questionnaire	4	1 4			Health and Safety		х	
R39	Strategic approach to incident management does not adequately inform decision making.	Lack of understanding of responsibilities and accountability for incident response.  Non-compliance with incident reporting arrangements. immitted trend analysis and learning lessons from incidents.  Availability of quality data/information to inform effective reporting to COG.	inappropriate controls. Existing controls not reviewed and revised in response to learning from incidents becoming out-of-date and	Corporate Health and Safety Team. Annual Health and Safety Report. Regular Executive Health and Safety meetings where detailed information is presented and discussed. Specifc Training provided regarding how to manage a Health and Safety Incident.	3 2	Continue to monitor compliance with incident reporting arrangements and address any areas for development.	Assistant Director of Assurance and Property Services	Internal Audit Governance questionnaire	3	1 3			Health and Safety		х	
R40 ICT Infrastructure	The ICT infrastructure is not fit for purpose (i.e. does not meet the needs of Council, not reliable, too expensive).	Reducing resources impacts upon the ability to maintain a stable infrastructure. Lack of funds to maintain/upgrade infrastructure. Increased reliance/demand on ICT due to move to hybrid working.	Disruption to service provisior impacting on delivery of priorities.  Waste of financial resources due to excessive cost. Less efficient and effective service delivery. Loss of productivity.	n ICT development plan. Wide roll out of laptops, Windows 10 and Microsoft Teams to aid hybrid working.		The ICT strategy is clearly aligned to the priorities of the Council and the direction of travel for the provision of Council Services.	Director Smart Cities and Enabling Services	ICT Internal Audit	4	1 4	ICT Infrastructure	х	ICT	x	х	
R41	ICT infrastructure is not resilient to 'disasters'.	Lack of planning for disasters (preven or respond to). No adequate business continuity/disaster recovery ICT infrastructure in place. Lack of business continuity/disaster recovery plan which has been tested. Key employees not briefed as to their disaster recovery responsibilities. Lack of 24/7 ICT support in the event of an incident.	impacting on delivery of priorities. Loss of productivity. Waste of financial resources due to excessive cost. Less efficient and effective	Business continuity arrangements (ICT and in services).	4 2	Disaster recovery plans clearly linked to the provision of critical services, regularly tested and the recovery timescales reflected in the business continuity plans for critical services.	Director Smart Cities and Enabling Services All Assistant Directors/Directors	ICT Internal Audit Business continuity officer	4	1 4		х	ICT	x	х	
R42 Cyber Security	The Council is exposed to vulnerabilities and threats, both internal and external, (e.g. hacking, phishing, denial of service attack) resulting in a loss of systems and/or confidential information.	Lack of appreciation by management of threat/risks of cybercrime to Council's operations. Low priority given to cybersecurity. I cack of cybercrime prevention culture created (lack of cybersecurity policies and procedures (prevention and response), lack of ongoing employee training/awareness). Lack of monitoring of alerts/warnings, e.g. no Security and Incident and Event Management (SIEM) solution in place. Lack of investment in existing infrastructure increases level of vulnerability penetration testing vulnerability penetration testing vulnerability penetration testing vulnerability test results not actioned in suitable time scales. Lack of resources. Lack of understanding of what valuable data the Council holds. Increased cyber activity during Covid 19 outbreak.	confidence, finance and reputational damage. Fines / compensation. Loss of systems or data loss. Major business disruption.	Strategic Information Governance Group. Operational Information Governance Group. ISO 27001. Cyber security arrangements		A Cyber security Strategy is in place, including and threat assessment, development plan and response plan.	Director Smart Cities and Enabling Services	ICT Internal Audit	4 :	2 8	Cyber Security		ICT	x	x	

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R43	Information Governance / Security	Council's data is not accurately protected.	Lack of awareness of the importance of protecting the Council's data. Lack of compliance with data security arrangements.  The Council is not aware of the data its holds or ensures that its is complete and accurate.  Protection arrangements do not prevent unauthorised access and use of data.  Increased remote working brings increased risk to data held in homes.	reputational damage. Fines / compensation. Claims from those who have been adversely effected.	Strategic Information Governance Group. Operational Information Governance Group. ISO 27001. Cyber security arrangements	3 2	Council has appropriate information governance and security arrangements in place which are complied with throughout the organisation.	Assistant Director of Assurance and Property Services All Assistant Directors/Directors	Data Protection Office Governance questionnaire Internal Audit	3 1	3	Information Governance / Security	х	DPO	х	х	
R44	Business Continuity Management	The Council's business critical services cannot function in the even of an incident.	Business Continuity Plans not up to to date, reviewed or revised to reflect organisational, procedural and staff changes. Business continuity plans are not tested appropriately. A number of incidents impact at the same time e.g. Covid 19, Brexit, winte flu, adverse winter weather	Services are unable to respond in adverse conditions.	Corporate Business Continuity Group. Business Continuity plans. Response to the first wave of Covid 19 was successful with no failures to deliver critical services.	3 2	Business continuity plans are reviewed and tested on a regular basis and take into account the cumulative effect of concurring incidents.	Assurance and Property Services	Business Continuity Officer Internal Audit Governance questionnaire	4 1	4	Business Continuity Management	х	Business Continuity	х		
R45		Lack of awareness of content of business continuity plans.	Lack of effective communication strategy. Lack of testing.	Services are unable or slow to respond appropriately to disasters when occur affecting services to community, safety of individuals.  Loss of reputation.	Continuity Group. Business Continuity	4 1	Relevant staff are made aware of the content of the business continuity plans and understand their role in implementing them.	All Assistant Directors/Directors	Business Continuity Officer Internal Audit Governance questionnaire	4 1	4		х	Business Continuity	х		
R46	Programme / Project Management	Programmes and projects fail to deliver the desired benefits and outcomes.	Lack of agreed Project Management Standards. Lack of Project Plans and Governance. Lack of monitoring of achievement.	Fail to obtain value for money Programme and Project objectives are not achieved.	Corporate Project /Programme management arrangements.	3 3	The expected benefits of programmes and projects are clearly set out at the start and their achievement monitored throughout.		Project Office Risk and Assurance Internal Audit Governance questionnaire	3 1	3	Programme / Project Management	х	Programmes and Projects	х	х	х
R47	Asset Management	Opportunities are not taken to maximise the use of assets (land and property). Assets are not fully utilised.	Council does not "sweat" its assets to obtain the maximum returns. Fail to maintain property. Changes in size and direction of Council and services its provides. Lack of asset management planning. Changes in how services delivered. Changes in technology. Assets become uneconomic to run. Lack of investment in asset management planning. Council unaware of assets its owns.	Fail to increase council income. Fail to decrease costs.	Asset Management Plan.	3 3	The use of Council assets are monitored on an ongoing basis, particularly in response to changing staffing levels and changing service delivery models.	Assurance and Property Services	Internal Audit	3 2	6	Asset Management			х	х	
R48		The Council does not fulfil its statutory duties in relation to its property portfolio.	Lack of resources. Lack of planning. Lack of monitoring or conditions of assets. Lack of knowledge of changes to the property portfolio.	Members of the public or staff are at risk of being harmed. Legal action taken against the Council. Reputational Damage.	Plan.	4 2	The Council's Asset Management Plan is updated maintained accurately on an ongoing basis. Condition of assets are monitored on an appropriate basis and maintenance scheduled as required.	Assistant Director of Assurance and Property Services	Health and Safety Internal Audit	4 1	4						
R49	Anti Fraud and Corruption	Council fails to prevent, detect and investigate acts of fraud and corruption.	Relaxation of controls due to a reduction of resources. Lack of anti fraud culture. Lack of anti fraud and corruption procedures embedded into processes	Financial loss potentially resuling in a reduced service offering to the customer.	Anti fraud and corruption policy and procedures.	2 2	Managers are aware of the fraud risks within their area and maintained appropriate controls bearing in mind changes to service delivery and staffing levels.	All Assistant Directors/Directors	Governance questionnaire Internal Audit	2 2	4	Anti Fraud and Corruption	х			х	