## Appendix 3

Risk Likelihood	Risk Impact		4				
		_ po	3				
1 = Unlikely	1 = Minor	liho	2				
2 = Possible	2 = Moderate	⊢ ike	1				
3 = Likely	3 = Significant			1	2	3	Δ
4 = Almost Certain	4 = Critical		Ne	rativ	e lm	_	7
			IVC	Sativ		pact	

**CORPORATE RISK PROFILE** 

												Assurance			
						Current Sco (Sept 2023			Target Score						
ID											1st Line	2nd	Line	3rd L	Line
	Risk Areas	Risk Description	Cause	Impact	Current Controls	Impact	Mitigating Actions Owner	Source of Assurance	Impact Likelihood Rating	Overall Assurance	Management Assurance	Specialist Functions	Risk and Assurance	Internal Audit	External Assurance
R01 S	trategic Planning	The priorities set out in the City Plan do not address the needs of the City as whole.		Fail to contribute to the welfare and future prosperity of our communities.	COG. JLT. City Plan. Strategic Risk Profile. Corporate Service Plan Template	4 1	City Plan driven by required outcomes and commissioning activity.	Risk and Assurance Team Internal Audit Governance questionnaire	4 1 4	Strategic Planning	X	Performance	X	X	
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	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	X	X	
R03 C	ommissioning		incomplete, is out of date, or is not appropriately analysed or assessed		Community engagement arrangements. Intelligence Service. Performance Management Framework.	4 2	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.	Governance questionnaire Internal Audit Corporate Performance Management	4 1 4	Commissioning	X				X
R04		identified needs and achieve commissioning priorities and	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.	so community needs not being met. Ineffective use of limited resources.	City Plan. Service Plans. Strategic Risk Register	4 2	Options appraisal undertaken on service design following assessment of customer needs. Appropriate procedure followed to commission the preferred option, e.g. procurement, service redesign.	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	Review of performance to ensure service delivery model is delivering outcomes. Commissioning Cycle to include planned review date either linked to outcome or contract timescales.	Internal Audit	3 1 3				X		
	ervice Delivery rrangements	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	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	Service Delivery Arrangements		Performance		X	X
R07		The level of services delivered by the council does not meet customer needs and/or expectations.		customers not achieved. Reputational damage. Wasted resources.	Service Planning Process. Performance management arrangements. Transformation Programme. Strategic Risk Profile	4 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		X	X	

ID	Risk Areas	Risk Description	Cause	Impact	Current Controls	Impact	Likelihood	Rating	Mitigating Actions	Owner	Source of Assurance	Impact	Likelihood	Rating
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	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
R09		unacceptable performance results	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.	No or delay in action taken to improve service which may have major impact on customers. Poor reputation for Council.	Corporate Performance management. Performance Clinics.	3	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
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	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
R11			Potential barriers to the delivery of services are not identified or assessed.	Services not effectively delivered. Waste of resources.	Service Planning process.	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
R12	Partnership / Integrated Working		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	communities.	City Plan. Partnership Boards. Partnership Framework.	4	2	8	Continue engagement with partners regarding activity being undertakn to contribute to the delivery of the City Plan		Internal Audit	4	1	4
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).			Partnership Framework.	4	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	All Assistant Directors/Directors	Governance questionnaire Internal Audit	4	1	4
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 not obtained.	Procurement Procedure Rules.	3	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
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).	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	2	Assistant Directors regarding failure to comply with Procurement Procedure Rules. Commissioners engage with	Assistant Director of Assurance and Property Services  All Assistant Directors/Directors	Internal Audit	2	1	2
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	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
R17	Relationship / Contract Management		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	poor service obtained.	Contract management framework. Corporate Procurement support to officers.	4	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

Overall Assurance	Management Assurance	Specialist Functions	Risk and Assurance	Internal Audit	External Assurance
	×	Performance	х	Х	
	X	Performance		X	
		Performance			
		Performance			
Partnership / Integrated Working				X	
	×			X	
Procurement			X	X	
			×	X	
				X	
Relationship / Contract Management	X	Performance	X	X	

ID Risk Areas	Risk Description	Cause	Impact	Current Controls	Impact	Rating	Mitigating Actions	Owner	Source of Assurance	Impact	Likelinood	Overall Assurance	Management Assurance	Specialist Functions	Risk and Assurance	
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	3	Ongoing review of key decisions by Law and Governance. Officers continue to be aware of changes in legislation that impact on their services.		Law and Governance Governance questionnaire Internal Audit	3	1 3	Legality	X	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.	•	Risk Management Policy and Strategy. Integrated Assurance Framework. Strategic Risk Profile	3 2	6	The Council's strategic and corporate risks are identified, assessed and managed through COG and the Audit and Governance Committee. Risk Management Policy and Strategy to be reviewed.	Services	Risk and Assurance Team Audit and Governance Committee Governance questionnaire	3	1 3	Risk Management	X		X	
R20 Corporate Performance Management	Performance reporting fails to give a full and accurate picture of the progress in achieving strategic priorities and outcomes.	address all priority issues. Performance indicators are inappropriate. Performance targets not set to aid	Reporting does not identify if achievement of all priorities are on track or if interventions are required. Appropriate remedial actions are delayed.	Management	3 1	3	Management review performance on a regular basis and take appropriate action to rectify unacceptable performance.	Director of Corporate Affairs	Corporate performance management Internal Audit	3	1 3	Performance Reporting		Performance		
R21 Financial Management	Strategic financial plans do not aligr to Council priorities, objectives and direction as set out in the City Plan.	processes are not coordinated to allow plans to be aligned. Financial planning process does not	outcomes for community	MTFS Budget consultation process	4 1	4	The strategic financial plan should be aligned with the priorities in the City Plan.	Director 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.	Lack of consultation/communication	inaccurate information. Plans made which are not adequately resourced. Failure to achieve plans and	Strategic financial planning process. Strategic Risk Register.	4 3	12	Appropriate consultation and intelligence gathering is undertaken in assessing the Council's short to medium term financial position.		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	3	The Council's financial position is regularly reported to COG and Members.	Director of Finance	Financial Resources	3	1 3			Financial Resources		
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.	The Council fails to deliver its priorities in an efficient way. Some priorities may not be delivered.		3 1	3	Ensure that horizon scanning considers changes in future sources of funding.		Internal audit	3	1 3			Financial Resources		
R25	The Council does not maximise the use of external funding that has been allocated.	·	Loss of grant income. Some priorities may not be delivered.	Financial monitoring. Project management standards.	3 2	6	The Council monitors the use of all grant monies to ensure there is no loss.		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.	all priority issues	identify if achievement of all	Corporate Performance Reporting. Performance Clinics.	3 1	3	Financial performance reporting is aligned to performance reporting to identify any potential inaccuracies or inconsistencies.	Director of Finance	Financial Resources Corporate Performance Management	3	1 3			Financial Resources		
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 payroll provider.	Policies and procedures in place for operating the payroll system. Employee self service.	3 1	3	Controls in place to ensure that the payroll runs are complete and accurate and operate efficiently.	Director of Smart Cities and Enabling Services	Internal Audit	3	1 3					
R28	The Council fails to make payments to its suppliers and clients accurately and on time.		Loss of reputation with suppliers.	Procedures in place within the Purchase to Pay system		3	Procedures required for making payments accurately and on time are up to date and fully understood by staff within the payments service	of Smart Cities and Enabling Services	Internal Audit	3	1 3					

External

Assurance

Internal Audit

X

ID	Risk Areas	Risk Description	Cause	Impact	Current Controls	Impact	Likelihood	Mitigating Actions	Owner	Source of Assurance	Impact	Likelihood	Rating	Overall Assura
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.	Director of Finance	Internal Audit	4	1	4	
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 with that expected as per the Council's budget.	Director of Finance	Financial Resources Internal Audit	3	1	3	Income Collection (in CT/NNDR)
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
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.	Capital Programme Board	3	3	Corporate approach to planning and monitoring of the delivery of the benefits of each project and the wider Capital Programme.	All Assistant Directors/Directors	Financial Resources Internal Audit	3	2	6	
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 in place that is appropriately monitored to ensure its is effectively implemented. People Management Improvement Programme in place	Director of Smart Cities and Enabling Services	People Management Internal Audit Governance questionnaire	3	2	6	HR Management
R35		Reduction in productivity and morale of workforce.	Increasing workloads.	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 and supported.	All Assistant Directors/Directors	People Management Internal Audit	4	2	8	
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 organisational change and staff churn.  Ineffective training and awareness programme.  Lack of easy access to relevant documents on the Hub.	across directorates, divisions and teams. Reduced compliance with quality standards and best practice. Inability to adequately preven incidents occurring.	programme. Corporate Health and Safety Statement of Intent. Agreed H&S Policy /Strategy. t Improved access to documents on the Hub and sharepoint	3	2	Continue to work with Senior officers and report progress to COG	Assistant Director of Assurance and Property Services	Internal Audit Governance questionnaire	3	1	3	Health and Safety

Overall Assurance	Management Assurance	Specialist Functions	Risk and Assurance	Internal Audit	External Assurance
				Х	Х
Income Collection (including CT/NNDR)				X	X
Capital Programme Management		Financial Resources	X	X	
			X	X	
HR Management	X	Health and Safety	X	X	
		People Management			
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 Likelihood 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.	corporate approach to the identification of H&S risks. Lack of awareness or prioritisation of H&S across Chief officers, managers		and Safety Team. Risk assessment process. Dashboards provided to Assistant Directors and escalation process in place. Training packages on llearn system.	3 2	Continue to monitor Health and Safety Risks through the assurance framework and work with relevant colleagues to manage the risks in place.	Services	Internal Audit Governance questionnaire	3 1 3			Health and Safety		X	
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	d actions recorded in IAuditor system.	3 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	3 1 3			Health and Safety		X	
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.	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. Monthly reporting to Senior Managers resulting in trends reducing.	3 1	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		X	
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 provision impacting on delivery of priorities. Waste of financial resources due to excessive cost. Less efficient and effective service delivery. Loss of productivity.	ICT development plan. Wide roll out of laptops, Windows 10 and Microsoft Teams to aid hybrid working.	4 1	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	×	ICT	×	X	
R41		ICT infrastructure is not resilient to 'disasters'.	Lack of planning for disasters (prevent 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.	service delivery. Loss of productivity.	Business continuity arrangements (ICT and in services).	4 2	timescales reflected in the	All Assistant Directors/Directors	ICT Internal Audit Business continuity officer	4 1 4		X	ICT	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
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/o confidential information.	Lack of appreciation by managemen of threat/risks of cybercrime to Council's operations. Low priority given to cybersecurity. I Lack 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 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.	Information Governance Group. Operational		A Cyber security Strategy is in place, including and threat assessment, development plan and response plan.		ICT Internal Audit	4 2	8	Cyber Security		ICT	X	X	
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		Council has appropriate information governance and security arrangements in place which are complied with throughout the organisation.	Services	Data Protection Office Governance questionnaire Internal Audit	3 1	3	Information Governance / Security	X	DPO	X	X	
R44 Business Continuity Management	The Council's business critical services cannot function in the event of an incident.	Business Continuity Plans not up 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, winter 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.		Business continuity plans are reviewed and tested on a regular basis and take into account the cumulative effects of concurring incidents.	Assistant Director of Assurance and Property Services  All Assistant Directors/Directors	Business Continuity Officer Internal Audit Governance questionnaire	4 1	4	Business Continuity Management	X	Business Continuity	X		
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.	Corporate Business Continuity Group. Business Continuity plans. Successful response to Covid 19 outbreak.		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	×		
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	X	Programmes and Projects	X	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.	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			X	X	
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.	Legal action taken against the Council.	f Asset Management 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.		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	X			X	

Overall Assurance	Management Assurance	Specialist Functions	Risk and Assurance	Internal Audit	External Assurance
Cyber Security		ICT	X	X	
Information Governance / Security	X	DPO	X	X	
Business Continuity Management	X	Business Continuity	X		
	X	Business Continuity	×		
Programme / Project Management	×	Programmes and Projects	×	×	X
Asset Management			X	X	
Anti Fraud and Corruption					
Para Prada ana Oomapilon	X			×	