	CORPORAT	re risk profi	 LE	Risk Likolihood Risk Impact 4 4 1 = Unlikely 1 = Minor 2 4 2 = Possible 2 = Moderate 4 4 3 = Significant 1 1 2 4 = Almost Certain 4 = critical Negative Impact							Ap											ppendix 3		
				Current Score (Sept 2020)								1st Line 2nd Line												
ID	Risk Areas	Risk Description	Cause	Impact	Current Controls	Impact Likelihood Rating	Mitigating Actions	Owner	Source of Assurance	Forecast Score typedul riketiinood typedul typ	Overall Assurance	Management Assurance	Law and Governance	Financial Resources	Programmes and Projects	Performance	ICT	People Mgt	Health and Safety	Business Continuity	Risk and Assurance	Internal audit	t Line External Assurance	
R01	Strategic Planning		Corporate planning process does not y adequately reflect the views of the community. Various sections of the community ar not engaged. The Council does not understand the impact of Covid 19 on the community	welfare and future prosperity of our communities.	COG. / JLT. City Plan. Covid 19 Risk Register.	4 1 4	City Plan driven by required outcomes and commissioning activity. Refresh of the JSNA		Risk and Assurance Team Internal Audit	4 1 4	Strategic Planning	x				x					x	x		
R02		communicated on a timely basis to	al Lack of communication of plans	Lack of delivery of plans by those partners/services responsible	COG. JLT. City Plan.	4 2 8	Communication of the City Plan continues across the Council and Partners. Service planning process to ensure that service plans reflect delivery of the City	Strategic Director People, Communications and Partnerships	Risk and Assurance Team Internal Audit	4 1 4		x				x					x	x		
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not based on appropriate intelligence	Appropriate intelligence is not gathered, e.g. performance data is incomplete, is out of date, or is not appropriately analysed or assessed to determine the needs of the community Do not engage with the appropriate sectors of the community / market	Ineffective use of limited resources. Customers outcomes are not achieved resulting in more expensive interventions being required.	JSNA. Community engagement arrangements. Intelligence Service. Performance Management Framework.	4 2 8	Plan. 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	x		
R04		Most appropriate and cost effective commissioning option to meet identified needs and achieve commissioning priorities and outcomes is not chosen.	relevant possible commissioning			4 2 8	Options appräisal undertaken on service design following assessment of customer needs. Appropriate procedure followed to commission the preferred option, egg, procurement, service re- design.	All Assistant Directors	Cabinet reports Governance questionnaire Internal Audit	4 1 4		x		x							x	x	x	
R05		Commissioning assessment process is not undertaken on a timely or regular basis.	Inadequate resources.	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 its may not		4 2 8	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.		Governance questionnaire Internal Audit	3 1 3		x									x	x		
	Service Delivery Arrangemen	to achieve the City Plan priorities		Fail to meet the needs of the City	 Service Planning Process. Performance Management Framework. 	4 3 12	Service Planning process is driven by the City Plan. Service Planning Process is communicated to all Assistant Directors.	Strategic Director People, Communications and Partnerships	Internal Audit Corporate Performance Management	3 2 6	Service Delivery Arrangements					x						x	x	
R07		The level of services delivered by the council does not meet custome needs and/or expectations.	Lack of understanding of the priorities (Lack of inancial resources to invest is changing arrangements Lack of benchmarking to identify service development opportunities Lack of management time to conside delivery improvements Capability issues Lack of capacity due to increased demand as a result of the Covid 19 and lockdown measures	 Required outcomes for oustomers not achieved. Reputational damage. Wasted resources. 	Service Planning Process. Performance management arrangements. Transformation Programme. Covid 19 Risk Register.	4 3 12	Performance in relation to the delivery of oucomes is regularly monitored.	All Assistant Directors	Corporate Performance Management Internal Audit Corporate Complaints	4 1 4		x				x					x	x		
R08		Performance targets are not set or do not clearly identify the acceptablevels of service delivery performance.	Lack of understanding of how to e 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	Governance questionnaire Corporate Performance management Internal Audit	3 1 3		×				x					x	x		
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.	Management not held to account for performance. Lack of resource or control to make	 No or delay in action taken to improve service which may have major impact on customers. Poor reputation for Council. 	Performance management. Performance	3 2 6	Management review performance on a regular basis and take appropriate action to rectify unacceptable performance.	All Assistant Directors	Corporate Performance management arrangements Internal Audit Corporate Complaints	3 1 3		x				x						x		
R10		Services fail to monitor their financi resources to ensure effective delivery of planned services.	monitoring. Lack of understanding of the service's financial position. Lack of complete or timely financial	Services not effectively delivered due to lack of s 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	Financial Resources Internal Audit	4 1 4														
R11		Services do not meet the needs of the City as key risks are not identified or appropriately managed	information. Potential barriers to the delivery of services are not identified or I. 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	Risk and Assurance Internal Audit	3 1 3														
	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 Covid 19	priorities and support communities.	City Plan. Partnership Boards. Partnership Framework.	4 2 8	Performance management arrangements include a review of the achievement of outcomes where partners have some responsibility for delivery. Corporate Partnership arrangements should be reviewed in light of the new City Plan.	Strategic Director People, Communications and Partnerships	Corporate Performance management Internal Audit	4 1 4	Partnership / Integrated Working										x	x	x	
R13		Lack of understanding by each partner as to objectives, and nature of partnership (e.g. responsibilities, applicable, sharing of profits, costs or losses, dispute resolution, governance, decision making, planning, risk sharing).	if	Delay in delivery of plans and outcomes for community. Lack of delivery of priorities.	d 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 arrangements.	Communications and Partnerships All Assistant Directors	Corporate Performance Management Governance questionnaire Internal Audit	4 1 4		x										x		

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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/supplier due to Covid 19 outbreak. Inadequate evaluation process	Fail to obtain value for mone Objectives/outcomes are not achieved. Most appropriate commissioning options are s not obtained.	/ Procurement Procedure Rules.	3 1	The Council's procurement procedures continue to be followed and good procurement practice is undertaken	I Assistant Directors	Internal Audit Risk and Assurance	3 1	3	Procurement										x	x	
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 (delberate, e.g. corruption or accidental).	Legal/financial penalties. Challenge, delays in award o contracts. Loss of reputation.	Procurement Procedure Rules in place. Procurement have skilled staff. Corporate Procurement support council officers.	2 1	Communication with COG / At Assistant Directors regarding failure to comply with Procurement Procedure Rules. Commissioners engage with Corporate procurement in enough time to undertake an appropriate and legal procurement process.		Internal Audit	2 1	2											x	x	
R16	Value for money not obtained.	Lack of competition, specifically as a result of the Covid 19 outbreak. Corruption. Inappropriate specification. Poor procurement planning.	Poor quality of goods/service and customer service. Pay higher prices - waste of scarce resources.	Procedure Rules in	3 2	Commissioners engage with Al Corporate procurement in encugh time to undertake an appropriate and legal procurement process.	I Assistant Directors	Internal Audit	3 1	3												x	
R17 Relationship / Contract Management	Contracts do not deliver the require objectives/outcomes.	Lack of clear contract/specification provisions in place to allow effective management of the contract. Lack of appreciation of importance o 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.	i.e. pay too much or poor service obtained. f Objectives are not achieved. Excessive resources used or dispute resolution.	management framework. Corporate	4 2	Contract management Al arrangements should be in place for all key contracts entered into by the Council.	I Assistant Directors	Governance questionnaire Internal Audit	4 1 -	4	Relationship / Contract Management	x				x					x	x	
R18 Legality	Council fails to act within its statutor powers.	Lack of contract management activity Jack 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	Councils actions are found to be ultra vires. Financial penalties. Legal challenge. Loss of reputation. Delay in delivery of outcomes	Procedure Rules.	3 1		ssistant Director of Law and overnance Il Assistant Directors	Law and Governance Governance questionnaire Internal Audit	3 1	3	Legality	x	x								x	x	
R19 Risk Management	major risks and opportunities to delivering priorities and plans.	aligned with delivering priorities. Senior Management/Members do no monitor the management of key risks to the Council. Risk appetite of the Council is not identified and communicated.	3	Risk Management Policy and Strategy. Integrated Assurance Framework. Covid 19 Risk Register.	3 2	The Council's strategic and corporate risks are identified, and assessed and managed 6 through COG and the Audit and Governance Committee. Risk Management Policy and Strategy to be reviewed.	nd property Services	Audit and Governance Committee	3 1	3	Risk Management	x									x	x	
R20 Corporate Performance Management	Performance reporting fails to give : full and accurate picture of the progress in achieving strategic priorities and outcomes.	a 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 intervention are required. Appropriate remedial actions are delayed.	Management Framework.	3 1	Development of the Asperformance management process in relation to delivering the priorities in the City Plan.	ssistant Director of Digital nd Customer Service	Corporate performance management Internal Audit	3 1 :	3	Performance Reporting					x						x	
R21 Financial Management	Strategic financial plans do not aligr to Council priorities, objectives and direction as set out in the City Plan.	Corporate and financial planning processes are not coordinated to	Plans made which are not adequately resourced Failure to achieve plans and outcomes for community Council financial resources overstretched.	MTFS Budget consultation process	4 1		xecutive Director of orporate Services	Financial Resources	4 1 ·	4	Financial Management			x	x								
R22	due to all critical factors likely to affect the Council's finances moving	Poor intelligence gathering or horizon scanning. Lack of resources. Lack of consultation/communication with senior officers. Lack of clarity of the financial support	inaccurate information. Plans made which are not	Strategic financial planning process. Covid 19 Risk Register.	4 3	Appropriate consultation and Ex intelligence gathering is undertaken in assessing the Council's short to medium term financial position.	xecutive Director of orporate Services	Financial Resources External Audit	3 1 :	3				x									x
R23		Financial savings in one area may	Savings plans are not achieved in practice.	Financial Reporting Procedures.	3 1	The Council's financial Exposition is regularly reported Ca to COG and Members.	xecutive Director of orporate Services	Financial Resources	3 1	3				x								x	
R24	The Council does not take all opportunities to pursue external funding when available.	Lack of awareness of funding stream available. Lack of planning regarding priorities t be able to react to available funding.	priorities in an efficient way. Some priorities may not be	Team.	3 1	Ensure that horizon scanning Exconsiders changes in future Consumers of funding.		Internal audit	3 1	3													
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 monitors the use As of all grant monies to ensure there is no loss.	ssistant Director of Finance	Internal Audit	3 1	3													
R26	and accurate picture of the progress to achieving corporate financial priorities and targets.	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	identify if achievement of all priorities are on track or if interventions are required. Appropriate remedial actions are delayed.	Performance Reporting. Performance Clinics.	3 1	reporting is aligned to performance reporting to identify any potential inaccuracies or inconsistencies.	xecutive Director of orporate Services	Financial Resources Corporate Performance Management	3 1	3				x		x						x	
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 payro provider.	Policies and procedures in place for operating the payroll system. Employee self Il service.	3 1		ssistant Director of people anagement	innernal Audit	3 1	3												x	x
R28	The Council fails to make payments to its suppliers and clients accuratel and on time.	Lack of resources to process the y required payments. Lack of appropriate checks on payments before processing. Lack of controls in place to ensure payments are processed per the required timescales.	Loss of reputation with suppliers. Claims for interest for late payments.	Procedures in place within the Purchase to Pay system	3 1	Procedures required for making payments accurately and on time are up to date and fully understood by staff within the payments service	ssistant Director of Finance	Internal Audit	3 1	3												x	x

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R29	The Council fails to process payments for benefits accurately or on time.	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	Established procedures are in place and followed by adequately trained staff for the assessment and processing of benefit claims.	Assistant Director of Digital and Customer Service	Internal Audit	4 1 4										x	×
R30 Income Collection (including CT/NNDR)		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	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.		 Financial Resources Internal Audit 	3 1 3	Income Collection (including CT/NNDR)		x							x	x
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. The Covid 19 outbreak has resulted in a worsening financial and domestic situation of many residents.	targets.	planning. 3 4	Clear performance measures and regular monitoring of the debtor position highlight potential loss of income.	Corporate Services	Financial Resources Internal Audit	3 2 6			x								
R32 Capital Programme Management	Capital projects do not support the delivery of strategic priorities and desired outcomes.		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.	Executive Director of Corporate Services	Financial Resources Internal Audit	3 1 3	Capital Programme Management		x						x	x	
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		3 3	Corporate approach to planning and monitoring of the delivery of the benefits of each project and the wider Capital Programme.	Executive Director of Corporate Services	Financial Resources Internal Audit	3 2 6									x	x	
R34 People Management	The council does not have the required skills and capacity to delive the City's priorities.	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 or self	Lack of or delay or increased costs in delivering priorities.		Workforce planning strategy in place that is appropriately monitored to ensure its is effectively implemented.		People Management Internal Audit	3 2 6	HR Management	x				x			x	x	
R35	Reduction in productivity and morale of workforce.	Instability due to ongoing changes. Job insecurity.	High absence/sickness rates. Stress related absence. Lower standards of service delivery. Increased costs. Increased homeworking has had a positive impact of staff morale.	Performance	Recognition of reduced capacity. Employees feeling valued and supported.	All Assistant Directors	Governance questionnaire People Management Internal Audit	4 2 8		x				x				x	
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. Additional measures due to Covid 19.	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. Inadeguate documentation	and Safety Statement of Intent. 4 2	H&S Strategy/Policy to be reviewed and revised. Revised Strategy/Policy to be agreed by COG.	Management	People Management Internal Audit	4 1 4	Health and Safety					x			x	x	
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 Chiel officers, managers and operational colleagues. Lack of clear responsibilities of premises managers, landlords and leaseholders.	and controls leading to injury. Key H&S risks not effectively managed leading to injury or death of the public, staff, suppliers or partners. H&S legal duties not fulfile and/or demonstrated. Reduced oversight and accountability at strategic and operational levels across the council leading to uninformed decision making. None compliance with quality	Corporate Health and Safety Team. 4 2	Continue to monitor Health and Safety Risks through the assurance framework and work with relevant colleagues to manage the risks in place.	Management	Head of HR and OD Internal Audit	4 1 4										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	Health and Safety Audits. Risk assessments developed for tasks 4 2 and council buildings	Continue to oversee the management of Health and Safety risks through the Executive Group and annual reporting to COG.	Assistant Director of People Management	People Management Internal Audit	4 1 4										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.	Ineffective decision making. Implementation of inappropriate controls. Existing controls not reviewed and revised in response to learning from incidents becoming out-of-date and ineffective. Avoidable repetition of incidents.	and Safety Team. Annual Health and	Continue to monitor compliance with incident reporting arrangements and address any areas for development.	Assistant Director of People Management	People Management Internal Audit	3 1 3										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 more remote working in response to Covid 19.	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.	plan. Rapid roll out of	The ICT strategy is clearly aligned to the priorities of the Council and the direction of travel for the provision of Council Services.	Assistant Director of Digital and Customer Service	ICT Internal Audit	4 1 4	ICT Infrastructure	x			x			x	x	x	
R41	ICT infrastructure is not resilient to 'disasters'.	Lack of planning for disasters (prever 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	impacting on delivery of priorities. Loss of productivity. Waste of financial resources due to excessive cost. Less efficient and effective	arrangements (ICT and in services).	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.	Assistant Director of Digital and Customer Service All Assistant Directors	ICT Internal Audit Business continuity officer	4 1 4		x			x			x	x	x	

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R42	Cyber Security	The Council is exposed to vulnerabilities and threats, both internal and external, (e.g. hacking, pibhing, denial of service attack) resulting in a loss of systems and/or confidential information.		confidence, finance and reputational damage. Fines / compensation. Loss of systems or data loss. Major business disruption.	Information Governance Group. Operational	place, inclu assessmer plan and re	ecurity Strategy is in uding and thread nt, development esponse plan.	Assistant Director of Digital and Customer Service	ICT Internal Audit	4 2 t	8	Cyber Security						x				x	x	
	Information Governance /	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.	Information Governance Group. ISO 27001. Cyber security arrangements	information security arr place which throughout	n governance and rangements in th are complied with t the organisation.	Executive Director of Corporate Services All Assistant Directors	Data Protection Office Governance questionnaire Internal Audit	3 1 3	3	Information Governance / Security	x	x								x	x	
	Business Continuity Management	of an incident.	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	respond in adverse conditions.	Corporate Business Continuity fronup. Business Continuity plans. Response to the first wave of Covid 19 was successful with no failures to deliver critical services.	reviewed au regular bas account the of concurrin	and tested on a sis and take into le cumulative effects ing incidents.	All Assistant Directors	Business Continuity Officer Internal Audit	4 1 4	4	Business Continuity Management	x								x	x	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 affectin services to community, safety of individuals. Loss of reputation.	Continuity Group. g Business Continuity	aware of th business co	he content of the continuity plans and d their role in	All Assistant Directors	Business Continuity Officer Internal Audit Governance questionnaire	4 1 4	4		x								x		x	
	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.	/Programme	programme clearly set o	out at the start and vement monitored		Project Office Risk and Assurance Internal Audit	3 1 3	3	Programme / Project Management	x			x						x	x	x
	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 technology. Assets become uneconomic to run. Lack of investment in asset management planning.	income. Fail to decrease costs.	Asset Management Plan. 3	monitored o basis, partit to changing changing so models.	on an ongoing ticularly in response g staffing levels and service delivery			3 2 6	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 monitoring or conditions of assets. Lack of knowledge of changes to the property portfolio.	Members of the public or staf are at risk of being harmed. Legal action taken against the Council. Reputational Damage.	Plan.	8 Condition o monitored o basis and n	ent Plan is updated d accurately on an	Assistant Director of Busines and Property Services	s Health and Safety Internal Audit	4 1 4	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 for anti fraud and corruption procedures embedded into processes.	Financial loss.	Anti fraud and corruption policy and procedures. 2	fraud risks and mainta 4 controls be	are aware of the swithin their area ained appropriate earing in mind o service delivery g levels.	All Assistant Directors	Governance questionnaire Internal Audit	2 2 4	4	Anti Fraud and Corruption	x										x	