**POLICY AND RESOURCES COMMITTEE – 12 JUNE 2017**

**PART I - DELEGATED**

**6. REVIEW OF STRATEGIC RISKS**

(CED)

1. **Summary**

1.1 This report gives details of progress against the Risk Treatment Plans for the Strategic Risks relating to the priorities identified in the Strategic Plan 2017-20.

2. **Details**

2.1 In accordance with the Council’s Risk Management Strategy, the Policy and Resources Committee determines which of the Council’s risks are ‘strategic’ and receives progress reports on their treatment. A strategic risk is defined as one that would seriously prejudice the achievement of the Strategic Plan.

2.2 The Council’s Strategic Plan 2017-2020 was approved by Council on 16 May 2017. The 8 strategic risks and the Service Plans in which they are managed, are listed below:

|  |  |
| --- | --- |
| **Strategic Risk** | **Service Plan** |
| 1) Failure to secure improvements to services | Community Partnerships  |
| 2) Failure to tell residents about improvements | Corporate Services  |
| 3) Failure to make progress on the sustainability action plan | Economic and Sustainable Development  |
| 4) Failure to engage the community in the Strategic Plan | Community Partnerships |
| 5) Failure to achieve Community Safety targets | Community Partnerships |
| 6) Failure to achieve the priorities of the community strategy through the LSP | Community Partnerships |
| 7) Failure to deliver the South Oxhey Initiative Project to desired outcomes and Objectives | Major Projects |
| 8) The medium term financial position worsens | Finance |

2.3 The relevant Heads of Service/Managers have reviewed the strategic risk(s) for which they are responsible and have updated their Risk Assessment and Treatment Plan(s).

2.4 The updated Strategic Risk Register and the Assessment & Treatment Plans, with deletions crossed through and new text shaded, are attached at Appendix 1.

3. **Options/Reasons for Recommendation**

3.1 The Policy and Resources Committee is responsible for monitoring the treatment of strategic risks.

4. **Policy/Budget Reference and Implications**

4.1 The recommendations in this report are within the Council’s agreed policy and budgets. The relevant policy is entitled Risk Management Strategy which was agreed on 6 July 2015.

5. **Financial, Legal, Equal Opportunities, Staffing, Environmental, Community Safety, Public Health, Customer Services Centre, Communications & Website, Risk Management and Health & Safety Implications**

5.1 None specific.

6. **Recommendation**

6.1 That the Policy and Resources Committee note the review of the Strategic Risk Register and approve the amendments to the Risk Assessment & Treatment Plans.

 Report prepared by: Phil King, Emergency Planning and Risk Manager

**Data Quality**

Data sources: Risk Registers and Risk Assessment & Treatment Plans

 Data checked by: Phil King, Emergency Planning and Risk Manager

 Data Rating:

|  |  |  |
| --- | --- | --- |
| 1 | Poor |  |
| 2 | Sufficient | ✓ |
| 3 | High |  |

 **Background Papers**

Strategic Plan 2017-2020 and Risk Management Strategy 2015

 **APPENDICES / ATTACHMENTS**

 Appendix 1 – Strategic Risk Register and Assessment & Treatment Plans

**APPENDIX 1**

**STRATEGIC RISK REGISTER**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| RiskRef | Risk | Impact | ImpactClassification | LikelihoodClassification | Reason for Assessment |  |  |
| *Brief Description – Title of Risk* | *See Impact Table* | *See Impact Table* | *See Likelihood Table* | *Use this box to describe how the score has been derived* |
| 1 | Failure to secure improvements to services | Service Disruption  | II | F | Additional Public Perception Surveys introduced.Review of shared Revenues and Benefits service. | Requires Treatment | No |
| Financial Loss | I | Last Review Date | 31/05/17 |
| Reputation | III | Next Milestone Date | 12/06/17 |
| Legal Implications | I | Next Review Date | 01/09/17 |
| People | I | Date Closed | -- |
|  |  |

**RISK ASSESSMENT AND TREATMENT PLAN**

|  |  |  |  |
| --- | --- | --- | --- |
| Risk Ref:  | 1 | Risk Title: | Failure to secure improvements to services |
| Responsibility | *Who is managing the risk?* | Management Board |
| Consequence | *What can go wrong?**How can it go wrong?**Has it gone wrong before?* | * There is a new set of Performance Indicators, some with no historic base
* Remaining PIs may dip
* PIs have suffered in periods of significant change
 |
| Cause / Trigger | *What happens to bring the risk into being?* | * Quarterly report to Management Board and half-yearly report to Committees/Members flags up any failure to hit targets.
* Less national performance data available for comparison.
* Some comparison data within Hertfordshire for which other districts may not be nearest neighbours for comparative purposes.
 |
| Existing Control | *What controls exist now to minimise the risk?* | * Service Planning framework
* Benchmarking
* Internal Audits
* Value for Money Strategy
* Corporate Consultation Action Plan
* Omnibus survey in place
* Omnibus survey updated to track perceptions of changes to key services such as Refuse and Recycling
 |
| Adequacy of Control | *What evidence is there that the existing**Controls are working? What would the Risk**Rating be without the existing controls?* | * Some PIs have dropped from previous year figures but public perception of TRDC remains above Hertfordshire average
 | Impact | Likelihood |
| III | D |
| Further Action / Controls Required | *What gaps have been identified?**What can be done to reduce the likelihood of**something going wrong and/or reduce the**Impact if something does go wrong?* | * ~~Strategic Service Review to continue.~~
* PIs to be reviewed by all Heads of Service.
* Income targets being monitored by Management Board
 |
| Cost / Resources | *Are there cost / resource implications in achieving the further action above?* | No additional resource requirements identified. | £ 0 |
| Current Status | *What is the current position on introducing**additional controls? What is the current**Risk Rating?* | * Impact and probability have not changed since last review.
* Omnibus survey in place to measure key corporate PIs.
* Failing services have been identified and additional performance support provided to them. These services are improving.
* Public perception of services has improved for Sports and Leisure (92% satisfaction), Parks and Open Spaces (92% satisfaction) and Doorstep recycling (85% satisfaction). ~~reduced in some areas but increased in others.~~ There are no statistically significant changes with satisfaction for refuse collection (80% satisfaction) and keeping Public Land Clear of Litter (78% satisfaction). ~~across all key areas, including leisure, parks and refuse remains above 70% satisfaction.~~
* Overall satisfaction with the Council has remained at ~~is~~ 73%, which is significantly higher than the national average of 68%, the highest in the county.
 | Impact | Likelihood |
| III | F |
| Critical Success Factor | *How will you know that the action taken has**worked? What will be the Risk Rating**outcome with the new controls?* | * Consultation feedback will continue to track perceived satisfaction with services.
* PIs will be reviewed in the light of current perceptions.
 | Impact | Likelihood |
| III | F |

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| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Impact | V = Catastrophic | IV = Critical | III = Significant | II = Marginal | I = Negligible |  |
|  |  |  |  |  |  |  |
| Likelihood | A = ≥98% | B = 75% - 97% | C = 50% - 74% | D = 25% - 49% | E = 3% - 24% | F = ≤2% |
|  |  |  |  |  |  |  |

**STRATEGIC RISK REGISTER**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| RiskRef | Risk | Impact | ImpactClassification | LikelihoodClassification | Reason for Assessment |  |  |
| *Brief Description – Title of Risk* | *See Impact Table* | *See Impact Table* | *See Likelihood Table* | *Use this box to describe how the score has been derived* |
| 2 | Failure to tell residents about improvements | Service Disruption  | I | E | The Council’s reputation might suffer if residents weren’t informed about their services and improvements made. Residents would not be able to make maximum use of local services. The measure in place to inform residents of improvements (Corporate Communications Strategy) reduces the likelihood of residents not being informed. | Requires Treatment | Yes |
| Financial Loss | I | Last Review Date | 30/05/17 |
| Reputation | III | Next Milestone Date | 12/06/17 |
| Legal Implications | I | Next Review Date | 01/09/17 |
| People | I | Date Closed | -- |
|  |  |

**RISK ASSESSMENT AND TREATMENT PLAN**

|  |  |  |  |
| --- | --- | --- | --- |
| Risk Ref:  | 2 | Risk Title: | Failure to tell residents about improvements |
| Responsibility | *Who is managing the risk?* | Communications Manager |
| Consequence | *What can go wrong?**How can it go wrong?**Has it gone wrong before?* | * Stakeholders not understanding/valuing the services the Council provides
* Vulnerable residents are not sufficiently informed about local service improvements
* Communications are not received by residents
* Communications initiatives and messages are not effectively co-ordinated
 |
| Cause / Trigger | *What happens to bring the risk into being?* | * Messages unclear or garbled
* Responsive rather than proactive
* Distribution failures (Three Rivers Times)
* Staff go on secondment, depart or are on sick leave
 |
| Existing Control | *What controls exist now to minimise the risk?* | * Regularly updated strategy and action plan with increased emphasis on quality controls.
* Editorial Working Party reviews TRT, Business Directory and A-Z.
* TRT distributor provides GPS tracking of delivery teams and delivery quality checked with staff who live in the district. Delivery reminder service implemented.
* Feedback mechanisms include Pensioners’ Forum, Youth Council, prize draw survey in democracy packs, welcome packs for new residents, surveys in TRT.
* Communications team action plan produced annually and reviewed twice a year.
* Communications plans for Council priorities include targets and evaluation.
* Herts Omnibus survey provides annual data on communications performance, including breakdowns for deprived and minority groups.
* Audio version of Three Rivers Times actively distributed for visually impaired or those with reading difficulties.
* Cross-department communication group meets bi-monthly.
* Monthly “What’s On” poster placed on noticeboards and distributed to community venues
* E-newsletters in place for Environment, Planning, Leisure and South Oxhey, Community Safety, include feedback mechanisms.
* Social media is in place and monitored and responded to.
 |
| Adequacy of Control | *What evidence is there that the existing**Controls are working? What would the Risk**Rating be without the existing controls?* | * Herts Omnibus survey 2016/17 shows 66% of respondents felt they were well informed or fairly well informed about local public services.
 | Impact | Likelihood |
| III | B |
| Further Action / Controls Required | *What gaps have been identified?**What can be done to reduce the likelihood of**something going wrong and/or reduce the**Impact if something does go wrong?* | * Below average staffing level weakens resilience
* Reviewing accessibility and publishing of Statutory Notices
* Reviewing Communications Team roles and functions
 |
| Cost / Resources | *Are there cost / resource implications in achieving the further action above?* |  | £ 0 |
| Current Status | *What is the current position on introducing**additional controls? What is the current**Risk Rating?* | * Corporate Communications Plan is monitored every 2 months through the cross-department communications group.
 | Impact | Likelihood |
| III | E |
| Critical Success Factor | *How will you know that the action taken has**worked? What will be the Risk Rating**outcome with the new controls?* | * Satisfaction with information provision and overall satisfaction

with the Council would further increase | Impact | Likelihood |
| II | E |

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| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Impact | V = Catastrophic | IV = Critical | III = Significant | II = Marginal | I = Negligible |  |
|  |  |  |  |  |  |  |
| Likelihood | A = ≥98% | B = 75% - 97% | C = 50% - 74% | D = 25% - 49% | E = 3% - 24% | F = ≤2% |
|  |  |  |  |  |  |  |

**STRATEGIC RISK REGISTER**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| RiskRef | Risk | Impact | ImpactClassification | LikelihoodClassification | Reason for Assessment |  |  |
| *Brief Description – Title of Risk* | *See Impact Table* | *See Impact Table* | *See Likelihood Table* | *Use this box to describe how the score has been derived* |
| 3 | Failure to make progress on sustainability  | Service Disruption  | I | D | The “Better Neighbourhoods” ~~“clean and green”~~ aim of the Strategic Plan includes the objective “We want to maintain high quality neighbourhoods and reduce the eco-footprint of the district” ~~“to maintain a high quality local environment and reduce the eco-footprint of the district”~~. The Council’s reputation would suffer if sustainability targets were not achieved.  | Requires Treatment | Yes |
| Financial Loss | II | Last Review Date | 30/05/17 |
| Reputation | III | Next Milestone Date | 12/06/17 |
| Legal Implications | II | Next Review Date | 01/09/17 |
| People | I | Date Closed | -- |
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**RISK ASSESSMENT AND TREATMENT PLAN**

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| --- | --- | --- | --- |
| Risk Ref:  | 3 | Risk Title: | Failure to make progress on sustainability  |
| Responsibility | *Who is managing the risk?* | Principal Planning Officer ~~Head of Economic and Sustainable Development~~ |
| Consequence | *What can go wrong?**How can it go wrong?**Has it gone wrong before?* | * The authority fails to lead by example on sustainable initiatives and does not provide the opportunities for residents to take advantage of, for example, energy saving measures
* Failure to resource sustainability projects properly
* Failure to promote initiatives
* TRDC Greenhouse Gas (GHG) emissions could increase
 |
| Cause / Trigger | *What happens to bring the risk into being?* | * Monitoring reveals that the actions are not taking place and targets are not being achieved
* HECA report shows increasing per capita carbon dioxide emissions in the District
* HECA report shows increasing fuel poverty in the District
* GHG emissions from Council operations increase
 |
| Existing Control | *What controls exist now to minimise the risk?* | * Action Plan for the development of Climate Change Strategy agreed
* Annual progress reports to Management Board and Committee
* Membership of the Herts Sustainability Forum with quarterly meetings
* Awareness raising through Hertfordshire wide Green our Herts group
* Information is provided via the Green our Herts website
* Greenhouse Gas emissions data submitted annually to ~~DECC~~ BEIS
* Monitoring through Climate Change Strategy Action Plan and by internal Sustainable Officer Group
* ~~Confirmation of arrangements for ongoing environmental management system~~
* Home Energy Conservation Act (HECA) report submitted to ~~DECC~~ BEIS biannually
 |
| Adequacy of Control | *What evidence is there that the existing**Controls are working? What would the Risk**Rating be without the existing controls?* | * Stakeholders are kept up to date on progress via annual reporting
* Internal audits
* Submissions to ~~DECC~~ BEIS
* Compliance with planning policies
 | Impact | Likelihood |
|  III ~~IV~~ | D |
| Further Action / Controls Required | *What gaps have been identified?**What can be done to reduce the likelihood of**something going wrong and/or reduce the**Impact if something does go wrong?* | * ~~Maintenance and monitoring of an Environmental Management System~~
* Continued development and promotion of the Green our Herts website
* Continued monitoring of Greenhouse gas emissions and reporting to ~~DECC~~ BEIS
* Monitoring and reporting of actions through the Climate Change Strategy Action Plan
* Produce updated HECA report by March ~~2017~~ 2019
 |
| Cost / Resources | *Are there cost / resource implications in achieving the further action above?* | There are potential future resource implications of the actions above | £ 0 |
| Current Status | *What is the current position on introducing**additional controls? What is the current**Risk Rating?* | * Additional controls to be completed during ~~2016/17~~ 2017/18
 | Impact | Likelihood |
| III | E |
| Critical Success Factor | *How will you know that the action taken has**worked? What will be the Risk Rating**outcome with the new controls?* | * ~~Successful implementation of an Environmental Management System~~
* Continued progress against Climate Change Strategy Action Plan
* Maintenance or reduction of GHG emissions
* ~~Climate Change Strategy implemented~~
* Actions in HECA report achieved
* Compliance to policy DM4
 | Impact | Likelihood |
| III | ~~F~~ E |

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|  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |
| Likelihood | A = ≥98% | B = 75% - 97% | C = 50% - 74% | D = 25% - 49% | E = 3% - 24% | F = ≤2% |
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**STRATEGIC RISK REGISTER**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| RiskRef | Risk | Impact | ImpactClassification | LikelihoodClassification | Reason for Assessment |  |  |
| *Brief Description – Title of Risk* | *See Impact Table* | *See Impact Table* | *See Likelihood Table* | *Use this box to describe how the score has been derived* |
| 4 | Failure to engage the community in the Strategic Plan | Service Disruption  | I | E | Evidence held on successful consultations and high customer satisfaction data.  | Requires Treatment | Yes |
| Financial Loss | I | Last Review Date | 31/05/17 |
| Reputation | III | Next Milestone Date | 12/06/17 |
| Legal Implications | I | Next Review Date | 01/09/17 |
| People | I | Date Closed | -- |
|  |  |

**RISK ASSESSMENT AND TREATMENT PLAN**

|  |  |  |  |
| --- | --- | --- | --- |
| Risk Ref:  | 4 | Risk Title: | Failure to engage the community in the Strategic Plan |
| Responsibility | *Who is managing the risk?* | Head of Community Partnerships |
| Consequence | *What can go wrong?**How can it go wrong?**Has it gone wrong before?* | * Poor response rates from the community or hard to reach groups.
* Lack of consultation of community in priorities set by the Council.
 |
| Cause / Trigger | *What happens to bring the risk into being?* | * Consultation methods fail to engage hard to reach groups
* Poor consultation methods used
* Insufficient resources to engage groups
* Hard to reach groups fail to remain engaged due to lack of TRDC response
* Reduction in consultation budget
 |
| Existing Control | *What controls exist now to minimise the risk?* | * Corporate consultation data is analysed by race, gender, disability, age, area of residence and household income
* Consultation best practice guidance updated for all services
* Focus Groups held with hard to reach groups when evidence suggests differential impact
* Consultation Action Plan has been developed
* Priorities for engagement have been identified
 |
| Adequacy of Control | *What evidence is there that the existing**Controls are working? What would the Risk**Rating be without the existing controls?* | * Evidence held on successful consultation and customer satisfaction
 | Impact | Likelihood |
| III | D |
| Further Action / Controls Required | *What gaps have been identified?**What can be done to reduce the likelihood of**something going wrong and/or reduce the**Impact if something does go wrong?* | * Maintain implementation of corporate Consultation Action Plan.
 |
| Cost / Resources | *Are there cost / resource implications in achieving the further action above?* | No additional resource requirements identified. | £ 0 |
| Current Status | *What is the current position on introducing**additional controls? What is the current**Risk Rating?* | * Impact and probability have not changed since last review.
* Consultation on potential income generation schemes delivered
 | Impact | Likelihood |
| III | E |
| Critical Success Factor | *How will you know that the action taken has**worked? What will be the Risk Rating**outcome with the new controls?* | * All key groups represented in corporate consultation feedback.
* Risk could be closed.
 | Impact | Likelihood |
| III | F |

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|  |  |  |  |  |  |  |
| Impact | V = Catastrophic | IV = Critical | III = Significant | II = Marginal | I = Negligible |  |
|  |  |  |  |  |  |  |
| Likelihood | A = ≥98% | B = 75% - 97% | C = 50% - 74% | D = 25% - 49% | E = 3% - 24% | F = ≤2% |
|  |  |  |  |  |  |  |

**STRATEGIC RISK REGISTER**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| RiskRef | Risk | Impact | ImpactClassification | LikelihoodClassification | Reason for Assessment |  |  |
| *Brief Description – Title of Risk* | *See Impact Table* | *See Impact Table* | *See Likelihood Table* | *Use this box to describe how the score has been derived* |
| 5 | Failure to achieve Community Safety targets | Service Disruption  | II | F | Strategy continues to meet majority of targets. Individual targets not met are being addressed by local action plans. | Requires Treatment | No |
| Financial Loss | I | Last Review Date | 31/05/17 |
| Reputation | III | Next Milestone Date | 12/06/17 |
| Legal Implications | I | Next Review Date | 01/09/17 |
| People | I | Date Closed | -- |
|  |  |

**RISK ASSESSMENT AND TREATMENT PLAN**

|  |  |  |  |
| --- | --- | --- | --- |
| Risk Ref:  | 5 | Risk Title: | Failure to achieve Community Safety targets |
| Responsibility | *Who is managing the risk?* | Head of Community Partnerships |
| Consequence | *What can go wrong?**How can it go wrong?**Has it gone wrong before?* | * Ineffective target setting.
* Resources not allocated to address actions and changes in recording systems.
* Initiatives fail to meet targets.
* Public do not understand what work is being achieved.
* Overall strategy has met strategic targets.
 |
| Cause / Trigger | *What happens to bring the risk into being?* | * Strategy not translated into action plans for each partner agency.
* Action plan not monitored for impact and corrective action.
* Monitoring systems fail.
* Poor practice and enforcement by partners.
* Residents mis-informed by national media.
* Reduction in funding to partnership.
* No joint risk management.
* Lack of commitment of staffing resources from partners.
* Lack of equality monitoring.
 |
| Existing Control | *What controls exist now to minimise the risk?* | * Quarterly performance reports to Community Safety Board and Co-ordination Group.
* 6 monthly reports to Members via MIB.
* Briefings with Leader and Lead Member.
* Participation in ~~Thriving~~ Families First, Adults with Complex Needs, Offender Management Group and ASB Action Group.
* Equality impact monitored.
 |
| Adequacy of Control | *What evidence is there that the existing**Controls are working? What would the Risk**Rating be without the existing controls?* | * Strategy overall is on target.
* Where individual targets not met new action plans have been put in place and targets revised annually.
 | Impact | Likelihood |
| III | D |
| Further Action / Controls Required | *What gaps have been identified?**What can be done to reduce the likelihood of**something going wrong and/or reduce the**Impact if something does go wrong?* | * ~~Seek county clarity on funding sources.~~
* Continue to develop joint funding bids for projects and bid to PCC funds for larger projects once a year.
* Community Safety Board to review funding position following decision of Police & Crime Commissioner for 2017-18.
 |
| Cost / Resources | *Are there cost / resource implications in achieving the further action above?* | Staff time  | £ 0 |
| Current Status | *What is the current position on introducing**additional controls? What is the current**Risk Rating?* | * ~~Grants reviewed, and sustainability proposals being reviewed.~~
* PCC grant bids submitted with significant success. Small grant bids being developed.
* Shared ASB management tool in place.
* ~~Thriving~~ Families First programme in place and Housing Challenge Worker funding secured for 3 years.
* Adults with Complex Needs Pilot ~~in place and funded.~~ coming to an end. Decommissioning plan in place.
* New Community Support Service Pilot for people with mental health difficulties jointly funded through partnership.
* Domestic Abuse Caseworker funding secured in partnership for three years. ~~funding review in progress.~~
* ~~Funding in place for 2016-17 following decision of PCC.~~
* Cross border analyst post funded for three years in partnership.
* Scam project funded by PCC for 2017/18.
* Community Safety Board meeting alongside Local Strategic Partnership to integrate decision making.
* There was a rise in a number of crime areas in the last year due to changes in recording systems – these have been ~~used as new baselines for current year targets~~ reviewed for 2017/18.
 | Impact | Likelihood |
| III | F |
| Critical Success Factor | *How will you know that the action taken has**worked? What will be the Risk Rating**outcome with the new controls?* | * Targets of strategy met for year.
* Review new risks at that point.
 | Impact | Likelihood |
| III | F |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Impact | V = Catastrophic | IV = Critical | III = Significant | II = Marginal | I = Negligible |  |
|  |  |  |  |  |  |  |
| Likelihood | A = ≥98% | B = 75% - 97% | C = 50% - 74% | D = 25% - 49% | E = 3% - 24% | F = ≤2% |

**STRATEGIC RISK REGISTER**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| RiskRef | Risk | Impact | ImpactClassification | LikelihoodClassification | Reason for Assessment |  |  |
| *Brief Description – Title of Risk* | *See Impact Table* | *See Impact Table* | *See Likelihood Table* | *Use this box to describe how the score has been derived* |
| 6 | Failure to achieve the priorities of the Community Strategy through the LSP | Service Disruption  | I | D | No further funding secured yet for Local Strategic Partnership. | Requires Treatment | Yes |
| Financial Loss | I | Last Review Date | 31/05/17 |
| Reputation | III | Next Milestone Date | 12/06/17 |
| Legal Implications | I | Next Review Date | 01/09/17 |
| People | I | Date Closed | -- |
|  |  |

**RISK ASSESSMENT AND TREATMENT PLAN**

|  |  |  |  |
| --- | --- | --- | --- |
| Risk Ref:  | 6 | Risk Title: | Failure to achieve the priorities of the Community Strategy through the LSP |
| Responsibility | *Who is managing the risk?* | Head of Community Partnerships |
| Consequence | *What can go wrong?**How can it go wrong?**Has it gone wrong before?* | * Failure to deliver on the strategy by some partners.
* Loss of resources to support achievement of the priorities.
* Action plans not effectively implemented.
 |
| Cause / Trigger | *What happens to bring the risk into being?* | * Loss of national funding streams.
* Changes in priorities of individual partners.
* Budget limitations.
* Poor development of action plans.
* Limited buy in to strategy by partners.
 |
| Existing Control | *What controls exist now to minimise the risk?* | * Themed updates provided to board on strategy priorities.
* Key performance indicators being tracked.
* Regular briefing with leader.
* Regular meetings of LSP Board.
* Review of funding streams.
* Review of Community Strategy.
 |
| Adequacy of Control | *What evidence is there that the existing**Controls are working? What would the Risk**Rating be without the existing controls?* | * Progress made on key projects in the District.
* Challenge provided to poor performance.
* ~~Board reviewing impact of New Herts Forward Programmes including Adults with Complex Needs and Health and Social Care review.~~
* ~~Opportunities provided by second phase of Public Health Offer.~~
* Funding secured for ~~Thriving~~ Families First Housing challenge, Domestic Abuse Caseworker and Community Support Service. ~~and Adults with Complex Needs Project. Further review of Domestic Abuse services across the County in place.~~
 | Impact | Likelihood |
| III | C |
| Further Action / Controls Required | *What gaps have been identified?**What can be done to reduce the likelihood of**something going wrong and/or reduce the**Impact if something does go wrong?* | * Assess new sources of potential shared funding for local priorities from outside sources.
* Maintain risk assessment of all proposals for funding and joint action.
* Assess impact of STP Prevention Plan on investments in projects.
 |
| Cost / Resources | *Are there cost / resource implications in achieving the further action above?* | * Staff time.
* Partners funding and commitment.
 | £ 0 |
| Current Status | *What is the current position on introducing**additional controls? What is the current**Risk Rating?* | * ~~Review completed of LSP and CSP Board meetings.~~
* ~~Potential funding sources identified for future years.~~
* ~~Priorities raised with Hertfordshire Health and Wellbeing Board and Commissioning Staff.~~
* Joint funding agreed for key projects.
* Limited funding available from some partner agencies.
* Community Strategy being reviewed by Board in light of new priorities of all partners.
* Partnership Board now continuing joint meetings with Community Safety Partnership Board.
 | Impact | Likelihood |
| III | D |
| Critical Success Factor | *How will you know that the action taken has**worked? What will be the Risk Rating**outcome with the new controls?* | * Partnership to agree new priorities for next five years.
* Partnership achieves ~~further~~ progress on new priorities ~~in areas of deprivation in sustainable manor~~.
* Potential external funding sources for priorities identified.
 | Impact | Likelihood |
| III | E |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Impact | V = Catastrophic | IV = Critical | III = Significant | II = Marginal | I = Negligible |  |
|  |  |  |  |  |  |  |
| Likelihood | A = ≥98% | B = 75% - 97% | C = 50% - 74% | D = 25% - 49% | E = 3% - 24% | F = ≤2% |
|  |  |  |  |  |  |  |

**STRATEGIC RISK REGISTER**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| RiskRef | Risk | Impact | ImpactClassification | LikelihoodClassification | Reason for Assessment |  |  |
| *Brief Description – Title of Risk* | *See Impact Table* | *See Impact Table* | *See Likelihood Table* | *Use this box to describe how the score has been derived* |
| 7 | Failure to deliver the South Oxhey Initiative Project to desired outcomes and objectives. | Service Disruption  | II | D | This is a key project for the Council. The business case is reported and agreed by Executive Committee in Jan 2012. Resolution to redevelop district centre. Operational risks register for project in place. | Requires Treatment | Yes |
| Financial Loss | III | Last Review Date | 25/05/17 |
| Reputation | IV | Next Milestone Date | 01/03/18 |
| Legal Implications | II | Next Review Date | 01/11/17 |
| People | II | Date Closed | -- |
|  |  |

**RISK ASSESSMENT AND TREATMENT PLAN**

|  |  |  |  |
| --- | --- | --- | --- |
| Risk Ref:  | 7 | Risk Title: | Failure to deliver the South Oxhey Initiative Project to desired outcomes and Objectives |
| Responsibility | *Who is managing the risk?* | Alan Head, Head of Property and Major Projects |
| Consequence | *What can go wrong?**How can it go wrong?**Has it gone wrong before?* | * ~~Failure to achieve Compulsory Purchase Orders~~
* Vacant Possession costs escalate beyond budget
* Project not delivered to programme
* Failure to achieve desired objective and outcomes as defined in PID
 |
| Cause / Trigger | *What happens to bring the risk into being?* | * ~~CPO process fails and vacant possession not delivered for developer~~
* Market forces
* Scheme parameters revised on grounds of design or viability
* Developer fails to deliver
 |
| Existing Control | *What controls exist now to minimise the risk?* | * Project management team appointed to advise Council.
* Project management processes in place and reviewed regularly
* Policy & Resources Committee receives regular reports on progress of project.
 |
| Adequacy of Control | *What evidence is there that the existing**Controls are working? What would the Risk**Rating be without the existing controls?* | * Update reports on progress to Project Board and committee. Internal audit report.
 | Impact | Likelihood |
| IV | C |
| Further Action / Controls Required | *What gaps have been identified?**What can be done to reduce the likelihood of**something going wrong and/or reduce the**Impact if something does go wrong?* | * See project specific risk register
 |
| Cost / Resources | *Are there cost / resource implications in achieving the further action above?* | Budget allocated |  |
| Current Status | *What is the current position on introducing**additional controls? What is the current**Risk Rating?* | Project Board in place | Impact | Likelihood |
| IV | D |
| Critical Success Factor | *How will you know that the action taken has**worked? What will be the Risk Rating**outcome with the new controls?* | * ~~Committee approval to proceed with project~~
* ~~Developer appointed~~.
* Outcomes and objectives achieved
 | Impact | Likelihood |
| III | E |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Impact | V = Catastrophic | IV = Critical | III = Significant | II = Marginal | I = Negligible |  |
|  |  |  |  |  |  |  |
| Likelihood | A = ≥98% | B = 75% - 97% | C = 50% - 74% | D = 25% - 49% | E = 3% - 24% | F = ≤2% |
|  |  |  |  |  |  |  |

**STRATEGIC RISK REGISTER**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| RiskRef | Risk | Impact | ImpactClassification | LikelihoodClassification | Reason for Assessment |  |  |
| *Brief Description – Title of Risk* | *See Impact Table* | *See Impact Table* | *See Likelihood Table* | *Use this box to describe how the score has been derived* |
| 8 | The medium term financial position worsens. In particular that the General Fund balance falls below the minimum prudent threshold and capital funding is insufficient to meet the capital programme  | Service Disruption  | IV | D | The current Medium Term Financial Plans has prudent balances for the next 3 years, assuming that the ~~savings~~ additional income ~~identified through the Service Review process are~~ is achieved. The Council has made no provision to borrow funds for the capital programme over the current medium term. This is subject to the development of the SOI and the retender of the Leisure Management Contract. Members will be kept updated as the situation progresses. | Requires Treatment | Yes |
| Financial Loss | ~~III~~ IV | Last Review Date | 30/05/17 |
| Reputation | III | Next Milestone Date | 12/06/17 |
| Legal Implications | II | Next Review Date | 01/09/17 |
| People | II | Date Closed | -- |

**RISK ASSESSMENT AND TREATMENT PLAN**

|  |  |  |  |
| --- | --- | --- | --- |
| Risk Ref:  | 8 | Risk Title: | The medium term financial position worsens |
| Responsibility | *Who is managing the risk?* | Director of Finance |
| Consequence | *What can go wrong?**How can it go wrong?**Has it gone wrong before?* | * Revenue and/or capital finances insufficient to fulfil current and future service delivery
 |
| Cause / Trigger | *What happens to bring the risk into being?* | * Reduced Government grant
* Unforeseen additional expenditure required
* Reduced income
* Significant variation in interest rate
* Significant fall in Council Tax and/or NNDR collection rates
* Unforeseen legislative changes
 |
| Existing Control | *What controls exist now to minimise the risk?* | * Regular budget monitoring reports to committees
* Budgetary and Financial Risk Register reviewed and updated as part of the budget monitoring process
* Early identification of budgetary pressure when reviewing the medium term financial plan during the budget setting process
* Audited Statement of Accounts, including Annual Governance Statement
 |
| Adequacy of Control | *What evidence is there that the existing**Controls are working? What would the Risk**Rating be without the existing controls?* | * Over the medium term, the prudent working balance has not been breached
* Continual drive for efficiency savings and further income generation
* Annual audited Statement of Accounts
 | Impact | Likelihood |
| V | B |
| Further Action / Controls Required | *What gaps have been identified?**What can be done to reduce the likelihood of**something going wrong and/or reduce the**Impact if something does go wrong?* | * Service Reviews to identify ~~savings and~~ efficiencies and additional income
* Drive to increase Business Rate income
* Drive to increase commercial income
 |
| Cost / Resources | *Are there cost / resource implications in achieving the further action above?* | None identified | £0 |
| Current Status | *What is the current position on introducing**additional controls? What is the current**Risk Rating?* | Service Reviews ~~meetings~~ continue to take place during ~~2016/17~~ 2017/18.~~Process to identify under used property assets is being undertaken~~Property Investment Strategy is in place. | Impact | Likelihood |
| IV | D |
| Critical Success Factor | *How will you know that the action taken has**worked? What will be the Risk Rating**outcome with the new controls?* | * Balances will be above the prudent minimum over the three year term of the financial plan and prudential borrowing is not currently required to fund capital expenditure
 | Impact | Likelihood |
| IV | D |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Impact | V = Catastrophic | IV = Critical | III = Significant | II = Marginal | I = Negligible |  |
|  |  |  |  |  |  |  |
| Likelihood | A = ≥98% | B = 75% - 97% | C = 50% - 74% | D = 25% - 49% | E = 3% - 24% | F = ≤2% |
|  |  |  |  |  |  |  |