**POLICY AND RESOURCES COMMITTEE – 12 SEPTEMBER 2016**

**PART I - DELEGATED**

**7. REVIEW OF STRATEGIC RISKS**

(CED)

1. **Summary**

1.1 This report gives details of progress against the Risk Treatment Plans for the Strategic Risks identified in the Strategic Plan 2016-19.

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 2016-2019, which was approved by Council on 23 February 2016, contains 9 strategic risks. These 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 |
| 9) Capita does not deliver the ICT service according to specification or meet targets - poor performance or contract fails | ICT  |

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 strategic risk no. 9 (Capita and ICT) was closed when the contract ended on 30 June 2016. Since then the ICT service has been an in-house operation, with Amicus ITS providing the Service Desk function. The risks associated with the new ICT service are considered to be “operational” and therefore no longer included on the Strategic Risk Register.

2.5 At its meeting on 7 December 2015, the Policy and Resources Committee suggested that an additional risk be added in relation to staff resilience and how the Council could mitigate that risk. Management Board had reviewed this in 2014 and concluded that staffing resilience was an operational risk, rather than strategic, and this is still their view. All Service Plan Risk Registers include the risk of insufficient staff and these plans are monitored by the relevant Committee. Operational risks and their treatment plans are also reported to the Audit Committee.

2.6 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 2016-2019 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 | 04/07/16 |
| Reputation | III | Next Milestone Date | 12/09/16 |
| Legal Implications | I | Next Review Date | 08/11/16 |
| 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.
* ~~Most~~ 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 ~~and Star Chamber exercise~~
* Benchmarking
* Internal Audits
* Value for Money Strategy
* Corporate Consultation Action Plan
* Omnibus survey in place
* ~~Improvement action plan in place for shared Revenues and Benefits service~~
* 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 ~~be undertaken~~.
* PIs to be reviewed by all Heads of Service.
 |
| 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 reduced in some areas but increased in others. There are no statistically significant changes and satisfaction across all key areas, including leisure, parks and refuse remains above 70% satisfaction.
* Overall satisfaction with the Council is 73%, which is 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 | 08/07/16 |
| Reputation | III | Next Milestone Date | 12/09/16 |
| Legal Implications | I | Next Review Date | 31/12/16 |
| People | I | Date Closed | -- |
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**RISK ASSESSMENT AND TREATMENT PLAN**

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| --- | --- | --- | --- |
| 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.
* Visitor and Leisure Guide published in Spring 2016.
* 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 2015/16 shows 67% 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 maintenance of Noticeboards
 |
| 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% |
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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* |
| 3 | Failure to make progress on sustainability  | Service Disruption  | I | D | The “clean and green” aim of the Strategic Plan includes the objective “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 | 19/07/16 |
| Reputation | III | Next Milestone Date | 12/09/16 |
| Legal Implications | II | Next Review Date | 23/01/17 |
| 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?* | 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
* Confirmation of arrangements for ongoing environmental management system
* Home Energy Conservation Act (HECA) report submitted to DECC biannually
* ~~CPlan monitoring tool~~
 |
| 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
* Compliance with planning policies ~~through CPlan~~
 | Impact | Likelihood |
| 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
* Monitoring and reporting of actions through the Climate Change Strategy and Action Plan
* Produce updated HECA report by March 2017
 |
| 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 ~~2015/16~~ 2016/17
 | 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
* Maintenance or reduction of GHG emissions
* Climate Change Strategy implemented
* Actions in HECA report achieved
* Compliance to policy DM4 ~~through CPlan~~
 | 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% |
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**STRATEGIC RISK REGISTER**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| 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 | 04/07/16 |
| Reputation | III | Next Milestone Date | 12/09/16 |
| Legal Implications | I | Next Review Date | 08/11/16 |
| People | I | Date Closed | -- |
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**RISK ASSESSMENT AND TREATMENT PLAN**

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| --- | --- | --- | --- |
| 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 ~~being developed~~ 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**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| 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 | 04/07/16 |
| Reputation | III | Next Milestone Date | 12/09/16 |
| Legal Implications | I | Next Review Date | 08/11/16 |
| People | I | Date Closed | -- |
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**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, 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.
* Community Safety Board to review funding position following decision of Police & Crime Commissioner for ~~2016-17~~ 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.
* Shared ASB management tool in place.
* Thriving Families programme in place.
* Adults with Complex Needs Pilot in place and funded.
* Domestic Abuse funding review in progress.
* Funding in place for ~~2015-16~~ 2016-17 following decision of PCC.
* 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.
 | 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 |

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| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Impact | V = Catastrophic | IV = Critical | III = Significant | II = Marginal | I = Negligible |  |
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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* |
| 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 | 04/07/16 |
| Reputation | III | Next Milestone Date | 12/09/16 |
| Legal Implications | I | Next Review Date | 08/11/16 |
| People | I | Date Closed | -- |
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**RISK ASSESSMENT AND TREATMENT PLAN**

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| --- | --- | --- | --- |
| 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.
 |
| 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 ~~new~~ second phase of Public Health Offer.
* Funding secured for Thriving Families Housing challenge 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?* | * ~~Complete review of LSP following pilot phase of joint meetings with Community Safety Partnership.~~
* Assess new sources of potential shared funding for local priorities.
* Maintain risk assessment of all proposals for funding and joint action.
 |
| 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.
* Partnership Board now ~~piloting~~ 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 achieves further progress on priorities in areas of deprivation in sustainable manor.
 | Impact | Likelihood |
| III | 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% |
|  |  |  |  |  |  |  |

**RISK REGISTER**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| 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 | 10/08/16 |
| Reputation | IV | Next Milestone Date | 30/11/16 |
| Legal Implications | II | Next Review Date | 30/11/16 |
| 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 Major Projects |
| Consequence | *What can go wrong?**How can it go wrong?**Has it gone wrong before?* | * ~~TRDC decide not to proceed with project~~
* ~~Failure to appoint a developer partner~~
* ~~Failure to provide vacant possession for developer~~
* 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?* | * ~~Funding not available~~
* Market forces
* ~~Lack of interest in project from developer community~~
* CPO process fails and vacant possession not delivered for developer
* 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 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* | * ~~Audit report recommendations to implement project board to be approved via committee process. PID in place.~~
* 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 savings identified through the Service Review process are 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. Members will be kept updated as the situation progresses. | Requires Treatment | Yes |
| Financial Loss | III | Last Review Date | 03/07/16 |
| Reputation | III | Next Milestone Date | 23/01/17 |
| Legal Implications | II | Next Review Date | 23/01/17 |
| 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
* ~~Robust budget setting process~~
 |
| 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
 |
| 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 Review meetings ~~are taking place between October 2014 and February 2015~~ continue to take place during 2016/17
* ~~A more robust process for identifying occupied premises is being undertaken~~
* Process to identify under used property assets is being undertaken
 | 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 borrowing in not 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% |
|  |  |  |  |  |  |  |

**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* |
| 9 | Capita does not deliver the ICT service according to specification or meet targets - poor performance or contract fails | Service Disruption  |  |  | Contract ended on 30 June 2016 - risk closed | Requires Treatment | -- |
| Financial Loss |  | Last Review Date | -- |
| Reputation |  | Next Milestone Date | -- |
| Legal Implications |  | Next Review Date | -- |
| People |  | Date Closed | 30/06/16 |
|  |  |