Strategic Risk Report

Generated on: 13 May 2019 16:08



Risk	Current Risk	Key risk indicators	Consequences	Internal Controls	Supporting Description Internal Controls		Evidence of Assurance	Actions	Latest Note	Assigned To
SR01 Workforce skills and knowledge	Likelihood	Recruitment levels Training needs analysis Competence framework Increased requests for partnership working	Work is not completed to expected quality standards Loss of key staff Increase in complaints Poor or inconsistent services Projects not delivered on time / budget /quality Unrealistic workloads leading to absence/increased sickness levels. Failure to attract, recruit and retain suitable staff	roles identified and service resilience plan in place	Key specialist roles to be considered and reported to SMB on an individual case by case basis, based on role (legal requirement) or single manning role and service resilience plan in place e.g. Identification and assessment of role(s) Detailed work instructions. Up to date work plan for specialist role Centralised record retention.	Management (Policies &	performance reporting to Strategic Management Board, Personnel and Development Committee.	requested to complete individual Resource Plans that detail resource requirements to deliver	2019 Amended Actions on behalf of the Head of HR, ICT and Facilities Management.	Head of HR, ICT and Facilities Management
			Loss of knowledge and expertise	Up to date policies accessible to officers	All Officers are made aware of Councils Policies with specific emphasis given to those relevant to service provision.			The 5 Councils have introduced the Vacancy Management Protocol		
				Service based performance management information	Services have developed robust and reliable performance management system(s) that reflects the activities of the respective service including complaints, comments and FOI requests.			 Following submission of individual Work stream Resource Plans to Chief Executive Implementation Group - May 2019, may need to consider retention payments to key post holders. Back filling posts, endorsed by Chief Executive Implementation 		
					Performance system to include meaningful comparison to external bench marking information (where available).			Group (May 2019) as necessary to support the delivery of customer services.		
				Periodic formal quality reviews undertaken by Management	System of periodic quality reviews are in place that allows for compliance with operational procedures, data integrity and accuracy.					
				Procedures reflect application of policy						
SR02 External and internal regulatory framework (Brexit)	Likelihood	 Strategic Risk Register action plan slippage. Legal 	Wrong or illegal decisions taken (Ultra Vires) Complaints	Published contract register used for contract renewal	are due for renewal. This should allow the	Internal	Complaint monitoring and reporting to SMB quarterly			

Risk	Current Risk	Key risk indicators	Consequences	Internal Controls	Supporting Description Internal Controls	Assurance Level	Evidence of Assurance	Actions	Latest Note	Assigned To
		challenges to decisions. Issues from annual assurance review not being addressed or slippage. Audit recommendations not being implemented,	(justifiable) • Reputational damage breach of legislation	Legal Service support	sufficient time to prepare a project plan. • All Cabinet reports are reviewed by the Monitoring Officer. • Legal advice is provided /sought at Strategic Management Board meetings. • Legal Services provide advice to Services as regards decision making.	Management)			of Quarter 4 monitoring.	
SR03 Reduction in Government funding	Likelihood 16	Budget Monitoring External Networks and External Advisor Memberships highlighting emerging issues / policy changes Relationship Manager with Valuation Office Service Performance Information in relation to demand for services or lower usage	Reduction in service level for statutory services Reputational damage	Monthly budgetary control reports Service based performance management information Medium Term Financial Plan Income Maximisation	Monthly budgetary control process are in place and complied with, enabling accurate financial reporting of expenditure against planned contractual delivery. Services have developed robust and reliable performance management system(s) that reflects the activities of the respective service including complaints, comments and FOI requests. Performance system to include meaningful comparison to external bench marking information (where available). Compilation of Medium Term Financial Plan, which is based on the financial implications of the Corporate Plan, reviewed annually by Full Council, enabling Members to make informed amendments to the Corporate Plan based on the limitations of any funding constraints. Financial forecasting and scenario planning Application of the Price Is Right guidance, lead by the Finance Team to ensure that Services	Assurance (Internal Audits, HSE)	External Audit through statutory assessment of value for money(VFM). Quarterly budget reports to Cabinet. Monthly budget reports to Strategic Management Board Budget report presented to Full Council Audit Committee report on Statement of Accounts and Value for Money Opinion.		Mike Howard 25-Apr-2019 The Head of Finance and Commercial has provided the following update. The risk profile is still valid and reflects the on going challenges of ensuring a balanced budget is delivered. Work is ongoing with other Councils in setting out the MTFS process to ensure a balanced budget is set for 2020/21. The 2018/19 Outturn position and Statement of Accounts will be presented to Cabinet and Audit Committee in line with agreed timescales.	Head of Finance and Commercial

Risk	Current Risk	Key risk indicators	Consequences	Internal Controls		Assurance Level	Evidence of Assurance	Actions	Latest Note	Assigned To
					review their income streams as part of budget setting process.					
				Assessed budget volatility	Head of Service submission of a business justification for seeking release of additional funding? In year budget volatility managed through the use of Contingency and Equalisation Funds reported to Cabinet if it occurs on quarterly basis. Reserves Policy in place subject to annual review by Section 151 Officer and reported as part of the Budget Setting process. Subject to review by External Audit.					
SR05 Partnership working	Dikelihood 8	Issues arising from Member/officer involvement with partners/partners hips. Breakdown of working	for funding streams (LEP) Restricted range of services offered Failure to realise economies of scale Duplication of work	Regular contract meetings/ dialogue	contractual agreement.	Management (Policies &	Strategic Management Board receive periodic updates on partnership relations		Mike Howard 10-May- 2019 The Head of DLP is reviewing the range of partnerships that the Councils participates in, as a Sub Group of the Legal & Governance Group, which is part of the	Legal and
		relationships. • Wycombe District issues not being adequately addressed.	Impact on public perception of the wider public sector	Periodic formal quality reviews undertaken by Management	System of periodic quality reviews are in place that allows for compliance with operational procedures, data integrity and accuracy.				Resource Workstream.	
				Partnership oversight	Compliance with a Partnership protocol (or similar) with has clearly defined governance arrangements that provide clear oversight as to the number of partnerships and the relationship from inception / formation, through delivery and eventual closure of the partnership.					
					Governance arrangements - will also have due regard to the contribution from the Council in terms of £ and officer time.					

Risk	Current Risk	Key risk indicators	Consequences	Internal Controls	Supporting Description Internal Controls		Evidence of Assurance	Actions	Latest Note	Assigned To
SR06 Investment in infrastructure	16 Likelihood	 Corporate Plan objectives are not delivered due to lack of funding. Schemes are put on hold, pending 	infrastructure could lead to issues as regards both the short and long term sustainability of the local community and economy.	lundertaken by	System of periodic quality reviews are in place that allows for compliance with operational procedures, data integrity and accuracy.	Level 1 - Operational Management (Policies & Procedures)			Mike Howard 13-May- 2019 Corporate Director has confirmed the content of this risk entry for the purpose of Quarter 4 monitoring.	Corporate Director
		determination, source and release of funding. • Annual Report	reputation as a place to live, work, visit and invest in.	Established Programme Boards	Established programme boards are in place that enables the progress of individual projects to be reported upon				In addition, during the last quarter, the Council has engaged additional Project Managers (2) to	
		provides information as regards the success in delivering the Corporate Plan.	Restriction in economic growth could impact on service provision & funding through reduced business rate growth. Programmes /Project are funded by external borrowing rather than internal funds.	Assessed budget volatility	Head of Service submission of a business justification for seeking release of additional funding? In year budget volatility managed through the use of Contingency and Equalisation Funds reported to Cabinet if it occurs on quarterly basis. Reserves Policy in place subject to annual review by Section 151 Officer and reported as part of the Budget Setting process. Subject to review by External Audit.				support its project management processes.	
SR07 Data and Information security	Likelihood	Internal Information Governance • Continuing data breaches of the same type. • Trends and issues from complaints and Freedom of Information Act requests not being addressed. External IT Governance • Performance against contractual performance targets for application and network availability. • Performance reporting for resolving priority	Internal Information Governance Information Commissioners Office (ICO)infringements/fine Criminal proceedings against the Council and individuals. Reputational damage Complaints leading to ICO findings against the Council. Complaints leading to Ombudsman findings against the Council. Loss of sensitive data Unlawful release of personal data	Internal Information Governance (Suite of Internal Controls)	Document Management approach across the Council Regular training for staff Information asset owners in each Service area. Appointed Senior Information Risk Owner (SIRO)-Head of Democratic, Legal and Policy Services. Annual certification process (information asset register). Up to date IT and resilience tools Annual Governance Statement with improvement actions. (where relevant) Council's complaints system. Designation of	Level 2 - Internal Governance (Risk / Performance Management)			Internal Information Governance , the	Head of DLP; ICT and Facilities Management Head of HR

Risk	Current Risk	Key risk indicators	Consequences	Internal Controls	Supporting Description Internal Controls	Assurance Level	Evidence of Assurance	Actions	Latest Note	Assigned To
		 Performance of implementing service requests / projects within SLA and /or 			Statutory Officers. Information Governance Strategy. Periodic review of Contract Standing Orders and Financial Regulations.					
		agreed timescales • Activity reports for Phishing and Malware incidents and threats. • Issues from IT security checks		External Information Governance (Suite of Internal Controls)	 Encrypted laptops; complex passwords required to access network accounts. New user accounts implemented following submission of assigned acceptable user form guidelines. 					
		(by Contactor or Third Party commissioned projects) not being resolved in a timely, efficient and effective way.			 Suspension of leaver accounts; Anti-virus software applied to devices and network; Monthly schedule of software patching; Independent annual 					
					network penetration tests and PSN accreditation; • Mobile device management software applied to mobile devices; • Cloud based internet					
					filtering Configuration Management database (CMDB) record of devices and software deployed Change control managed through					
					weekly technical and client change control boards; • Scheduled and regular data back-up routines; data held off-site; • Majority of hardware located off-site in					
					provider data centres and use of virtual technologies means services are less location dependent; • Formal monthly performance service					
					review meetings; • Contractual penalties					

Risk	Current Risk	Key risk indicators		Internal Controls	Supporting Description Internal Controls		Evidence of Assurance	Actions	Latest Note	Assigned To
	·				in the event of below contractual standard of services; • Periodic inventory checks • Secure disposal of redundant equipment					
SR08 Unitary District Council Status (Pre Structural Change Order)	pedul Likelihood	Increase in staff resignations. Decline in recruitment success. Key staff absence due to stress /anxiety Increase in identified internal control weaknesses. Increase in reported and upheld complaints. Delay to governance and service improvements	secondment opportunity) • During period of phased implementation there is a lack of ability to attract and recruit staff (replacing established and filling newly identified posts). • During period of phased implementation there is an increased expectation on the contribution that	Up to date policies accessible to officers Procedures reflect application of policy Service continuity plan Quarterly report to SMB Customer complaints	Key specialist roles to be considered and reported to SMB on an individual case by case basis, based on role (legal requirement) or single manning role and service resilience plan in place e.g. Identification and assessment of role(s) Detailed work instructions. Up to date work plan for specialist role Centralised record retention. All Officers are made aware of Councils Policies with specific emphasis given to those relevant to service provision. Service continuity plans is in place, known to staff, periodically tested. Quarterly report to SMB providing information as regards level of sickness absence and staff turnover compared to National /Sector benchmark(s). Used to monitor "health" of the Council. 1. Detailed insight as the validity, content and volume of service based customer complaints.	Operational Management (Policies & Procedures)	Organisational - Communication s • Communication protocol established for Members and Officers. Organisational - Staffing: • Detailed assessment and review of staff leaving the Authority from a Service by Service viewpoint and from a Council viewpoint. • Undertaking Exit interviews to be mandated (by Service or an exception basis by HR) • Recruitment protocol established and disseminated across the Council. • Service resilience plans in place. Organisational - Governance: • Feedback on upheld complaints and lesson	requested to complete individual Resource Plans that detail resource requirements to deliver individual work streams, including the issue of back filling requirements as necessary. Individual work stream reports are to be submitted to Chief Executive Implementation Group - May 2019. NB - link to SR08 - Unitary District Council Status (Pre-Structural Change Orders)	Risk Indicators, Consequences and Internal Controls that	Head of DLP

Risk	Current Risk	Key risk indicators	Consequences	Internal Controls	Supporting Description Internal Controls	Assurance Level	Evidence of Assurance	Actions	Latest Note	Assigned To
			Failure to deliver the Corporate Plan priorities and governance arrangements. Failure to deliver the Local Plan Organisational - Financial Wider public "default" on making payments to the Council for goods and services provided. Increase in the risk that individuals and organisations may take the opportunity to try and defraud the Council during a period of unpresident change. Organisational - Information Increase in the provision of requests for information without reference to data sharing protocols, bis protocols, states and desired and desired are the council during and protocols, bis protocols, states and desired are the components.				learned to be reported and information disseminated across the whole Council. • Existing Committee reporting structure in place to record decisions taken in respect of UDC status. Organisational - Finance			
			hierarchy of consent /agreement.				Organisational - Information			