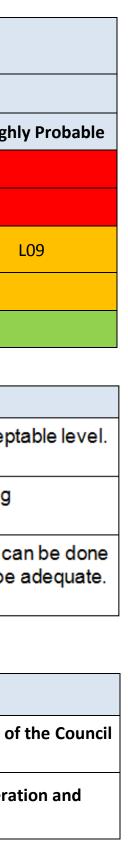
Cherwell District and South Northants Councils – Leadership Risk Register as at 17/01/18

		Risk	Scorecard – Re	sidual Risks		
				Probability		
		1 - Remote	2 - Unlikely	3 - Possible	4 - Probable	5 - High
	5 - Catastrophic					
	4 - Major		L04			
Impact	3 - Moderate		L03	L01, L02, L06, L08, L10	L05, L07	
	2 - Minor					
	1 - Insignificant					

Level of risk	How the risk should be managed
High Risk (16-25)	Requires active management to manage down and maintain the exposure at an accept Escalate upwards.
Medium Risk (10 -15)	Contingency Plans - a robust contingency plan may suffice together with early warning mechanisms to detect any deviation from the profile.
Low Risk (1 – 9)	Good Housekeeping - may require some risk mitigation to reduce the likelihood if this ca cost effectively, but good housekeeping to ensure that the impact remains low should be Re-assess frequently to ensure conditions remain the same.

	Risk Definition
Strategic	Risks that are significant in size and duration, and will impact on the reputation and performance of as a whole, and in particular, on its ability to deliver on its strategic priorities
Operational	Risks to corporate systems or processes that underpin the organisation's overall governance, opera ability to deliver services



Ref	Description of risk	Potential impact	ris	erent ((k level Contro	(no	Controls	Control assessment	Risk owner	Risk manager	(aft	ual risk er exis ontrols	ting	Direct'n of travel	Mitigating actions (to address control issues)	Comments	Last updated
			Probability	Impact	Rating		(Fully effective) (Partially effective) (Not effective)			Probability	Impact	Rating				
LO1	Financial resilience – Failure to react to external financial shocks, new policy and increased service demand. Poor investment and asset management decisions.	 Reduced medium and long term financial viability Reduction in services to customers Continued reliance on central govt (RSG) and therefore reduced opportunity for independent decision making Reduced financial returns (or losses) on investments/assets Inability to deliver financial efficiencies Inability to deliver commercial objectives (increased income) Poor customer service and satisfaction Increased complexity in governance arrangements Lack of officer capacity to meet service demand 	4	4	16	 Medium Term Revenue Plan reported regularly to members. Efficiency plan in place and balanced medium term Highly professional, competent, qualified staff Good networks established locally, regionally and nationally National guidance interpreting legislation available and used regularly Members aware and are briefed regularly Participate in Northamptonshire Finance Officers and Oxfordshire Treasurers' Association's work streams Programme management approach being taken Treasury management policies in place Investment strategies in place Independent third party advisers in place Independent third party advisers in place Regular bulletins and advice received from advisers Property portfolio income monitored through financial management arrangements on a regular basis Asset Management Strategy in place and embedded. Transformation Programme in place to deliver efficiencies and increased income in the future 	Partially Partially	Paul Sutton	AD Finance & Proc	3	3	9		 AD Finance and Governance to be recruited asap. Investment strategy for both authorities to be approved in 18/19 budget cycle. Timeliness and quality of budget monitoring particularly property income and capital to be improved. Project with Civica is ongoing. Asset Management Strategy to be reviewed and refreshed in the new year. 		

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L02	Statutory functions – Failure to meet statutory obligations and policy and legislative changes are not anticipated or planned for.	 Legal challenge Loss of opportunity to influence national policy/legislation Financial penalties Reduced service to customers 	3	4	12	 Embedded system of legislation and policy tracking In place, with clear accountabilities, reviewed regularly by Directors Clear accountability for responding to consultations with defined process to ensure Member engagement National guidance interpreting legislation available and used regularly Risks and issues associated with Statutory functions incorporated into Directorate Risk Registers and regularly reviewed Clear accountability for horizon scanning, risk identification/categorisation/esc alation and policy interpretation in place Robust Committee forward plans to allow member oversight of policy issues and risk management, including Scrutiny and Audit Internal Audit Plan risk based to provide necessary assurances Strong networks established locally, regionally and nationally to ensure influence on policy issues Senior Members aware and briefed regularly in 1:1s by Directors 	Partially Fully Fully Partially Partially Partially Fully Fully Partially	Yvonne Rees	Richard Ellis	3	3	9	•	 Establish corporate repository and accountability for policy/legislative changes Review Directorate/Service risk registers Ensure Committee forward plans are reviewed regularly at CEDR level Ensure Internal Audit plan focusses on key leadership risks Develop stakeholder map, with Director responsibility allocated for managing key relationships Standardise agendas for Director/PFH 1:1s
LO3	Lack of Management Capacity - Delays to completing the management restructure reduces capacity at management level	 Financial impact due to use of agency staff Inability to deliver council's plans Inability to realise commercial opportunities or efficiencies Reduced resilience and business continuity Reduced staff morale and uncertainty may lead to loss of good people 	3	4	12	 Rigorous and aggressive assessment and recruitment timetable for senior management roles Arrangements in place to source appropriate interim resource if needed Delegations to Chief Exec agreed to ensure timely decisions HR/Specialist resource in place to support recruitment process and manage implications Ongoing programme of internal communication 	Fully Fully Fully Fully Fully	Yvonne Rees	Richard Ellis	2	3	6	•	 Discussions with Penna to ensure rapid response should interim resource be required AD HR/OD briefed and leading the process Communications to be delivered by CEO

Ref	Description of risk	Potential impact	ris	nherent (gross) risk level (no Controls)		Controls	Control assessment	Risk owner	Risk manager	(aft	lual risk ter exis controls	ting	Direct'n of travel	Mitigating actions (to address control issues) Comments Last updated
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L04	CDC & SNC Local Plans - Failure to ensure sound local plans are submitted on time for each District.	 Inappropriate growth in inappropriate places Negative (or failure to optimise) economic, social, community and environmental gain Negative impact on each council's ability to deliver its strategic objectives Increased costs in planning appeals Possible financial penalties through not delivering forecasted New Homes Bonus 	3	5	15	 Local Development Schemes are in place at each Council which detail the timeframes and deliverables to underpin the work Resources are in place to support delivery including QC support for each Local Plan. For issues which are solely within the control of SNC or CDC policies, plans and resources are in place Work is at Reg 19 on Cherwell Partial Review, preparing submission plan for Feb 2018 sign off and to re-commence in 2018 on Local Plan part 2. Work is advancing to Reg 19 stage On South Northants Local Plan part 2 on issues for reps, policies and development control policies. Statements of Community Involvement are in place. 	Fully Partially Partially Fully Fully	Adrian Colwell	Andy Darcy (SNC) David Peckford (CDC)	2	4	8	•	 Regular review meetings on progress and critical path review at each Council Regular Portfolio briefings and political review LDS updated as required Additional evidence commissioned as required Need to review resources at CDC to speed up Local Plan part 2.
LO5	Business Continuity - Failure to ensure that critical services can be maintained in the event of an incident	 Inability to deliver key services to customers/residents Financial loss 	4	4	16	 Business continuity strategy in place Services prioritised and recovery plans reflect the requirements of critical services ICT disaster recovery arrangements in place Incident management team identified in Business Continuity Strategy All services undertake annual business impact assessments and update plans 	Partially Partially Partially Partially Partially	lan Davies	Jackie Fitzsimon S	4	3	12	•	 All individual service BC plans recently updated Corporate BC to be reviewed Testing to be programmed BC solutions between both councils to be further developed Corporate ownership and governance to sit at CEDR

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L06	Partnering - Failure to build the necessary partnership relationships to deliver our strategic plan. Failure to ensure the necessary governance of third party relationships (council businesses, partners, suppliers)	 Poor service delivery Inability to deliver council's plans and outcomes for communities Legal challenge Financial loss Inability to partner in the future Reduced opportunity for inward investment in the future 	4	4	16	 Stakeholder Map, allocating responsibility for key relationships at Director/PFH level Regular review and sharing of partnership activity/engagement at CEDR/BPM meetings Robust governance/contract management framework in place for key third party relationships Training and development of senior officers/members to fulfil their responsibilities with partner organisations 	Not Partially Partially Partially	Yvonne Rees	Richard Ellis	3	3	9	•	 Develop stakeholder Map Standard agenda item at CEDR Develop governance guidelines for all key third party relationships Review existing arrangements/ contracts to ensure appropriate governance
L07	Emergency Planning (EP) - Failure to ensure that the local authority has plans in place to respond appropriately to a civil emergency fulfilling its duty as a category one responder	 Inability of council to respond effectively to an emergency Unnecessary hardship to residents and/or communities Risk to human welfare and the environment Legal challenge Potential financial loss through compensation claims Ineffective Cat 1 partnership relationships 	4	4	16	 Emergency plan reviewed quarterly and on activation Dedicated Emergency Planning Officer in post to review, test and exercise plan and to establish, monitor and ensure all elements are covered Added resilience from cover between shared Public Protection Team as officers with appropriate skill JMT regularly attend Civil Emergency training Twice yearly mock emergency exercises conducted to ensure readiness On-call rota established for Duty Emergency Response Co- ordinators (JMT) Full participation in LRF activities 	Partially Fully Fully Partially Partially Partially Not	lan Davies	Jackie Fitzsimon S	4	3	12	•	 To be updated when new management structure is in place New call out arrangements to be established New annual training regime for GS&B officers to be set up Training monitoring to be developed through new HR/Payroll system Member training for disaster recovery and comms

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LO8	Health and safety - Failure to comply with health and safety legislation, corporate H&S policies and corporate H&S landlord responsibilities	 Fatality, serious injury & ill health to employees or members of the public Criminal prosecution for failings Financial loss due to compensation claims Enforcement action – cost of regulator (HSE) time Increased sickness absence Increased agency costs Reduction in capacity impacts service delivery 	4	5	20	 Robust Health & Safety policies and Corporate H&S arrangements in place as part of an Integrated H&S Management System Clearly identified accountability and responsibilities for Health and Safety established at all levels throughout the organisation Corporate H&S Manager & H&S Officer in post to maintain the H&S Management System & provide competent H&S advice & assistance to managers & employees Directorate Health & Safety Improvement Plans established with embedded reporting and recording arrangements in place Proactive monitoring of Health & Safety performance management internally Proactive monitoring of Health & Safety performance management externally Effective training regime in place for all staff Positive Health & Safety risk aware culture Corporate Health & Safety meeting structure in place for co-ordination and consultation Corporate body & Member overview of Health & Safety performance via appropriate committee Assurance that third party organisations subscribe to and follow Council Health & Safety guidelines and are performance managed where required 	Partially Not Fully Not Partially Partially Partially Fully Fully Fully	Paul Sutton	Mark Wills	3	3	9		 Corporate H&S Policy to be developed & implemented across the organisation to ensure that roles & responsibilities at all levels are discharged effectively. Policy to be developed following restructure. Update key Corporate H&S arrangements which are out-of-date. Directorate H&S Improvement Plans to be produced Expand scope of internal audits to cover all elements of the H&S Management System Management of H&S training programme to be developed and rolled out. Robust training already in place in Environmental Services Good awareness in higher risk areas of the business, e.g. Environmental Services. However other areas need improved awareness of risk assessment process Reviews of leases and performance monitoring to be reviewed to satisfy the Councils providers/ contractors are managing significant risks. 	OHSAS 18001 Health & Safety Management System accreditation achieved through Exova BM Trada. Annual surveillance visits undertaken to supplement main accreditation visits. CEDR Meeting receives quarterly updates from Corporate H&S Manager. Relevant updates taken to appropriate committee.	

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L09	Cyber Security - If there is insufficient security with regards to the data held and IT systems used by the councils and	 Service disruption Financial loss / fine Prosecution – penalties imposed Individuals could be placed at risk of harm Reduced capability to deliver customer facing 				 File and Data encryption on computer devices Managing access permissions and privileged users through AD and individual applications Consistent approach to 	Fully Fully Partially							 We are workin security compour cyber security compour cyber security compour cyber security achieve the cyressentials + acreated the security of the security of
	insufficient protection against malicious attacks on council's systems then there is a risk of: a data breach, a loss of	 Unlawful disclosure of sensitive information Inability to share services or work with partners Loss of reputation 				 Consistent approach to information and data management and security across the councils Effective information management and security training and awareness programme for staff 	Partially							 in February 20 This will proving plan against a issues identifie Cyber-security
	service, cyber- ransom.					 Password security controls in place 	Fully							by Internal Au 2017 and will again in April 3
			4	5	20	 Robust information and data related incident management procedures in place 	Partially	Claire Taylor	Tim Spiers	3	5	15		 HR also have a complete regarecruitment an identified by h
						 Appropriate robust contractual arrangements in place with all third parties that supply systems or data processing services 	Partially							 The IT Transfor Programme in migrating serve external data
						Appropriate plans in place to ensure ongoing PSN compliance	Fully							will increase p security. As pa improved mor
						 Adequate preventative measures in place to mitigate insider threat, including physical and system security 	Partially							solutions will a implemented. The Councils v
						 Insider threat mitigated through recruitment and line management processes 	Partially							completing the independent I health check in 2018.

ns (to address issues)	Comments	Last updated
ting with a pany to review curity status and cyber accreditation underway and ts are expected 2018	Cyber security incidents are inevitable. The only way to manage this risk is to have effective controls and mitigations in place including audit and review.	
vide an action any control fied		
ty was reviewed .udit in May II be reviewed I 2018.		
e actions to garding and processes Internal Audit.		
formation includes rver rooms to a centre which physical part of this work onitoring I also be d.		
will also be he annual : IT security : in quarter 1		

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L10	Safeguarding the vulnerable (adults and children) - Failure to follow our policies and procedures in relation to safeguarding vulnerable adults and children or raising concerns about their welfare	 Increased harm and distress caused to vulnerable individuals and their families Council could face criminal prosecution Criminal investigations potentially compromised Potential financial liability if council deemed to be negligent 	3 4	12	 Safeguarding lead in place and clear lines of responsibility established Safeguarding Policy and procedures in place Information on the intranet on how to escalate a concern Staff training - new whole staff shared approach being launched in the summer Safer recruitment practices and DBS checks for staff with direct contact Action plan developed by CSE Prevention group as part of the Community Safety Partnership Local Safeguarding Children's Board Northamptonshire (LSCBN) pathways and thresholds Data sharing agreement with other partners Attendance at Children and Young People Partnership Board (CYPPB) Annual Section 11 return complied for each council Engagement with Joint Agency Tasking and Co-ordinating Group (JATAC) and relevant 	-	lan Davies	Nicola Riley	3	3	9		 Ongoing internal awareness campaigns Ongoing external awareness campaigns Annual refresher and new training programmes Training monitoring to be developed through new HR/Payroll system 		
					 Oxfordshire County Council (OCC) safeguarding sub group Engagement at an operational and tactical level with relevant external agencies and networks 	Partially									