

Appendix 3 – Cherwell District Council – Latest Leadership Risk Register as at 14/02/2019

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 acceptable level. 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 can be done cost effectively, but good housekeeping to ensure that the impact remains low should be adequate. Re-assess frequently to ensure conditions remain the same.

Risk Scorecard – Residual Risks						
		Probability				
		1 - Remote	2 - Unlikely	3 - Possible	4 - Probable	5 - Highly Probable
Impact	5 - Catastrophic					
	4 - Major		L04, L10, L12		L15	
	3 - Moderate			L01, L02, L05, L14	L03, L06, L07, L08, L11	L09, L13
	2 - Minor					
	1 - Insignificant					

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

Ref	Name and Description of risk	Potential impact	Inherent (gross) risk level (no Controls)			Controls	Control assessment	Lead Member	Risk owner	Risk manager	Residual risk level (after existing controls)			Direct'n of travel	Mitigating actions (to address control issues)	Comments	Last updated
			Probability	Impact	Rating						Probability	Impact	Rating				
L01	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 Oxfordshire Treasurers' Association's work streams Treasury management policies in place Investment strategies in place Regular financial and performance monitoring 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	Fully Fully Fully Partially Fully Partially Fully Fully Fully Fully Partially Partially Fully Fully Partially Partially	Councillor Tony Illot	Adele Taylor	Adele Taylor	3	3	9	↔	Key staff recruited to and review of workload and capacity across the team. Additional resilience and resource for financial accounting and reporting engaged through external partners and agencies. Investment strategy approach agreed for 18/19 and all potential investments now taken through the working groups prior to formal sign off. Robust review and challenge of our investment options to be regularly undertaken through our usual monitoring processes. Timeliness and quality of budget monitoring particularly property income and capital to be improved. Project with Civica is ongoing. Financial Systems project reviewed to meet business needs. Asset Management Strategy to be reviewed and refreshed in the new year. Review of BUILD! to ensure procurement and capital monitoring arrangements are in place and development of forward programme. Finance support and engagement with programme management processes being implemented. Integration and development of Performance, Finance and Risk reporting during 18/19. Regular involvement and engagement with senior management across Counties as well as involvement in Regional and National finance forums. Regular member meetings, training and support in place and regularly reviewed. Briefings provided on key topics to members with particular focus on key skills for specific committees such as audit committee. Financial support and capacity developed during 18/19 through development programme. Regular utilisation of advisors. Internal Audits being undertaken for core financial activity and capital.	Maintaining focus in this area with ongoing review, staff and member training and awareness raising. Ensuring support is utilised from and provided by external partners and stakeholders. Financial System Solution Project started to ensure future finance provision is fit for future. Integrated reporting being embedded and working well. Regular reporting of progress on internal audits considered by the committee	Risk reviewed - 08/01/19 - updated a number of mitigating actions to reflect current position
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 / escalation 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 Partially	Councillor Barry Wood	Yvonne Rees	Claire Taylor	3	3	9	↔	Establish corporate repository and accountability for policy/legislative changes Review Directorate/Service risk registers Ensure Committee forward plans are reviewed regularly by senior officers 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 New NPPF published 05/03/18 will guide revised approach to planning policy and development management. Allocate specific resource to support new projects/policies or statutory requirements e.g. GDPR	Service plans for 2019-20 received and currently being reviewed. Performance framework for 2019-20 to be agreed. Review of Leadership Risk Register and Risk Strategy for 2019-20 in progress.	Risk reviewed 13/02/18 - Commentary Updated.
L03	Lack of Management Capacity - Increased workload relating to local government reorganisation and changes to joint working between SNC and CDC impact on the capacity of management.	Financial impact due to use of agency staff, possible impact on customers and frontline service delivery if capacity risks are not managed. 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	4	4	16	Use of interims / fixed term and project roles to support senior capacity as required. 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 Separate CDC and SNC Senior Leadership Teams in place to provide capacity required at each site.	Fully Fully Fully Fully Fully Partially	Councillor Barry Wood	Yvonne Rees	Claire Taylor	4	3	12	↔	Separate CDC and SNC Senior Leadership teams to work closely together during separation to mitigate the impact of any capacity issues resulting from separation. AD HR / OD briefed and leading the process Communications to be delivered by CEO External support provided. Resilience training programme for Assistant Directors in place.	Separate CDC and SNC Senior Leadership Teams now live with Executive support arrangements in place. Risk to be kept under review as management team transition to new working arrangements. Impact of separation and associated workload to be kept under review. Joint CEDR meetings to take place monthly. Separation Project Board to meet fortnightly. Regular comms being provided by the Chief Executives	Risk reviewed 13/02/18 - Commentary Updated.

Ref	Name and Description of risk	Potential impact	Inherent (gross) risk level (no Controls)			Controls	Control assessment	Lead Member	Risk owner	Risk manager	Residual risk level (after existing controls)			Direct'n of travel	Mitigating actions (to address control issues)	Comments	Last updated
			Probability	Impact	Rating						Probability	Impact	Rating				
L04	Not maintaining an up-to-date Local Plan - Failure to ensure sound local plans are submitted on time.	Inappropriate development in inappropriate places	3	5	15	The Council's Local Development Scheme (LDS) provides a programme for the preparation and submission of Local Plans. The LDS is periodically reviewed and presented to the Executive for consideration. The effectiveness of adopted Local Plan policies is reviewed through an Annual Monitoring Report which is also presented to the Executive. Local Plans and accompanying guidance are prepared in accordance with the LDS.	Fully effective Partially effective Not effective								Regular review meetings on progress and critical path review.	A district wide Local Plan was completed and adopted in 2015. A Partial Review of the Local Plan, to assist Oxford with its unmet housing need, was submitted to Government for Examination on 5 March 2018. A preliminary public hearing was held on 28 September 2018. On 29 October, the Inspector advised that the Council could proceed to main hearings. Main hearings are to be held during the weeks commencing 4 and 11 February 2019. Work continues on a Supplementary Planning Document for Banbury Canalside. There is a need to achieve a deliverable, masterplan framework for the site which would meet Local Plan requirements, expected design standards and which satisfactorily responds to stakeholder issues. An Annual Monitoring Report and updated Local Development Scheme were presented to the Executive in Dec 2018. The LDS incorporates the timetable for the new countywide Joint Statutory Spatial Plan - the Oxfordshire Plan 2050. It also provides for a district wide Local Plan review. The Oxfordshire authorities have collectively commenced work on the Oxfordshire Plan 2050.	Risk reviewed, Controls and comments updated 04/01/19
		Negative (or failure to optimise) economic, social, community and environmental gain				Resources are in place to support delivery including Barrister support when required for Local Plans.	Fully							Regular Lead Member briefings and political review			
		Negative impact on each council's ability to deliver its strategic objectives Without a local plan, a lack of community engagement on development locations				For issues which are solely within the control of CDC policies, plans and resources are in place Local Development Scheme provides Executive oversight of plan-making programme to ensure local plans are made	Partially							Local Development Scheme updated as required			
		Without a local plan, negative impact in terms of ensuring coordination on cross boundary strategic issues				Maintenance of an up to date Statement of Community Involvement (SCI) to support policy making. The Local Development Scheme provides for Executive oversight of plan-making programme to ensure local plans are made in good time. The Oxfordshire councils have agreed to produce a Joint Statutory Spatial Plan (JSSP) - the Oxfordshire Plan 2015	Fully							Regular Lead Member briefings and political review			
							Fully							SCI updated as required (last updated 2016)			
							Fully							Local Development Scheme updated as required. Regular review meetings on progress and critical path review to ensure timely CDC contributions to the Oxfordshire Plan.			
L05	Business Continuity - Failure to ensure that critical services can be maintained in the event of a short or long term incident affecting the Councils' operations	Inability to deliver critical services to customers/residents	4	4	16	Business continuity strategy in place	Partially							All individual service Impact Assessments and BC Plans have been updated.	The plan to update all the service business continuity plans is progressing. Managers have had refresher training to support them in completing the plans. The first drafts have also been subject to a peer to peer review to check they are robust. An officer Steering Group is in place to provide professional advice on critical aspects of the plans. An internal audit began in December to quality assure our plans.	Risk reviewed 08/01/19 - Control assessments and Comments updated.	
		Financial loss				Services prioritised and recovery plans reflect the requirements of critical services	Partially							BC Improvement plan, including testing, being developed by Steering Group			
		Loss of important data				ICT disaster recovery arrangements in place	Fully							ICT transition to data centre and cloud services have reduced likelihood of ICT loss and data loss			
		Inability to recover sufficiently to restore non-critical services before they become critical				Incident management team identified in Business Continuity Strategy	Partially	Councillor Andrew McHugh	Graeme Kane	Richard Webb	3	3	9	Corporate ownership and governance sits at senior officer level			
		Loss of reputation				All services undertake annual business impact assessments and update plans	Fully							Draft Business Continuity Strategy and Policy being updated for sign-off by Leadership Team.			
						Business Continuity Plans tested	Partially							Progress report was provided to CEDR in December			
L06	Partnering - Financial failure of a public sector partner organisation	Potential reduction in service areas funded by the County Council resulting in an unplanned increase in demand on district functions leading to service difficulties. Poor service delivery	4	4	16	Robust governance/contract management framework in place for key third party relationships	Partially							Review existing arrangements/ contracts to ensure appropriate governance			08/02/19 - Risk Reviewed, no change.
		Failure to build the necessary partnership relationships to deliver our strategic plan.				Training and development of senior officers/members to fulfil their responsibilities with partner organisations	Partially	Councillor Barry Wood	Graeme Kane	Nicola Riley	4	3	12	Standard agenda item at senior officer meetings			
		Failure to ensure the necessary governance of third party relationships (council businesses, partners, suppliers)				Leader and CEO engaging at National and county level to mitigate impacts of potential service reductions for residents Regular review and sharing of partnership activity/engagement at senior officer meetings	Partially							Continue Institute of Directors training for Officers and Members			
							Partially							Ongoing meetings with wider health partners to ensure evidence based approach to investment in Wellbeing Directorate Services			

Ref	Name and Description of risk	Potential impact	Inherent (gross) risk level (no Controls)			Controls	Control assessment	Lead Member	Risk owner	Risk manager	Residual risk level (after existing controls)			Direct'n of travel	Mitigating actions (to address control issues)	Comments	Last updated
			Probability	Impact	Rating						Probability	Impact	Rating				
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	Key contact lists updated monthly. 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 Environmental Health and Community Safety Teams as officers with appropriate skill Senior management attend Civil Emergency training Multi agency emergency exercises conducted to ensure readiness On-call rota established for Duty Emergency Response Co-ordinators Active participation in Local Resilience Forum (LRF) activities	Fully Partially Fully Fully Fully Fully	Councillor Andrew McHughy	Graeme Kane	Richard Webb	3	4	12	↔	Chief Operating Officer meets with ACO Oxfordshire Fire and Rescue quarterly to oversee shared EP arrangements. Active involvement in Brexit contingency planning being led by TV LRF Training for senior officers was completed in June and November; further exercises were completed in September and November at a regional and national event with partners. Senior managers have attended multi-agency exercises and duty manager training with OCC senior managers. CDC is represented and engaged with the Local Resilience Forum	Active plans are in place to ensure the authority is prepared for a variety of emergencies. Continual improvements are being made as a result of a review of these plans and in partnership with the Local Resilience Forum. The arrangements at CDC and SNC have now been seperated.	Risk reviewed 08/02/19 - Mitigating actions & comments updated.
L08	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	5	4	20	New Health & Safety Corporate H&S arrangements & guidance in place as part of the newly adopted HSG65 Management System Clearly identified accountability and responsibilities for Health and Safety established at all levels throughout the organisation Corporate Interim H&S Manager & H&S Officer in post to formalise the H&S Management System & provide competent H&S advice & assistance to managers & employees. Awaiting new Health & Safety Manager Proactive monitoring of Health & Safety performance management internally Proactive monitoring of Health & Safety performance management externally Effective induction and 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 Partially Partially Fully Partially Partially Fully Partially	Councillor Lynn Pratt	Adele Taylor	Martin Green	4	3	12	↔	Joint Corporate H&S Policy finalised in 2018 and communicated to all levels of managers and staff will now require review and separation reflecting the new structures. All Assistant Directors to complete a H&S Checklist to provide a status on the management of H&S in their service areas (checklist devised by H&S team to ensure H&S Management System framework is covered). AD's to submit checklist to their Director by 3/9/18. Corporate H&S Manager has sent a follow up note to Directors to suggest chasing outstanding AD checklists. Recommended that ED's and AD's consider the gaps within the checklists and liaise with their management teams on the agreed actions that they will be taking to address them. Actions to be formalised into service plans & monitored at DMT Meetings. Further support, advice & assistance provided by H&S Team (contacts established for each directorate area). Majority of AD Checklists still outstanding having been chased on numerous occasions. Given the changes ahead and the requirement for Policy changes, AD's in both Councils (if agreed) should revisit and complete for the new service areas. Recently approved Internal Audit plan for 18/19 included an audit of our overall H&S management system framework which commenced in Q1 with a follow up planned prior to the end of 18/19. Four main recommendations have been made which are being considered and will be included in future updates of the Leadership Risk Register. The H&S team also conduct reviews internally across all services and teams, the current scope will be expanded from topic-based themes to cover all elements of our overall H&S management system to ensure compliance with our standards. Management of H&S training will now be included within the new eLearning programme which is in the process of being procured. Risk Assessment Workshop training is being developed. 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.	Senior Officer Meeting receives regular updates from Corporate H&S Manager. Relevant updates taken to appropriate committee. Joint Council and Employee Engagement Committee (JCEEC) to be formed by HR in Oct/Nov time. To be in place to ensure robust communication methods are in place for consultation between HR/H&S and TU. HR AD in the process of co-ordinating JCEEC meetings. First JCEEC meeting took place January 2019 Internal Audit Schedule rolling 3 year programme has now been developed and is underway. Rolling 3 year audit schedule will require review and identification of resources for the additional requirement of auditing the Councils separately. Still awaiting final sign off from the HR/Training Manager for training procurement and implementation.	Risk reviewed 07/02/19

Ref	Name and Description of risk	Potential impact	Inherent (gross) risk level (no Controls)			Controls	Control assessment	Lead Member	Risk owner	Risk manager	Residual risk level (after existing controls)			Direct'n of travel	Mitigating actions (to address control issues)	Comments	Last updated
			Probability	Impact	Rating						Probability	Impact	Rating				
L09	Cyber Security - If there is insufficient security with regards to the data held and IT systems used by the councils and insufficient protection against malicious attacks on council's systems then there is a risk of: a data breach, a loss of service, cyber- ransom.	Service disruption Financial loss / fine Prosecution – penalties imposed Individuals could be placed at risk of harm Reduced capability to deliver customer facing services Unlawful disclosure of sensitive information Inability to share services or work with partners Loss of reputation	4	5	20	File and Data encryption on computer devices Managing access permissions and privileged users through AD and individual applications Consistent approach to information and data management and security across the councils Effective information management and security training and awareness programme for staff Password security controls in place Robust information and data related incident management procedures in place Appropriate robust contractual arrangements in place with all third parties that supply systems or data processing services Appropriate plans in place to ensure ongoing PSN compliance Adequate preventative measures in place to mitigate insider threat, including physical and system security Insider threat mitigated through recruitment and line management processes	Fully Fully Fully Partially Fully Fully Fully Fully Partially Fully	Councillor Ian Corkin	Claire Taylor	David Spilsbury	3	5	15	↔	The cyber-essentials plus certification has now been passed. Cyber-security was reviewed by Internal Audit in May 2017 and a review meeting was held on 30th August 2018. The output has been received and signed off with good progress summary noted. The IT service are in discussions with the Regional Police Cyber Security Advisor. Initial training session held with the IT Management team in October 2018. Further table top session held in November with IT Management Team. Sessions for all staff have been delivered in January 2019 with mop up sessions being organised for those that missed it. Feedback from these sessions has been positive. Sessions for all staff are being arranged for January 2019. Complete the implementation of the intrusion prevention and detection system by the end of January 2019. Agree Terms of Reference and re-implement the security forum as the Information Governance Group, with meetings to be held on a minimum quarterly basis. 1st meeting should be January 2019, chaired by the Information Governance Manager Develop a comprehensive information security training programme with annual mandated completion which is assessed by June 2019. Cyber Security highlighted during the recent all staff briefing in relation to cyber essentials plus	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.	Risk reviewed 06/02/19 - Control Assessment, Mitigating Actions Updated.
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 Mandatory training and awareness raising sessions are now in place for all staff. 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 Data sharing agreement with other partners Attendance at Children and Young People Partnership Board (CYPPB) Annual Section 11 return compiled and submitted as required by legislation. Engagement with Joint Agency Tasking and Co-ordinating Group (JATAC) and relevant Oxfordshire County Council (OCC) safeguarding sub group Engagement at an operational and tactical level with relevant external agencies and networks	Fully Fully Fully Fully Fully Partially Partially Fully Fully Fully	Councillor Barry Wood	Graeme Kane	Nicola Riley	2	4	8	↔	Ongoing internal awareness campaigns Ongoing external awareness campaigns Annual refresher and new training programmes including training for new members Training monitoring to be developed through new HR/Payroll system Continue to attend groups focused on tackling child exploitation	Continued focus in this area with ongoing programme of training and awareness raising. The annual Section 11 submission has been made; it reflects the strong arrangements that in place at CDC.	8/02/19 - Risk reviewed, mitigating actions and comments updated.
L11	Income Generation through council owned companies	Through failure of governance or robust financial / business planning the councils fail to generate expected income.	3	4	12	Annual business planning Financial planning Corporate governance mechanisms Due diligence Business casing	Partially Partially Partially Partially Partially	Councillor Tony Illot	Adele Taylor	Adele Taylor	3	4	12	↔	Changes in the shareholder support side line management been put in place. Additional oversight and capacity from senior managers Resilience and support being developed across business to monitor and deliver projects. Skills and experience being enhanced to deliver and support development, challenge and oversight.	Staff turn over has lead to increase in risk last month. Mitigations in place in terms of additional senior management oversight. Knowledge and experience building take place with training and support as required. The increased score last month remains the same this month although some additional actions in place.	Risk reviewed 08/01/19 - comments updated to reflect this.

Ref	Name and Description of risk	Potential impact	Inherent (gross) risk level (no Controls)			Controls	Control assessment	Lead Member	Risk owner	Risk manager	Residual risk level (after existing controls)			Direct'n of travel	Mitigating actions (to address control issues)	Comments	Last updated
			Probability	Impact	Rating						Probability	Impact	Rating				
L12	Financial sustainability of third party suppliers	The financial failure of a third party supplier results in the inability or reduced ability to deliver a service to customers.	3	4	12	Contracts in place to cover default. Business continuity planning	Partially Partially	Councillor Tony Illot	Adele Taylor	Adele Taylor	2	4	8	↔	Meetings take place when required with suppliers to review higher risk areas.	Risk previously escalated due to suppliers financial difficulties which could result in loss of service. The Council continues to monitor suppliers financial stability and meets with suppliers when required. Financial company insight being gained through use of monitoring tools and financial advice.	Risk reviewed 08/01/19- No changes.
L13	Local Government Reorganisation CDC - Separation from SNC impacts on the provision of services to residents and communities.	Inability to deliver Council priorities and plans, impacting on quality of services delivered to residents and communities. Potential impact of CDC/SNC separation on quality of services delivered to residents and communities.	5	4	20	Separate CDC and SNC Senior Leadership Teams in place from January 2019. Agreed programme of separation in place Joint CEDR Meetings to take place fortnightly with clear focus on separation. Programme Board and Project Team established to deliver separation. Strategic partnership opportunities with Oxfordshire County Council being explored with s113 agreement in place. Regular review and sharing of partnership activity / engagement at senior officer meetings	Fully Partially Fully Fully Partially Partially	Councillor Barry Wood	Yvonne Rees	Claire Taylor	5	3	15	↔	Standing item at senior officer meetings - regular review of risk and control measures. Legal advice sought with regards to the employment implications of re-organisation and separation proposals. Separation tracker and risk register to be circulated at all senior management meetings. Collaboration Agreement to underpin joint working with SNC following the end of the s113 to be agreed. OCC - CDC section 113 agreement completed. Regular communications plan with cascade briefings from Assistant Directors planned quarterly. New monthly newsletter focussing on change to be issued.	Separate CDC Senior Leadership Team in place from 1st January 2019. Structure includes clear responsibility for separation from SNC. Separation proposals implemented for Economic Growth, Planning Policy and Design and Conservation teams. Proposals agreed for Housing and Communications. Collaboration Agreement to underpin on-going joint working between CDC and SNC agreed by Executive and Council in January 2019.	Risk reviewed and updated 13/02/19
L14	Corporate Governance - Failure of corporate governance leads to negative impact on service delivery or the implementation of major projects providing value to customers.	Threat to service delivery and performance if good management practices and controls are not adhered to. Risk of ultra vires activity or lack of legal compliance Risk of fraud or corruption Risk to financial sustainability if lack of governance results in poor investment decisions or budgetary control. Failure of corporate governance in terms of major projects, budgets or council owned companies impacts upon financial sustainability of the councils.	4	4	16	Clear and robust control framework including: constitution, scheme of delegation, ethical walls policy etc. Clear accountability and resource for corporate governance (including the shareholder role). Integrated budget, performance and risk reporting framework. Corporate programme office and project management framework. Includes project and programme governance. Internal audit programme aligned to leadership risk register. Training and development resource targeted to address priority issues; examples include GDPR, safeguarding etc. HR policy framework. Annual governance statements	Partially Partially Partially Partially Partially Partially	Councillor Barry Wood	Yvonne Rees	Nick Graham	3	3	9	↔	Standing item at senior officer meetings – regular review of risk and control measures Review of constitution to take place 2018/19 Implementation of corporate programme office – May 2018 Full review of HR policy to be undertaken during 2018/19 Monitoring Officer to attend management team meetings	S113 Agreement terminates on 16 January 2019. Collaboration Agreement being developed. Executive and Cabinet will consider its adoption on 7 and 14 January 2019 respectively. Service schedules are being developed for all services that require ongoing joint working - and these are programmed to be in place by 16 January 2019.	05/12/18 - Risk reviewed, Risk Owner & Manager & Comments updated
L15 - New Risk (CEDR only)	Oxfordshire Growth Deal (contract with HMG) As a result of a lack of experience of this scale and nature of partnership delivery there is a risk that inadequate levels of control will be applied by the Partnership to Oxfordshire Housing and Growth Deal governance, resourcing and delivery and that CDC (and its partners) will fail to meet its publicly stated Contractual commitments to its Partners and Government over the 5-year term.	Failure to meet its obligations as a partner within the Growth Deal could see Cherwell as a factor in Government holding back some or all of its funding and/or cease to extend the arrangement beyond 2023. Infrastructure milestone delivery late (for infrastructure linked to accelerated housing) Accelerated housing numbers delivered to plan late Cost of infrastructure to accelerate circa 6500 homes within 5-year term significantly beyond 2018 budget cost estimate DC GVA: no defined metrics in HGDDP but linked to homes accelerated/infrastructure/affordable homes delivered/JSSP progress and delivery JSSP Affordable Houses Productivity	5	5	25	Appointment of an interim advisor to guide and support delivery of the GD programme and risk management controls Recognition of issues in CDC GD arrangements and delivery of a 6-week review to identify and propose an action plan to manage and bring the issues within control (see 6-week plan) Establish CDC organisational fit of GDC GD as a programme capability reporting to CEDR through the Place Board Secured approval for CDC GD next stage plan at CEDR 17/12/18 which targets setting up CDC GD programme board, work stream capability and leadership supported by CDC Transformation PMO by end March 19 (see Board paper and Next stage Plan Proposal) Built on CDC PMO RAID principles and developed initial RAID logs for each work stream (capture risks, issues, dependencies and assumptions) to help define "gives and gets" as a basis for holding all to account for defined and transparent baseline delivery		Councillor Barry Wood	Paul Feehily	?	4	4	16		A CDC GD programme and programme board capability Work stream plans of work (work stream brief, schedule, RAID log) Appropriate engagement with members in support of their advisory/scrutiny at GD Board level Governance and performance management Improved collaboration working with partners to hold them to account for their part of delivery Securing approval of a resourced GD Y2 plan to be delivered in a collaborative partnership environment Extending support from interim advisor to end March 19	The CDC Growth Deal Programme Management approach will enable greater clarity and understanding of the barriers to delivery of those housing developments which are in our area and contribute to the 100,000 accelerated homes, (and for which we are responsible for delivering). Barriers to CDC delivery will be clarified through CDC work stream plans of work, comprising a work stream brief, RAID log and schedule for each work stream. Through this approach Cherwell will be able to enhance collaborative delivery of the GD with CDC focus on CDC "Gives and Get's" i.e. • The things that CDC is accountable for delivering and • The things delivered by others that CDC need to deliver CDC accountabilities DC's collaboration with Partners through the GD Programme Board to achieve 100% GD Contract Delivery	