Appendix Eleven

| Name and Description of risk | Potential impact | Inherent (gross) risk level (before Controls) | Controls | Control assessment | Lead Member | Risk owner | Risk manager | Residual risi level (after existing controls) | | | Comments | Last updated | | | |
|--|--|---|--|--|---|---|--|--|-------------------|---|---|------------------------------|--|--|--|
| | | Probability Impact Rating | | Fully effective Partially effective Not effective | | | | Probability Impact Rating | | | | | | | |
| L01 - Financial resilience – Failure to react to external financial impacts, new policy and increased service demand. Poor investment and asset management | Reduced medium and long term financial viability | 4 4 16 | Medium Term Revenue Plan reported regularly to members. | Fully | Councillor A Nell | Michael Furness | Joanne Kaye | 4 4 16 | \leftrightarrow | This continuous process will include reviewing budget monitoring, active budget management, and reflection of economic and Local Government sector trends in the MTFS. Wherever possible, policy decisions will be taken as soon as possible, rather than waiting until the February Council meeting which sets the annual budget. This will allow officers to be ready to implement, or have implemented, policy decisions which will maximise positive impacts on the budget. | | Risk reviewed on 09/04/24 | | | |
| decisions. | Reduction in services to customers Increased volatility and inability to manage and respond to | - | Balanced medium term and dynamic ability to prioritise resources Highly professional, competent, qualified staff | Fully Partially | + | | | | | The budget for 2024/25 was agreed with savings proposals identified to contribute to addressing forecast reductions in funding. Close monitoring of the delivery of the savings | | | | | |
| | changes in funding levels Reduced financial returns (or losses) on | - | Good networks established locally, regionally and nationally. | Fully | - | | | | | programme will take place throughout 2024/25 with mitigations required if slippage is identified. | | | | | |
| | Inability to deliver financial efficiencies | | Strong shareholder function and relationships with subsidiaries | Fully | | | | | | Integration and continued development of Performance, Finance and Risk reporting | - | | | | |
| | Exposure to commercial pressures in relation to regeneration projects. Poor customer service and satisfaction | - | Financial returns from the subsidiaries are not included in the MTFS until they are reasonably assured to materialise. National guidance interpreting legislation available and used | Partially Fully | - | | | | | Internal Audits being undertaken for core financial activity and capital as well as service activity Introduction and implementation of an Asset Management | | | | | |
| | Increased complexity in governance arrangements | | regularly. Progress regeneration plans in a coordinated manner. Participate in Oxfordshire Treasurers' Association's work | Fully | - | | | | | Strategy Capital & Investment Strategy agreed annually | | | | | |
| | Lack of officer capacity to meet service demand | | streams. Review of best practice guidance from bodies such as CIPFA, LGA and NAO. | Fully | + | | | | | Posts are filled by appropriately qualified individuals | | | | | |
| | Lack of financial awareness and understanding throughout the council | | Treasury management and capital & Investment strategies in place in place. Regular financial and performance monitoring in place. | | | | | Regular involvement and engagement with colleagues across the county | | | | | | | |
| | Increased inflation in the costs of capital schemes | | 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. | Fully | + | | | | | Regular member training and support | - | | | | |
| | Increased inflation in revenue costs | | Independent third party advisers in place Asset Management Strategy in place and embedded | Fully Fully | + | | | | | Regular utilisation of advisors as appropriate Summarise and distribute announcements to CLT and | - | | | | |
| | | | | | | Transformation Programme in place to deliver efficiencies and increased income in the future | Partially | - | | | | | members. Timely and good quality budget management reports, particularly property income and capital | - | |
| | | | | Partially | | | | | | Work is underway to maximise the impact of the available space in Banbury town centre | | | | | |
| L02 - Statutory functions – Failure to meet statutory | Legal challenge | | | | Embedded system of legislation and policy tracking In place, with clear accountabilities, reviewed regularly by Directors. | Partially | Councillor S Dallimore | Stephen Hinds | Shiraz Sheikh | 339 | \leftrightarrow | senior officers. | No changes at present. Procurement Act 2023 implementation work has now underway. | Risks reviewed on 03/04/24 - All complete - No | |
| obligations and policy and legislative changes are not | Loss of opportunity to influence national policy / legislation | | Clear accountability for responding to consultations with defined process to ensure Member engagement National guidance interpreting legislation available and used | Fully | - | | | | | Ensure Internal Audit plan focusses on key leadership risks. Establish corporate repository and accountability for | - | changes required | | | |
| anticipated or planned for. | | - | regularly | | - | | | | | policy/legislative changes taking into accountability for the Council's functions. External support secured for key corporate projects | tive sals in sals in the same set of the same | | | | |
| | Reduced service to customers | | Risks and issues associated with Statutory functions incorporated into Directorate Risk Registers and regularly reviewed. | Fully | | | | | | including Growth Deal and IT Transformation Programme. | _ | | | | |
| | Inability to deliver council's plans | | Clear accountability for horizon scanning, risk identification / categorisation / escalation and policy interpretation in place | Partially | | | | | | Learning and development opportunities identified and promoted by the Chief Executive and Directors. First tranche of Senior Leadership training/development begins | | | | | |
| | Exposure to commercial pressures | | Robust Committee forward plans to allow member oversight of policy issues and risk management, including Scrutiny and Audit | | | | | | | in August, and is cascaded throughout 2022/23. Staff briefings on rules and procedures by MO | | | | | |
| | Reduced resilience and business continuity Reduced staff morale, increased workload and uncertainty | - | Internal Audit Plan risk based to provide necessary assurances Strong networks established locally, regionally and nationally | Fully Fully | _ | | Review Directorate/Service risk registers. | Review Directorate/Service risk registers. Ensure Committee forward plans are reviewed regularly by | - | | | | | | |
| | may lead to loss of good people | | to ensure influence on policy issues. In addition two Directors hold leading national roles | | | | | | | senior officers. | | | | | |
| | | | Senior Members aware and briefed regularly in 1:1s by Directors Arrangements in place to source appropriate interim resource if needed | Fully | - | | | | | Ensure Internal Audit plan focusses on key leadership risks. Establish corporate repository and accountability for policy/legislative changes taking into consideration all of | _ | | | | |
| | | | Ongoing programme of internal communication | Fully | + | | | | | the Council's functions. External support secured for key corporate projects | | | | | |
| | | | Programme Boards in place to oversee key corporate projects | Fully | y | | | | | including Growth Deal and IT Transformation Programme. | | | | | |
| | | | and ensure resources are allocated as required. Extended Leadership Team (ELT) Meetings established to oversee and provide assurance on key organisational matters including resourcing. | Fully | + | | | | | Review Directorate/Service risk registers. | 1 | | | | |

| Name and Description of risk | Potential impact | Inherent (gross) risk level (before Controls) | Controls | Control assessment | Lead Member | Risk owner | Risk manager | Residual risk level (after existing controls) | Direction of travel | Mitigating actions (to address control issues) | Comments | Last updated |
|---|--|---|---|--|----------------------------|---------------|-------------------|--|------------------------|---|--|--|
| | | Probability Impact Rating | | Fully effective Partially effective Not effective | | | | Probability Impact Rating | | | | |
| | Poor planning decisions leading to inappropriate growth in inappropriate place. Negative (or failure to optimise) economic, social, community and environmental gain Negative impact on the council's ability to deliver its strategic objectives, including its commitments within the Oxfordshire Housing & Growth Deal Increased costs in planning appeals Reputational damage with investor community of Cherwell as a good place to do business created by uncertainty/ Iack of policy clarity Failure to submit Plan for Examination by June 2025 would mean that the Council would need to prepare a Local Plan under a new plan-making system on which further Govt | 4 4 16 | Local Development Scheme (LDS) is actively managed and reviewed, built into Service Plan, and integral to staff appraisals of all those significantly involved in Plan preparation and review. Team capacity and capability kept under continual review with gaps and pressures identified and managed at the earliest opportunity. On-going review of planning appeal decisions to assess robustness and relevance of Local Plan policies Regular Councillor briefings to ensure all timescale requirements are understood. Ensuring that staff and consultancy resourcing in smintained. | Partially Partially Partially Partially | Councillor D Sames | lan Boll | David Peckford | 3 4 12 | ↔ | Annual (Authority) Monitoring Reports presented to the Executive on plan making and policy effectiveness. An updated LDS presented to the Executive when there is a significant change in the circumstances for the Local Plan timetable. Programme built into Directorate level objectives (e.g. via Service Plans) and staff appraisals; on-going preparation o the Local Plan is a service priority. Project management of the Local Plan process continues. Regular Corporate Director, Portfolio Holder and Members Advisory Group briefings Continuance of internal Members' Advisory Group meetings. Early briefing for new Portfolio Holder in May 2024 and any new Councillors. | Local Development Scheme' on 5 September 2023. An Annual Monitoring Report was approved by the Executive on 4 December 2023. A Proposed Submission' f(Reg. 19) draft of the Plan will be prepared for Autumn 2024 and regular progress reports provided to the Council's Corporate Leadership Team and the Porfolic Holder for Planning and Development. The new | on 28/03/2024 - Risk description, controls, mitigations and comments updated. |
| L04 - Business Continuity - Failure to ensure that critical services can be maintained in the event of a short or long term incident impacting on the delivery of the Council's operations | guidance is awaited. This would significantly delay having a new, up-to-date Plan. Inability to deliver critical services to customers/residents Financial loss/ increased costs Loss of important data Inability to recover sufficiently to restore non-critical services before they become critical Loss of reputation Reduced service delivery capacity in medium term due to recovery activity | 4 4 16 | Business continuity strategy, statement of intent and framework in place and all arrangements overseen by a Business Continuity Steering Group Services prioritised and ICT recovery plans reflect those priorities and the requirements of critical services ICT disaster recovery arrangements in place with data centre and cloud services reducing likelihood of ICT loss and data loss Incident management team identified in Business Continuity Framework All services undertake annual business impact assessments and updates of business continuity Steering Group meets regularly to identify Business Continuity improvements needed | Fully Fully Fully Fully Partially Partially | Councillor P Chapman | | Tim Hughes | | ÷ | BC actions post-audit are being implemented as per plan. BCSG meeting routinely and corporate refresh across all areas is progressing. BC Impact Assessments and BCPs being updated and reviewed by Emergency Planning Team with supporting document management system being implemented. Business Continuity Statement of Intent and Framework reviewed and updated to align with new incident management framework Cross-council BC Steering Group meets regularly to identify BC improvements needed; BC Steering Group has been reconvend, engagement is being made across all service areas. | | Risk reviewed on 09/04/24- No change |
| 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 Reputational damage | 4 4 10 | Incident Management Framework in place and key contact lists updated monthly. Emergency Planning Lead Officer defined with responsibility to review, test and exercise plan and to establish, monitor and ensure all elements are covered Expert advice and support provided by Oxfordshire County Council's Emergency Planning Team under partnership arrangements. Council Duty Directors attend training relating to role prior to joining duty director rola and have refresh training annually Multi agency emergency exercises conducted to ensure readiness. Active participation in Local Resilience Forum (LRF) activities On-call rola being maintained and updated to reflect recent staffing changes. | Fully Fully Fully Fully Partially Fully | Councillor P Chapman | I an Boll | Tim Hughes | | ÷ | IMF reviewed and updated. Training schedule in place and being delivered including training for new ADs/CEx and refresh for existing duty directors. Emergency plan contacts list updated monthly and reissued to all duty directors. Supporting officers for incident response reviewed and identified across some areas, to ensure they are reviewed and updated across all service areas. | | Risk reviewed on 09/04/2024 - No change |

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|--|---|---|---|--|------------------------------|------------------|--------------------|--|-----------------------|--|---|--|
| | | Probability Impact Rating | | Fully effective Partially effective Not effective | | | - | Probability Impact Rating | | | | |
| the Vulnerable – Operational and partnership actions | Increased harm and distress caused to vulnerable individuals and their families. | 4 4 1 | Engagement with the Oxfordshire partnerships protocol review to identify improvements to local arrangements in support of the strategic partnerships. Outcomes of review to be implemented. | | Councillor P Chapman | lan Boll | Tim Hughes | 248 | \leftrightarrow | Continue in linking in with Oxfordshire partnerships protoco review to ensure outcomes relevant to CDC are understood and implemented as necessary. | | Risk reviewed on 09/04/2024 - No change |
| Failure to work effectively with partners to identify and protect | Council subject to external reviews | | Child Exploitation prevalence report reviewed with LPA Commander following each CE sub-group meeting. Community based exploitation disruption coordinated through the Joint Agency Tasking and Coordination Process. | Fully Fully | - | | | | | Exploitation concerns and actions discussed routinely at Joint Agency Tasking and Co-ordination meetings on a monthly basis | | |
| vulnerable people in the district and disrupt exploitation | Criminal investigations potentially compromised Potential financial liability if council deemed to be pagelineat | - | the John Agency rasking and Coordination Process. | Fully | - | | | | | | | |
| leaving vulnerable people at risk or subject to exploitation. | negligent. Reputational damage to the council. | - | | Partially Partially | + | | | | | | | |
| L07 - Health and safety Failure to ensure effective | Unsafe services leading to fatality, serious injury & ill health to employees, service users or members of the public | 542 | Corporate H&S governance arrangements and policies are regularly reviewed and updated by the Corporate H&S Team and monitored by the H&S Assurance Board. | Fully | Councillor S Dallimore | Claire Cox | Ruth Wooldridge | 3 4 12 | ↔ | Corporate H&S Auditing and Inspection programme on track. Reports issued to managers and actions tracked for completion. Work ongoing with 2 audits per calendar month. | RW & MG are undertaking audits and inspections on a monthly basis as per the KPI and on target for 100% completion. | Risk reviewed on 11/04/2024 - No changes |
| arrangements are in place for Health and Safety. | Criminal prosecution for failings Breach of legislation and potential for enforcement action. | | Directors and service leads are responsible for ensuring H&S arrangements are in place within their areas or responsibility. Managers are responsible for ensuring operational health and safety risks are assessed and effective control measures implemented. | Fully | | | | | | Work still in progress with service areas around the corporate H&S register, which will be managed and monitored with a focus on the depots as our highest risk areas. | Reports are going monthly to CLT. Ruth is also reporting in to monthly DLT meetings when necessary. All Corporate Arrangements were reviewed | |
| | Financial impact (compensation or improvement actions) | | Consultation with employee representatives via employer and union consultative committees (Unison) | Fully | | | | | | Post decoupling senior management will have monthly monitoring of H&S matters as a standing item at senior management meetings. | late 2022, RW now going through again and doing further updates. | |
| | Reputational Impact | | Corporate H&S Training provided via corporate learning and development programme. Training for operational risks may be organised by services. | Fully | | | | | | Relevant and required policies and procedures are being reviewed. | RW to review the Health, Safety and Wellbeing Policy now that Gordon is in post (Quarter 1). | |
| | | | H&S performance monitored by accident and incident reports and corporate H&S auditing and inspection programme. H&S information is disseminated via internal communications | Fully Fully | + | | | | | Working with service areas to ensure that suitable risk assessments are in place. | MG supporting Environmental Services ensuring their continued compliance. | |
| L08 - Cyber Security -If there is insufficient | Financial loss / fine | 4 5 2 | and updates to ELT and other relevant meetings. File and data encryption on computer devices | Fully | Councillor | Stephen Hinds | David Spilsbury | 3 5 15 | ↔ | Additional 3rd party monitoring in place using a SIEM tool and 24/7 monitoring via a SOC. | | Risk updated on 09/04/2024 - |
| security with regards to the data held and IT systems used by the councils and insufficient protection | Prosecution – penalties imposed | | Managing access permissions and privileged users through AD and individual applications | Fully | Dallimore | | | | | All staff reminded to be vigiliant to unexpected emails due to the heightened risk of cyber-attack due to escalating tensions in Eastern Europe and at critical periods such as the run up to Elections | _ | Mitigating actions updated |
| against malicious attacks on council's systems then there is | Individuals could be placed at risk of harm | | Schedule of regular security patching | Fully | | | | | | Cyber Security advice and guidance regularly highlighted to all staff. | D | |
| a risk of: a data breach, or a loss of service. | Reduced capability to deliver customer facing services | | Vulnerability scanning | Fully | | | | | | Cyber Security is mandatory e-learning for all staff to be completed annually and is part of new starters induction training. Additionaly regular Mimecast videos sent to all users for bitsize regular training. | | |
| | Unlawful disclosure of sensitive information | | Malware protection and detection | Fully | 1 | | | | | Cyber Security Officer has reviewed advice and provided assurance on our compliance. | - | |
| | Inability to share services or work with partners | | Effective information management and security training and awareness programme for staff | Fully | | | | | | External Health Check undertaken each year and Cabinet Office PSN compliance reviewed and certified each year to ensure the infrastructure is secure to connect to the PSN. | > | |
| | Loss of reputation | | Password and Multi Factor Authentication security controls in place | | | | | | | Internal Audit completed cyber audits with no major issues or significant risks identified. | <u>,</u> | |
| | Increased threat to security due to most staff working from home | | Robust information and data related incident management procedures in place Appropriate robust contractual arrangements in place with all | Fully Fully | - | | | | | IT implemented an intrusion prevention and detection system which is monitored, and regular actions are implemented from the resulting reports. IT Officer has specific responsibility for Cyber Security and | - | |
| | | | third parties that supply systems or data processing services | - | _ | | | | | IT Officer has specific responsibility for Cyber Security and we have engaged a specialist partner to advise on industry best practices and standards. Microsoft Multi-Factor Authentication is embedded to authenticate users providing an enhanced level of cyber security. | | |
| | | | Appropriate plans in place to ensure ongoing PSN compliance Adequate preventative measures in place to mitigate insider threat, including physical and system security | Fully | - | | | | | | | |
| | | | Insider threat mitigated through recruitment and line management processes | Fully | - | | | | | | | |
| | | | A complete restructure and update of the technical approach for the infrastructure has resulted in a move to a zero trust model. | Fully | | | | | | | | |
| | | | Advice received from NCSC on specific activity alerts, the increased threat of globalised ransomware and malware attacks. | E.º. | - | | | | | | | |
| | | | Mimecast awareness training and comprehensive defence system deployed to improve email security. | Fully | 1 | | | | | | | |

| Name and Description of risk | Potential impact | Inherent (gross) risk leve (before Controls | Controls | Control assessment | Lead Member | Risk owner | Risk manager | Residual r level (aft existing controls | er Direction | | Comments | Last updated |
|--|--|---|---|--|----------------------------|-------------------|------------------|--|--------------|--|---|---|
| | | Probability Impact Rating | , | Fully effective Partially effective Not effective | | | | Probability Impact | Kating | | | |
| the vulnerable - Internal procedures- Failure to follow our internal policies and procedures in relation to safeguarding vulnerable adults and | individuals and their families Council could face criminal prosecution Criminal investigations potentially compromised | 4 4 10 | 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 | Fully Fully Fully Fully | Councillor P Chapman | Gordon Stewart | Nicola Riley | 24 | 8 ↔ | Action plan acted upon and shared with Overview and scrutiny committee once a year Annual refresher and new training programmes including training for new members Continue to attend safeguarding board sub groups as necessary to maintain high levels of awareness within the system and compliance with latest practice Corporate monitoring of all referrals | continue with good attendance, on Safeguarding News Bulletin to all up safeguarding champions keeps Safeguarding at the forefront and identifies shared learning. Outcome of the Peer | Risk reviewed on 10/04/2024 - Comments updated |
| concerns about their welfare. | Reputational damage to the council | | place for all staff. Safer recruitment practices and DBS checks for staff with direct contact 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. | Fully Fully Fully Fully | - | | | | | Ensure web pages remain up to date Monitoring of implementation of corporate policies and procedures to ensure fully embedded Regular internal cross departmental meetings to discuss safeguarding practice SAR's and Lessons Learned reports ciculated to improve practice and knowledge. | | |
| L10 - Sustainability of Council owned companies and delivery of planned financial and other objectives - Failure of council owned companies to achieve their intended outcomes or fail to meet financial | in terms of financial and business outcomes | 3 5 1 | Annual business planning in place for all companies to include understanding of the link between the Council's strategic objectives being delivered and financial impact for the council. A regular Shareholder Representative meeting takes place, a Shareholder Liaison Meeting including the 5.151 Officer and Monitoring Officer takes place on a quarterly basis and a Shareholder Committee meeting on a quarterly basis. A governance review is being undertaken and initial recommendations have been approved by the Shareholder Committee. | Fully | Councillor B Wood | Gordon Stewart | Stephen Hinds | 2 3 | 6 ↔ | A Shareholder Representative was appointed and regular governance arrangements are in place. | | Risk reviewed 07/02/2023 - No changes |
| objectives | Failure of council owned companies to achieve their intended outcomes or fail to meet financial objectives | | Regular meetings are in place between the Council's S.151 Officer and the relevant company Finance Directors: Financial planning for the companies undertaken that will then be included within our own Medium Term Financial Strategy. Financial risks are routinely reported by the Shareholder Representative to the Shareholder Committee. | Fully | | | | | | Resilience and support being developed across business to support and enhance knowledge around council companies. | | |
| | Lack of understanding at officer and member level about the different roles of responsibilities required when managing council owned companies | | Clear governance arrangements are in place. Sound monitoring in place of both business and financial aspects of the companies and the impact on overall council performance through the Shareholder Representative meetings and through the reporting to the Corporate Leadership Tearm monthly. Training in place for those undertaking Director roles relating to the companies. | Partially Fully Partially | - | | | | | Skills and experience being enhanced to deliver and support development, challenge and oversight. Work with one company to ensure long term support arrangements are put in place. | - | |

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|--|---|---|--|--|----------------------|--------------------|-----------------|--|------------------------|---|---|--|
| | | Probability Impact Rating | | Fully effective Partially effective Not effective | | | | Probability Impact Rating | | | | |
| sustainability of third-party suppliers | of contractors results in the inability or reduced ability to ppliers deliver a service to customers or provide goods needed. A | 3 4 12 | Ensure contract management in place review and anticipate problems within key service suppliers and partners | Partially | Councillor A Nell | r Shiraz Sheikh | | 3 4 12 | | Creditsafe UK tool purchased to allow Procurement to carry out supplier credit checks when required. | Creditsafe UK tool now operational .Guidance is being developed for service areas to ensure that a contract management process is followed on a regular basis. This | Risk Reviewed 09/04/24 - No changes. |
| | | | Business continuity planning arrangements in place in regards to key suppliers | Partially | Ī | | | | | Service areas to ensure supplier suitability checks have been carried out prior to award of contract and hold | will include regular checks on Creditsafe UK to check on financial health; service areas will be advised to confirm that business continuity arrangements are in place and to seek evidence of regular reviews of this as part of the contract management process. Service areas to provide details of all current contracts to Procurement to enable analysis of third party spend to identify and risk assess key suppliers and contractors and to | |
| | | | Ensuring that proactive review and monitoring is in place for key suppliers to ensure we are able to anticipate any potential service failures | Partially | | | | | | meetings as required with suppliers to review higher risk areas and ensure risks are being managed. Reminders to be sent to all who have Procurement/Contract Management responsibility to regularly meet with key suppliers and partners to gain early understanding of any issues arising. | | |
| | | | Intelligence unit set up procurement Hub to monitor supplier and contractor market | Fully | Ì | | | | | Services areas to keep the key suppliers under regular check including running financial checks. | | |
| | | | Analysis of third party spend undertaken to identify and risk Fully assess key suppliers/contractors | Fully | Ì | | | | | | identify areas of duplication of costs. Prior to contract award, procurement carries | |
| | Increased costs and/or financial exposure to the Council due to having to cover costs or provide service due to failure of third party supplier of contractor | | | | | | | | | | out a credit safe check to ensure financial viability of the preferred supplier. | |

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|--|--|---|--|--|------------------------------|-------------------|------------------|---|-------------------|---|----------|--|
| | | Probability Impact Rating | | Fully effective Partially effective Not effective | | | | Probability Impact Rating |) | | | |
| L12 - Corporate Governance - Failure of corporate governance leads to negative impact on | Threat to service delivery and performance if good management practices and controls are not adhered to. | 4 4 16 | Clear and robust control framework including: constitution, scheme of delegation, ethical walls policy etc. Member Scrutiny - OSC function, Council Executive, AARC | Fully Fully | Councillor S Dallimore | Hinds | Shiraz Sheikh | 339 | \leftrightarrow | External Audit - external audit issue an opinion on the accounts and the Council's arrangements for securing Value for Money. The Council's Annual Governance Statement and Code of Corportae Governance. At least annually, a review of effectiveness of governance framework including the system of internal control and AGS is published. The work is informed by the Corporate Governance and Oversight Group. CLT & ELT has responsibility of maintenance of the governance environment. | | Risk reviewed - 09/04/2024 no changes |
| service delivery or the implementation of major projects | Risk of ultra vires activity or lack of legal compliance | | and Standards Committees Clear accountability and resource for corporate governance (including the shareholder role). | Fully | | | | | | | | |
| customers. | Risk of fraud or corruption Risk to financial sustainability if lack of governance results in poor investment decisions or budgetary control. | | Integrated budget, performance and risk reporting framework. Corporate programme office and project management framework. Includes project and programme governance. | Fully Partially | | | | | | | | |
| | Failure of corporate governance in terms of major projects, budgets or council owned companies impacts upon inability to support Council's democratic functions / | | Internal audit programme aligned to leadership risk register. Training and development resource targeted to address | Fully Partially | - | | | | | | | |
| | obligations (e.g. return to physical public meetings and public access to meetings) Elements of the COVID-19 response and recovery work | | priority issues; examples include GDPR, safeguarding etc. HR policy framework. | Partially | - | | | | | | | |
| | may be compromised, delayed or not taken forwards. | | Annual governance statement process undertaken for 2023/24 connects more fully and earlier with ELT and CLT. | Fully | | | | | | | | |
| | | | Review of the Constitution by the MO with member involvement and approval by the Full Council | Fully | | | | | | | | |
| and management of | Failure to actively manage the various Infrastructure Projects and Programmes, particularly in relation to those being delivered by Oxfordshire County Council, could lead | 4 5 20 | Need to establish appropriate officer and stakeholder governance structures to support effective programme delivery. | Partially | Councillor D Ford | Ian Boll | Robert Jolley | 4 3 12 | ↔ | Establishment of appropriate officer and stakeholder governance structures to support effective programme delivery | | Risk reviewed on 03/04/24 - No changes |
| Programmes - Failure to properly manage and monitor the various residual | to delays or failure to deliver timely obligations, which could lead to HM Government holding back some or all of its funding, or requiring repayment. Delivery of Infrastructure projects fail to accelerate housing delivery as commercial pressures impact house builders | | Need to institute regular and effective dialogue with developers. | Partially | | | | | | Institute regular and effective dialogue with developers | | |
| and Growth Deal infrastructure projects. | | | | | | | | | | | | |
| Strategy The lack of effective workforce strategies | Limit our ability to recruit, retain and develop staff | 3 4 12 | Analysis of workforce data and on-going monitoring of issues. | Partially | Councillor S Dallimore | Gordon Stewart | Claire Cox | 3 4 12 | . ↔ | There are indications that specific service areas are continue to experience recruitment difficulties for professional roles. IH is working with the relevant director: to consider alternative resourcing methods. | c | Risk reviewed - 09/04/2024 no changes |
| ability to deliver Council priorities and | Impact on our ability to deliver high quality services | | Key staff in post to address risks (e.g. strategic HR business partners) | Fully | | | | | | Development of new L&D strategy, including apprenticeships. | * - | |
| services. | Overreliance on temporary staff | | Weekly Vacancy Management process in place | Fully | | | | | | Development of relevant workforce plans. Development of specific recruitment and retention strategies. It is planned for CDC to develop a framework that suits the needs of all services ensuring that the Council has access to a much wider pool of staffing agencies at competitive rates. | | |
| | Additional training and development costs | | Ongoing service redesign will set out long term service requirements | Partially | - | | | | | competitive rates. The new IT system has been implemented to improve our workforce data and continues to be develop to improve our ability to interrogate and access key data (ongoing) in order to inform workforce strategies. | | |