Appendix 3 – Cherwell District and South Northants Councils – Latest Leadership Risk Register as at 12/12/2018

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									
				Proba	bability									
		1 - Remote	2 - Unlikely	3 - Possible	4 - Probable	5 - Highly Probable								
	5 - Catastrophic													
pact	4 - Major		L04, L10, L12											
Ξ E	3 - Moderate			L01, L02, L05, L14	LO3, L06, LO7, L08, L11	L09, L13a, L13b								
_	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
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Ref	Name and Description of risk	Potential impact		nherent (g risk leve (no Contr	el	Controls	Control assessment	Lead Member	Risk owner	Risk manager		al risk lev	vel (after	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.	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 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 Partially Fully Partially Partially Fully Partially Fully Partially Fully Partially Partially Fully Partially Fully Fully Fully Partially	Councillor Tony Illot Councillor Peter Rawlinson	Adele Taylor	Kelly Watson	3	3	9	\leftrightarrow	Procurement resource being reviewed. 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 to now be 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. Financial support and capacity being developed during 18/19 through development programme. Regular utilisation of advisors. Internal Audits being undertaken for core financial activity and capital.	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.	Risk reviewed - 10/12/18 - No Changes
L02	Statutory functions – Failure to meet statutory obligations and policy and legislative changes are not anticipated or planned for. 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.	Legal challenge Loss of opportunity to influence national policy / legislation Financial penalties Reduced service to customers 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	3	4		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 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	Partially Fully Fully Partially Partially Partially Fully Fully Partially	Councillor Barry Wood Councillor Ian McCord Councillor Barry Wood Councillor Ian McCord	Yvonne Rees Richard Ellis Yvonne Rees Richard Ellis	Claire Taylor		3		\leftrightarrow	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 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	started. Separate service plans for CDC and SNC. Separate leadership risk registers to be put in place for CDC and SNC from 1 January 2019. Risk Management training session for Assistant Directors / Service Managers delivered in November.	Commentary
		Reduced resilience and business continuity Reduced staff morale and uncertainty may lead to loss of good people				IN I / 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 d Partially	_								loint CEDR meetings to take place fortnightly from January 2019. Regular comms being provided by the Chief Executives	

Ref	Name and Description of risk	Potential impact		herent (gr risk leve	el .	Controls	Control assessment	Lead Member	Risk owner	Risk manager		al risk leve		Direct'n of travel	Mitigating actions (to address control issues)	Comments	Last updated
			Probability	no Contro	Rating		Fully effective Partially effective Not effective				Probability	Impact	Rating				
L04	CDC & SNC Local Plans - Failure to ensure sound local plans are submitted on time for each District.	Inappropriate growth in inappropriate places	3	5	15	Local Development Schemes are in place at each Council which detail the timeframes and deliverables to underpin the work		Councillor Colin Clarke Councillor Roger Clarke	Paul Feehily	Andy Darcy (SNC) David Peckford (CDC)	2	4	8	\leftrightarrow	Regular review meetings on progress and critical path review at each Council	CDC - A preliminary hearing for the Examination of the Partial Review of the Local Plan was held on 28 September 2018. On 29 October, the Inspector advised that the Council could proceed to main hearings. The Council is to be advised of Matters and Issues in December 2018. 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 for CDC are scheduled to be presented to the Executive in Dec 2018. The Oxfordshire authorities have collectively commenced work on a Joint Statutory Spatial Plan (ISSP) and has been recruiting staff. In October, the Executive approved the JSSP's Local Development Scheme, its Scoping Document and its Statement of Community Involvement for consultation.	reviewed, Controls and comments d updated 29/11/18
		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				Resources are in place to support delivery including Barrister support for each Local Plan. For issues which are solely within the control of SNC or CDC policies, plans and resources are in place CDC - Preparation of the Cherwell Partial Review as committed to by the adopted Local Plan. A Canalside Supplementary Planning Document to help implement Policy Banbury 1 of the Local Plan. Keeping the CDC Local Development Scheme up-to-date. SNC - Reg 19 Plan out for consultation (October 2018). Aim to be submitted to PINS by January 24 2019. Statements of Community Involvement are in place.	Fully Partially Fully Fully Fully								Regular Portfolio briefings and political review LDS updated as required Additional evidence commissioned as required CDC: Consideration of Local Plan programme by Executive - a revised CDC Local Development Scheme is due to be presented to the Executive on 3 Dec. This will determine whether to switch to a full Local Plan review starting in 2019 (instead of a Local Plan Dact 2). Submission of the CDC partial review took place on 05/03/18.	SNC – Joint Core Strategy Review has commenced with preparation of proposed timetable, resources and scope underway. Work has commenced with Milton Keynes and Aylesbury for new Joint Spatial Framework to address impact of proposed growth of Milton Keynes on its neighbours. Local Plan part 2 has been published for representations, with employment allocations and Local Green Space designations. Aim is to submit in January 2019.	
95	maintained in the event of a short or long term incident affecting the Councils' operations	Inability to deliver critical services to customers/residents Financial loss Loss of important data Inability to recover sufficiently to restore non-critical services before they become critical Loss of reputation	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 Business Continuity Plans tested	Fully Partially Partially Partially Partially Partially Partially Partially	Councillor Dermot Bambridge Councillor Andrew McHugh	Graeme Kane	Richard Webb	3	3	9	\	All individual service Impact Assessments and BC Plans being updated BC Improvement plan, including testing, being developed by Steering Group ICT transition to data centre and cloud services have reduced likelihood of ICT loss and data loss Corporate ownership and governance to sit at senior officer level Draft Business Continuity Strategy and Policy being updated for sign-off by Leadership Team. Progress report to be provided to CEDR in December	Group is in place to provide professional advice on critical aspects of the plans. An internal audit is scheduled for Dec/ Jan to quality assure our plans.	actions and Comments updated.
06	Partnering - Financial failure of a public sector partner organisation 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)	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 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	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 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	Partially Partially Partially Partially Partially	Councillor Barry Wood Councillor Ian McCord	Jane Carr	Nicola Riley	4	3	12	\leftrightarrow	Review existing arrangements/ contracts to ensure appropriate governance Standard agenda item at senior officer meetings Continue Institute of Directors training for Officers and Members	Third party governance review underway. Cllr and Officer appointments to Council owned companies to be reviewed. Impact of potential NCC cuts on this risk to be reviewed. Ongoing meetings with Chief Execs from across Northamptonshire to agree next steps for Unitary approach Ongoing meetings with wider health partners to ensure evidence based approach to investment in Wellbeing Directorate Services	Risk reviewed 10/12/18 - No changes

		Potential impact	Inherent (gr	nss)	Controls									Mitigating actions		
Ref	Name and Description of risk		risk level (no Contro	1		Control assessment	Lead Member	Risk owner	Risk manager		risk level (at ng controls)		Direct'n of travel	(to address control issues)	Comments	Last updated
			Probability Impact	Rating		Fully effective Partially effective Not effective				Probability	Impact	Rating				
LO7	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	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- coordinators Full participation in Local Resilience Forum (LRF) activities	Partially Fully Fully Fully Fully Fully	Councillor Dermot Bambridge Councillor Andrew McHughy	Graeme Kane	Graeme Kane	3	4 1	12	\leftrightarrow	Director for Environment is reviewing the Emergency Planning arrangements and developed relationships with key partners. New call out arrangements for Snr Officers have been established 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. The Inter Agency Group met in November to reflect on this year's F1 Grand Prix and Moto GP and to start preparations for 2019. Both authorities are represented at the Local Resilience Forum	Both authorities have active plans in place to ensure they are prepared for a variety of emergencies. Further improvements are being made as a result of a review of these plans. Senior Officers have had the opportunity to attend multi agency training exercises during November to increase their knowledge and experience. Plans are developing to create two systems for SNC and CDC separately from January 2019.	10/12/18 - 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			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	Partially								Corporate H&S Policy now finalised and communicated to all levels of managers and staff. The launch of this policy has helped to ensure that roles & responsibilities are discharged effectively. The next stage is underway, this is to update Corporate H&S arrangements and guidance documents which support the policy underneath. 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).	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.	
		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	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 &	Fully Partially Partially Fully Partially Partially Partially Partially Fully	Councillor Lynn Pratt Councillor Peter Rawlinson	Adele Taylor	Martin Green	4	3 1	12	\leftrightarrow	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.	Internal Audit Schedule rolling 3 year programme has now been developed and is underway.	

Name and Description of risk	Potential impact		herent (g risk lev no Contr	el	Controls	Control assessment	Lead Member	Risk owner	Risk manager		al risk le	vel (after trols)	Direct'n o travel	Mitigating actions (to address control issues)	Comments	Last update
		Probability	Impact	Rating		Fully effective Partially effective Not effective				Probability	Impact	Rating				
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.	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 Partially Partially Partially Partially Partially	Councillor Ian Corkin Councillor Phil Bignell	Claire Taylor	David Spilsbury	3	5	15	\leftrightarrow	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 are being arranged for January 2019 at CDC and SNC. Complete the implementation of the intrusion prevention and detection system by the end of 2018. Agree Terms of Reference and re-implement the security forum at the Information Governance Group, with meetings to be held on minimum quarterly basis. 1st meeting should be January 2019. 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	s a	Risk reviews 10/12/18 - Control Assessment Risk Owner, Mitigating Actions and Comments Updated
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 last year and mandatory training introduced 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 Oxfordshire County Council (OCC) safeguarding sub group Engagement at an operational and tactical level with relevant external agencies and networks	Fully Fully Partially Partially Partially Partially Fully Partially Fully Fully Fully Fully Fully Fully Fully	Councillor Barry Wood Councillor Ian McCord	Jane Carr	Nicola Riley	2	4	8	\leftrightarrow	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 Child exploitation groups in both Counties		Risk review 10/12/18 - change.
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 Councillor Peter Rawlinson	Adele Taylor	Kelly Watson	3	4	12	↑	Recruiting to support shareholder and client side capacity. Relevant training being provided. 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 turnover in this area leading to increase in risk. Mitigations as resource identified. Knowledge and experience building take place with training and support as required.	e Risk review 10/12/18 Residual ri score incre and comm updated.

Name and	Description of	Potential impact	Inh	erent (gros	s)	Controls					Residu	ual risk lev	vol (after	Direct'n of	Mitigating actions		
Ref	risk			risk level no Controls))		Control assessment	Lead Member	Risk owner	Risk manage	r	isting con	•	travel	(to address control issues)	Comments	Last updated
			Probability	Impact	Rating		Fully effective Partially effective Not effective				Probability	Impact	Rating				
L12 Financial su		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 Councillor Peter Rawlinson	Adele Taylor	Kelly Watso	n 2	4	8	\leftrightarrow	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.	changes.
on the prov	ation CDC - for local nt tion impacts vision of residents and	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	Leader and CEO engaging at national and county level to define steps and mitigate impacts of potential service reductions for residents. Planning for the impact of separation of joint working arrangements between CDC ad SNC is underway. Strategic partnership opportunities with Oxfordshire County Council being explored with Joint Chief Executive in place by 1st October. Regular review and sharing of partnership activity / engagement at senior officer meetings	Partially	Councillor Barry Wood	Yvonne Rees	Claire Taylo	or 5	3	15	\leftrightarrow	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. New governance arrangement to underpin joint working with SNC following the end of the s113 required. OCC - CDC section 113 agreement completed.	Separate CDC Senior Leadership Team in place from 1st January 2019. Structure includes clear responsibility for separation from SNC. Plan for service separation between CDC/SNC agreed. First proposals for separation endorsed by JASG in December 2018. Collaboration Agreement to underpin ongoing joint working between CDC and SNC to be agreed by Executive in January 2019.	Risk reviewed 12/12/18 - Commentary updated.
on the prov	ation SNC - for local nt tion impacts vision of residents and	Inability to deliver Council priorities and plans, impacting on quality of services delivered to residents and communities. Potential reduction in service areas funded by the County Council resulting in an unplanned increase in demand on district functions leading to service difficulties. Threat to existing joint working partnership initiatives if alternative delivery modes are imposed. Potential impact of CDC/SNC separation on quality of services delivered to residents and communities.	5	4	20	Leader and CEO engaging at national and county level to mitigate impacts of potential service reductions for residents. Planning for the impact of separation of joint working arrangements between CDC ad SNC is underway. Additional senior leadership resources are planned for SNC. Interim Head of Paid Service appointed for SNC to start on 1st October. Regular review and sharing of partnership activity/engagement at senior officer meetings	Partially Partially Partially Partially	Councillor lan McCord	Richard Ellis	Claire Taylo	r 5	3	15	\leftrightarrow	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. Additional communications resources have been put into place to support the agenda. Separation tracker and risk register to be circulated at all senior management meetings. New governance arrangement to underpin joint working with CDG following the end of the s113 required.	Separate SNC Senior Leadership Team in place from 1st January 2019. Structure includes clear responsibility for both LGR and separation from CDC. Plan for service separation between CDC/SNC agreed. First proposals for separation endorsed by JASG in December 2018. Collaboration Agreement to underpin ongoing joint working between SNC and CDC to be agreed by Cabinet in January 2019.	updated.
Failure of congovernance negative im service deliinplementa	e leads to npact on ivery or the tation of major roviding value	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	ethical walls nolicy etc. Clear accountability and resource for corporate governance (including the shareholder role). Integrated budget, performance and risk reporting framework.	Partially Partially Partially Partially Partially Partially Partially Partially Partially	Councillor Barry Wood Councillor Ian McCord	Nick Graham Andrew Hunkin	Nick Grahar Andrew Hunkin	n 3	3	9	\leftrightarrow	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 o be in placed by 16 January 2019.	05/12/18 - Risi reviewed, Risk Owner & Manager & Comments updated