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## REVIEW OF THE COUNCIL'S RISK MANAGEMENT FRAMEWORK AND CORPORATE RISK REGISTER

### 1 PURPOSE OF REPORT

- 1.1 This report presents the Council's proposed corporate risk register (CRR) for 2020/21 for consideration and approval.

### 2 INTRODUCTION

- 2.1 The previous report on this topic was presented to the Audit Committee in November 2019 when the six-month review of the CRR was noted.

### 3 THE CORPORATE RISK REGISTER FOR 2020/21

- 3.1 The summary corporate risk register for 2020/21 is included at **Appendix A**.
- 3.2 All the key risks faced by the Council are presented, together with the controls in place to mitigate these risks and an assessment of whether each is considered High, Medium, or Low Risk. Each of the risks listed in the summary is supported by a fuller risk analysis that is available on request.
- 3.3 The CRR is supported by service area risk registers (SARRs) owned by each Assistant Director that identify the risks and mitigation controls which apply to each of the Council's service areas. They form part of a continual review and are monitored as part of the CRR review at Leadership Team meetings. The SARRs are available on request.
- 3.4 As part of the 2020/21 Internal Audit programme, risk management is reviewed as is relevant to the audit being undertaken. Tests seek to confirm that controls are in place and operating well to mitigate risk.

### 4 SIX MONTH REVIEW OF THE CORPORATE RISK REGISTER

- 4.1 The risks on the corporate risk register sufficiently cover both day-to-day operations and the new projects and initiatives required to achieve the Business Plan.
- 4.2 At the 26 November Audit Committee, Members requested an update on Corporate Risk 3b: Health and Safety. The overall quality of controls has since improved from Poor to Fair to reflect the work of the Health and Safety Officer attending service area meetings, regular health and safety reports at Leadership Team meetings and the completion of the building security project. This risk is due for review in August as per the risk review programme. Further updates are expected as a result of the COVID-19 restoration project and the continued work of the Health and Safety Officer.
- 4.3 Since the 26 November Audit Committee, the Leadership Team has conducted three quarterly business review meetings which considered the

summary corporate risk register with a focus on High risks and Poor controls and discussed mitigation activity.

4.4 All corporate risks were reviewed in light of the COVID-19 pandemic and risk owners have taken this opportunity to include a review of the quality of controls ratings in line with the risk management criteria. A summary of the updates made follows.

- The following risk reviews did not result in any updates - Risks 2 (Safeguarding), Risk 3a (Food Safety), Risk 7 (Stakeholders) and Risk 15 (GDPR).
- Risk 1 (Business Plan) has been refreshed to reflect the revised Business Plan, the revised Project Management Office and to reflect that the MTFS will reflect COVID-19 announcements.
- Risk 4 (Incident Response) now includes attendance at the Essex Resilience Forum as a control and includes an action to review Business Continuity Plans for COVID-19 lessons learned with the results reflected in the appropriate risk registers.
- Risk 5 overall controls have improved from Fair to Good as a result of a review against the criteria.
- Risk 8 (Innovation) will use the lessons learned from COVID-19 to inform the Connect Programme and Restoration Project.
- Risk 9 (Balanced Budget) has refined its title for clarity and reflected the monitoring of government announcements, including COVID-19, within its controls.
- Risk 10 (Inability to recruit/retain) has incorporated the control of moving to a digitalised service as a result of increased remote working and, following a review of its quality of controls, the overall assessment has improved from Fair to Good.
- Risk 12 (Value for Money) has refined its title for clarity.
- Risk 13 (Governance) includes the external review of the Constitution and the counter fraud project as current projects related to this risk.
- Risk 14 (ICT) incorporates the work of the Connect programme within its controls which will include feedback from the COVID-19 Restoration project. Based on the work to date of ICT and following a review of its quality of controls, the overall assessment has improved from Fair to Good.

**5 STRATEGIC ISSUES MONITORED OUTSIDE THE CORPORATE RISK REGISTER**

- 5.1 The impact of the UK's exit from the European Union and COVID-19 are not specifically listed as individual corporate risks since they are known issues which are being actively managed; however, specific areas of risk are reflected within the existing risks on the CRR as appropriate. These issues are closely monitored by Strategic Director and Emergency Planning Officer. Issues relating to UK's exit from the European Union and COVID-19 are specifically dealt with by the Essex Resilience Forum of which the Council is an active member. Service areas are being kept informed of the latest developments with updates included on relevant risk registers.

**6 WIDER RISK UPDATE**

- 6.1 The risk review programme has been updated to align with the Internal Audit work plan and relevant corporate risks will be reviewed in advance of planned audits. From July 2020, RDC will resume the rolling annual risk review and record updates in the six-monthly reports to the Audit Committee.
- 6.2 For each individual project, specific risk logs and actions are monitored within the project documentation. These will change as the projects evolve.
- 6.3 For each individual contract deemed Medium to High risk, specific risk logs and actions are monitored as part of the contract monitoring process. These will change as the projects evolve.
- 6.4 For each individual service area, risks and actions are monitored with formal reviews taking place every 6 months. Each service area risk register is subject to an annual check and challenge process and reviews are included in the Internal Audit plan.
- 6.5 A risk eLearning module was completed by officers in December 2019. This was followed up with a risk discussion at team meetings during January to March 2020. The training advised that further information was available on the risk intranet page or by contacting the Principal Performance Business Support Officer. Emerging risks and feedback from the team meetings will be included in the next round of training.

**7 RISK IMPLICATIONS**

- 7.1 Management of risk is fundamental to the sound operation of the Council. Failure to manage risk could have significant impact on the Council's ability to correctly define its policies and strategies or deliver against its objectives.
- 7.2 The implementation and operation of the Risk Management Framework will minimise risks and thus mitigate any potential strategic, operational, reputational, or regulatory consequences.

- 7.3 Failure to manage risk would also mean that the Council might face censure by its external auditors, or the potential for legal proceedings in the event of breaches of the Health and Safety at Work Act or similar legislation.

## **8 RESOURCE IMPLICATIONS**

- 8.1 All risk management activity is undertaken within existing and planned budgets.

## **9 LEGAL IMPLICATIONS**

- 9.1 The Council's risk management policy and framework will assist in meeting any specific and general legislative requirements to monitor and manage its risks.

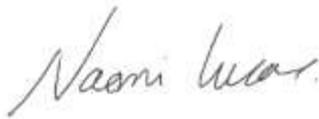
## **10 EQUALITY AND DIVERSITY IMPLICATIONS**

- 10.1 An Equality Impact Assessment has been completed and found there to be no impacts (either positive or negative) on protected groups, as defined under the Equality Act 2010.

## **11 RECOMMENDATION**

- 11.1 It is proposed that the Committee **RESOLVES**

That the content of the corporate risk register for 2020/21 be approved.



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**Background Papers:-**

None.

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If you would like this report in large print, Braille or another language please contact 01702 318111.

# Corporate Risk Register 2020 / 21

**Risk Assessment Options:**

**Quality of controls**

<b>Poor</b>	indicates no controls in place or the few that are do not mitigate the risk.
<b>Fair</b>	indicates that some controls in place and some reduction in risk but still not adequate.
<b>Good</b>	indicates that controls in place are considered adequate and reduce the risk.
<b>Excellent</b>	indicates that effective controls are in place that reduces the risk considerably.

**Review Frequency Options:**

- Risks should be reviewed regularly (typically quarterly) by the Leadership Team and relevant service areas.
- Risk analyses should be updated accordingly with the full Risk Register revised at least bi-annually.

Part 1: Corporate Risks Summary Dashboard

Corporate Risks	Potential Impacts												Residual Likelihood	Residual Impact	Residual Risk	
	Safeguarding	Reputational Damage	Service Disruption	Impaired Performance	Ineffective partnerships	Health and Safety	Staff Morale	Missed Opportunities	Financial costs / losses	Asset loss or damage	Contract breaches	Ineffective leadership				External Intervention
1 – We fail to deliver the objectives of the Council’s Business Plan in terms of measurable outcomes.		✓	✓	✓			✓	✓	✓			✓	✓	2	3	M
2 – There is a failure to safeguard children and adults with care and support needs from abuse and / or neglect in line with the Council’s legal responsibilities.	✓	✓					✓					✓		2	4	M
3a – There is a serious Food, Environmental or other incident for which the Council is culpable / liable.		✓	✓						✓	✓			✓	2	4	M
3b – There is a serious Health and Safety incident for which the Council is culpable / liable		✓	✓			✓			✓	✓			✓	3	4	H
4 – We fail to respond to, or provide, relevant services in the event of an incident or disaster.		✓	✓										✓	3	3	M
5 – Council held data is lost, disclosed, or misused to detriment of individuals or organisations as result of inadequate protection.		✓	✓	✓					✓		✓		✓	3	3	M
7 – Failure to engage with stakeholders to understand and communicate what the Council should be trying to achieve.		✓			✓		✓	✓	✓			✓		2	3	M
8 – Failure to innovate and develop new ways of meeting customer needs and expectations.		✓	✓	✓			✓	✓				✓	✓	2	3	M
9 – Failure to ensure financial sustainability for the Council. This includes the requirement to set a balanced budget and Medium Term Financial Strategy (MTFS) to allow for the successful delivery of the Council’s priorities as set out in its Business Plan, ensuring robust financial controls are in place to keep the budget on track in-year, and delivery of the Council’s Capital Programme.		✓		✓			✓	✓	✓		✓	✓	✓	3	4	H
10 – Inability to recruit, retain, develop, and manage appropriately skilled staff to deliver the Council’s priority outcomes.	✓	✓	✓	✓			✓		✓					4	4	H
11 – Failure to enter into and manage effective partnerships for the delivery of services and outcomes.		✓	✓	✓	✓						✓			3	3	M
12 – The Council could fail to provide consistent Value for Money (VFM) across its existing services or when procuring new services.		✓	✓	✓					✓		✓			2	3	M
13 – Failure to ensure good governance of the Council’s activities and delivery of its priority outcomes.		✓					✓		✓	✓		✓	✓	2	3	M
14 – Failure to ensure Rochford’s ICT Estate supports achievement of Business Objectives.		✓	✓	✓			✓	✓	✓		✓			4	3	M

Corporate Risks	Potential Impacts												Residual Likelihood	Residual Impact	Residual Risk	
	Safeguarding	Reputational Damage	Service Disruption	Impaired Performance	Ineffective partnerships	Health and Safety	Staff Morale	Missed Opportunities	Financial costs / losses	Asset loss or damage	Contract breaches	Ineffective leadership				External Intervention
15 – The Council fails to ensure compliance with the General Data Protection Regulations (GDPR) and is unable to demonstrate consistent application of information standards, controls, and statutory compliance.		✓					✓		✓					2	4	M

Part 2: Tabular Summary of Key Corporate Risks

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
1 – We fail to deliver the objectives of the Council’s Business Plan in terms of measurable outcomes.	Strategic Director	<ul style="list-style-type: none"> <li>Failure to refine strategic objectives to identify what is to be achieved</li> <li>Failure to articulate realistic business delivery plans</li> <li>Failure to allocate sufficient resource and manage key programmes of work effectively</li> <li>Failure to manage performance effectively</li> </ul>	<ul style="list-style-type: none"> <li>Business Plan agreed and supported by MTFS</li> <li>MTFS reflects COVID-19 Announcements</li> <li>Key programmes of work defined</li> <li>Plans identify key priorities for service delivery with COVID-19 impacts incorporated.</li> </ul>	Good	2	3	Med

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
			<ul style="list-style-type: none"> <li>• Budgets set for work programmes and projects</li> <li>• Project Plans with Progress Monitoring and Programme Office responsibilities</li> <li>• Project Risk Registers</li> </ul>				

<p>2 – There is a failure to ensure the safeguarding of our children and adults in the district in line with the Council’s legal responsibilities.</p>	<p>Safeguarding Lead Officer with support from the Deputy Lead Officer – Assistant Director – People and Communities</p>	<ul style="list-style-type: none"> <li>• Children or adults with care and support needs put at risk of abuse</li> <li>• Children or adults with care and support needs suffer harm or abuse</li> <li>• Staff at risk of false accusations</li> <li>• Reputational damage</li> <li>• Financial damage</li> <li>• External intervention in the running of the Council as a result of safeguarding incidents</li> </ul>	<ul style="list-style-type: none"> <li>• Safeguarding Policy and Procedures</li> <li>• DBS checks in recruitment processes</li> <li>• Attendance at safeguarding lead officers’ network</li> <li>• Attendance at multi-agency South Essex Stay Safe Group</li> <li>• Engagement with relevant subgroups of the Safeguarding Boards</li> <li>• Dedicated Safeguarding Officer Project Team to achieve and maintain 90%+ compliance with the Essex Safeguarding Boards’ set standards</li> <li>• Designated Safeguarding Link Officers across the organisation</li> <li>• Staff and Member training programmes</li> <li>• Compliance with all relevant guidance</li> </ul>	<p>Good</p>	<p>2</p>	<p>4</p>	<p>Med</p>
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Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
3a – There is a serious Food, Environmental or other incident for which the Council is culpable / liable.	Assistant Director – People and Communities	<ul style="list-style-type: none"> <li>• Failures within of our Food Safety Inspection regimes give rise to serious incidents with potentially fatal or life changing consequences</li> <li>• Unacceptable Food Safety Return to FSA leads to service intervention</li> <li>• Environmental pollution or nuisance issues are not addressed</li> <li>• Corporate manslaughter charges</li> </ul>	<ul style="list-style-type: none"> <li>• Annual Food Safety Plan</li> <li>• Response procedures for Environmental Health complaints and reports</li> <li>• Joint enforcement plans to be established for significant problem sites with RDC planners, the HSE and / or the Environment Agency</li> </ul>	Good	2	4	Med
3b – There is a serious Health and Safety incident for which the Council is culpable / liable.	Assistant Director – Assets and Commercial	<ul style="list-style-type: none"> <li>• Failures within of our H&amp;S regimes give rise to serious incidents with potentially fatal or life changing consequences</li> <li>• Internally we could fail to meet obligations under the Health &amp; Safety at Work and Fire Safety Acts and allied Regulations</li> <li>• Corporate manslaughter charges</li> </ul>	<ul style="list-style-type: none"> <li>• Annual Corporate Health and Safety Plan</li> <li>• Internal Health and Safety Assessments and Reviews</li> <li>• Health &amp; Safety Co-ordinators (HSCs) / Fire Marshals (FM's) and First Aiders in place, supported with training</li> </ul>	Fair	3	4	High

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
			<ul style="list-style-type: none"> <li>• Risk Assessments (for staff and contractors) and Safety Procedures</li> <li>• Joint enforcement plans to be established for significant problem sites with RDC planners, the HSE and / or the Environment Agency</li> <li>• Health and Safety officer group</li> <li>• Health and Safety Officer attendance at service area meetings</li> <li>• COVID-19 Restoration Project</li> </ul>				
<p>4 – We fail to respond to, or provide, relevant services in the event of an incident or disaster.</p>	<p>Assistant Director – Assets and Commercial</p>	<ul style="list-style-type: none"> <li>• Loss of internal or public IT services</li> <li>• Loss or reduction in operational capacity</li> <li>• Inadequate response to civil / weather emergencies</li> <li>• Failure to respond to unauthorised or illegal</li> </ul>	<ul style="list-style-type: none"> <li>• Attendance at Essex Resilience Forum</li> <li>• Emergency Plans and Business Continuity Plans – regularly tested.</li> <li>• Out of hours (OOH) response arrangements.</li> <li>• IT restoration and cover facilities</li> </ul>	<p>Good</p>	<p>3</p>	<p>3</p>	<p>Med</p>

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
		incursions, encampments, or events	<ul style="list-style-type: none"> <li>• Essex Countrywide Traveller Committee Partnership Agreement</li> <li>• IT incident reviews</li> <li>• Work conducted on joint plans with partners including COVID-19 impacts.</li> </ul>				
5 – Council held data is lost, disclosed, or misused to detriment of individuals or organisations as result of inadequate protection.	Section 151 Officer (SIRO)	<ul style="list-style-type: none"> <li>• Key operational, commercial, or personal data is lost, disclosed, or misused.</li> <li>• Increased risk of loss or disclosure when data is transferred between supply chain partners.</li> <li>• Residents or customers interests put at risk</li> <li>• Commercial or partnership relationships put at risk</li> <li>• Consequential damage claims</li> <li>• Information Commissioner investigations or penalties</li> <li>• Reputational damage</li> </ul>	<ul style="list-style-type: none"> <li>• Data Protection measures including ICT Security Policies &amp; Procedures</li> <li>• Data sharing protocols</li> <li>• Annual review of systems and software required to ensure compliance by Government Connect Code of Connection (CoCo)</li> <li>• Information Security Policies</li> <li>• Compliance with the Transparency Code</li> <li>• Data quality spot checks</li> </ul>	Good	3	3	Med

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
		<ul style="list-style-type: none"> <li>• Incorrect decisions made as the result of poor quality, or poorly interpreted, data</li> <li>• Failure to disclose appropriately where required</li> </ul>					
7 – Failure to engage with stakeholders to understand and communicate what the Council should be trying to achieve.	Strategic Director	<ul style="list-style-type: none"> <li>• Council is unaware of stakeholder’s concerns, needs or ambitions</li> <li>• Lack of a clear vision for the future</li> <li>• Failure to respond to the Devolution agenda</li> </ul>	<ul style="list-style-type: none"> <li>• Consultation programmes involve Members, Residents, Businesses, Service Users, Parishes, Partners and Staff</li> <li>• Communications initiatives including RDC website</li> <li>• Networking meetings with partners organisations and businesses</li> <li>• Equality and diversity impact assessments of service changes and other proposals</li> </ul>	Good	2	3	Med
8 – We fail to innovate and develop new ways of meeting customer needs and expectations.	Managing Director	<ul style="list-style-type: none"> <li>• Council fails to respond to changing circumstances or needs in a sustainable way</li> </ul>	<ul style="list-style-type: none"> <li>• Transformation Projects including the Connect Programme</li> </ul>	Good	2	3	Med

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
		<ul style="list-style-type: none"> <li>• Services fail and / or are taken over</li> <li>• Ineffective use or understanding of Council asset base</li> </ul>	<ul style="list-style-type: none"> <li>• Staff involvement in cultural change e.g. the “quick wins team “</li> <li>• Training in Innovation</li> <li>• Project Risk Registers and Equality Impact Assessments</li> <li>• Communications of savings and consequences</li> <li>• Lessons Learned used to inform the Connect Programme and the COVID-19 Restoration project</li> </ul>				
<p>9 – Failure to ensure financial sustainability for the Council. This includes the requirement to set a balanced budget and Medium Term Financial Strategy (MTFS) to allow for the successful delivery of the Council’s priorities as set out in its Business Plan, ensuring robust financial controls are in place to keep the budget on track in-year, and delivery of the Council’s Capital Programme.</p>	<p>Section 151 Officer</p>	<ul style="list-style-type: none"> <li>• The Council is not able to set a balanced budget in line with its statutory duties</li> <li>• The Council reserves and balance levels are unsustainable in the event of an unforeseen contingency requirement</li> <li>• The Council cannot deliver its business plan objectives</li> </ul>	<ul style="list-style-type: none"> <li>• Robust Medium-Term Financial Strategy (MTFS) process linked to Business Plan objectives</li> <li>• Robust budgetary monitoring and control</li> <li>• Quarterly financial monitoring reports to the Executive supplemented with additional</li> </ul>	<p>Good</p>	<p>3</p>	<p>4</p>	<p>High</p>

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
		effectively due to financial constraints <ul style="list-style-type: none"> <li>• The council does not have sufficient cash flow to meet its contractual obligations</li> </ul>	information, such as COVID-19 announcements, to support decision making <ul style="list-style-type: none"> <li>• Communication of savings delivery and consequences to all stakeholders</li> <li>• Monitoring and analysis of Government funding announcements for future financial planning including COVID-19 announcements</li> <li>• Active treasury and cash flow management</li> <li>• Twice-yearly cross-party Member Away days to discuss Financial Strategy and Corporate Matters</li> </ul>				
10 – Inability to recruit, retain, develop, and manage appropriately skilled staff to deliver the Council’s priorities.	Managing Director	<ul style="list-style-type: none"> <li>• With expertise vested in fewer individuals, the Council is at greater risk of losing key knowledge, expertise, or skill sets</li> </ul>	<ul style="list-style-type: none"> <li>• ‘Connect ‘People Plan - Organisational Development Plan</li> <li>• Transformation Projects</li> </ul>	Good	4	4	High

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
		<ul style="list-style-type: none"> <li>• Increased vacancy rates and lost skills lead to operational pressures and ultimately to service failures</li> <li>• Use of temporary staff or contractors leads to additional costs and / or delays</li> <li>• Service failures lead to potential intervention or loss of funding</li> </ul>	<ul style="list-style-type: none"> <li>• Positive about Disabled People</li> <li>• Recruitment policy and procedures</li> <li>• Probationary periods</li> <li>• Induction, Training and Development plans</li> <li>• Performance Reviews Appraisals</li> <li>• OHS referrals</li> <li>• Digitalised Procedure notes to be made available to appropriate officers in event of manager or other experienced officers' absence / non-availability</li> <li>• Staff Survey and People Plan</li> </ul>				
<p>11 – Failure to enter into and manage effective partnerships and contracts for the delivery of services and outcomes.</p>	<p>Assistant Director – People and Communities with support from all</p>	<ul style="list-style-type: none"> <li>• Failure to adequately specify and agree required outcomes</li> <li>• Failure to manage contracts effectively</li> </ul>	<ul style="list-style-type: none"> <li>• Contract procedures</li> <li>• Contract Terms and Conditions</li> </ul>	<p>Good</p>	<p>3</p>	<p>3</p>	<p>Med</p>

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
	Assistant Directors with contract responsibilities	<ul style="list-style-type: none"> <li>• Failure of a contractor or contract arrangements</li> <li>• Service delivery failures</li> <li>• Creation of unexpected liabilities.</li> <li>• Increasing number or extent of supply chains require significant expertise or experience to risk manage</li> </ul>	<ul style="list-style-type: none"> <li>• Monitoring processes and meetings</li> <li>• Contingency and business continuity arrangements</li> <li>• Contract performance bonds</li> <li>• Clear partnership agreements covering legal, financial, and operational arrangements</li> <li>• Training for contract managers as required.</li> <li>• Major Contract Risk Registers which will be reviewed in light of COVID-19</li> </ul>				
12 – The Council could fail to provide consistent Value for Money (VFM) across its existing services or obtain VFM when procuring new services.	Section 151 Officer	<ul style="list-style-type: none"> <li>• Service costs exceed funding available leading to overspends and loss of financial control</li> <li>• Contractual commitments become unsustainable</li> </ul>	<ul style="list-style-type: none"> <li>• Sustainable Commissioning and Procurement Strategy</li> <li>• Benchmarking, and best practice case studies</li> <li>• Contract Procedure Rules</li> </ul>	Good	2	3	Med

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
		<ul style="list-style-type: none"> <li>• Customer dissatisfaction with VFM</li> </ul>	<ul style="list-style-type: none"> <li>• Internal and external Audit reports</li> <li>• Expenditure monitoring and reporting to Members</li> <li>• Business Process Re-engineering (BPR) as required</li> <li>• Robust option appraisals</li> </ul>				
<p>13 – Failure to ensure good governance of the Council’s activities and delivery of its priorities.</p>	<p>Assistant Director – Legal and Democratic (Monitoring Officer)</p>	<ul style="list-style-type: none"> <li>• Failure to follow procedures leads to successful appeals or legal challenges</li> <li>• Misuse of the Regulation of Investigatory Powers Act (RIPA) lead to prosecutions</li> <li>• Failure to detect and prevent fraud or to respond to rising trends of fraud</li> <li>• An increasing propensity for compensation claims could result in additional costs and inefficient use of resources</li> <li>• Failure to manage performance effectively</li> </ul>	<ul style="list-style-type: none"> <li>• Business Plans / MTFS</li> <li>• Council Constitution, Financial Regulations and Contract Procedure Rules</li> <li>• Council, Executive and Committee, LT minutes and records of decisions</li> <li>• Internal Audit Programme</li> <li>• Performance management Framework</li> <li>• Legally compliant tendering procedures</li> </ul>	<p>Good</p>	<p>2</p>	<p>3</p>	<p>Med</p>

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
		leading to reduced service delivery <ul style="list-style-type: none"> <li>• Failure to supply required data to Government, or meet the Government's Transparency Code</li> <li>• Government intervention in services or governance matters as a result of failures</li> </ul>	<ul style="list-style-type: none"> <li>• Anti-Fraud and Corruption Policy and Anti Money Laundering Procedures</li> <li>• Whistleblowing Policy and Procedures</li> <li>• Codes of Governance, Conduct and Registers of Interests</li> <li>• RIPA procedures</li> </ul>				
14 – The Council could fail to ensure Rochford's ICT Estate supports achievement of Business Objectives.	Assistant Director – Transformation and Customer	<ul style="list-style-type: none"> <li>• Fail to maintain an ICT Roadmap that is fit for purpose</li> <li>• Be unable to obtain replacement contractors at short notice with consequent and have to obtain replacement contractors charging premium prices for service recovery actions</li> <li>• Experience adverse effects on service with consequent reputational risks</li> <li>• Fail to update software / hardware leading to</li> </ul>	<ul style="list-style-type: none"> <li>• ICT Digital Roadmap</li> <li>• Project plans</li> <li>• Software Asset list</li> <li>• Budget controls</li> <li>• Contract Management</li> <li>• Programme of works identified which continues to support the council's transformation agenda including further development of digitally enabled services and feedback from the COVID-19 Restoration project</li> </ul>	Good	4	3	Med

Risk	Lead Risk Owner	Principal impacts or consequences	Principal controls & actions	Quality of controls	Residual Likelihood	Residual Impact	Residual Risk Rating
		application and service delivery failure <ul style="list-style-type: none"> <li>• Fail to adequately manage ICT projects</li> </ul>					
15 – The Council fails to ensure compliance with the General Data Protection Regulations (GDPR) and is unable to demonstrate consistent application of information standards, controls, and statutory compliance.	Assistant Director – Legal and Democratic	<ul style="list-style-type: none"> <li>• Failure to process sensitive / personal data appropriately leading to potentially substantial fines</li> <li>• Information Commissioner investigations and / or penalties</li> </ul>	<ul style="list-style-type: none"> <li>• Compliance with relevant Policies and Procedures</li> <li>• Roles and Responsibility Training</li> <li>• ‘Opt In’ Consent fully detailed on all relevant paperwork.</li> <li>• Internal Compliance Audits</li> </ul>	Good	2	4	Med

Part 3 Corporate Risk Map

<b>Impact</b>	<b>4 Catastrophic</b>		Risk 2, 3a and 15	Risks 3b and 9	Risk 10		
	<b>3 Critical</b>		Risks 1, 7, 8, 12 and 13	Risks 4, 5 and 11	Risk 14		
	<b>2 Marginal</b>						
	<b>1 Negligible</b>						
		<b>1 Negligible</b>	<b>2 Very Low</b>	<b>3 Low</b>	<b>4 Significant</b>	<b>5 High</b>	<b>6 Very High</b>
		<b>Likelihood</b>					

Key	Risk level	Action required
	High	Urgent / Imperative to manage down risk – transfer or terminate
	Medium	Seek to influence risk over medium term or transfer out risk e.g. by insuring
	Low	Tolerate and Monitor – manage down if possible

Part 4 Risk Scoring

LIKELIHOOD of event occurring					
1 Negligible	2 Very Low	3 Low	4 Significant	5 High	6 Very High
0% to 5%	6% to 15%	16% to 30%	31% to 60%	61% to 85%	86%to100%
IMPACT of event occurring					
	Negligible – 1	Marginal – 2	Critical – 3	Catastrophic – 4	
<b>Financial</b>	£0K - £10K	£10K - £200K	£200K - £1M	£1M- £10M	
<b>Service Provision</b>	Minor service delay	Short term service delay	Service suspended / medium term delay	Service suspended long term / Statutory duties not delivered	
<b>Project</b>	Minor delay	A few milestones missed	A major milestone missed	Project does not achieve objectives and misses majority of milestones	
<b>Health &amp; Safety</b>	Sticking Plaster / first-aider	Broken bones / Illness	Loss of Life / Major illness	Major loss of life / Large scale major illness	
<b>Objectives</b>	Minor impact on objectives	Objectives of one section not met	Directorate Objectives not met	Corporate objectives not met	
<b>Morale</b>	Mild impact on morale	Some hostile relationships and minor non cooperation	Industrial action	Mass staff leaving / Unable to attract staff	
<b>Reputation</b>	No media attention / minor letters	Adverse Local media	Adverse National publicity	Remembered for years!	
<b>Government relations</b>	Minor local service issues	Poor Assessment(s)	Service taken over temporarily	Service taken over permanently	
<b>Political</b>	No interest / Minor attention	Adverse local media or individual public reaction	Adverse national publicity or organised public reaction	Major political reaction - remembered for years!	
<b>Legal</b>	No significant legal implications	Internal review and minimal media coverage	External review and impact on public opinion.	Criminal proceedings / civil litigation	
<b>Communities</b>	Minimal effect on communities	Short term Impact on small group of clients / customers / communities	Long term Impact on large group of clients / customers / communities	Long term impact on vulnerable people	