

Corporate Risk Register



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Risk Policy Statement

It is the policy of the Council to adopt a proactive approach to Risk Management consistent with the various conventions and best practice.

The Council acknowledges that risk cannot be totally eliminated, the Council is however committed to the management of “significant” risks in order to: -

- Ensure compliance with statutory obligations
- Preserve and enhance service delivery
- Maintain effective control of public funds
- Promote the reputation of the Council
- Support the quality of the environment

These objectives will be attained by systematically identifying, analysing and evaluating, effectively controlling and monitoring risk, which endangers the people, property, reputation and financial stability of the Council.

Paul Warren
Chief Executive

Background and Introduction

Corporate Governance

Rochford District Council will employ the underlying principles of openness, integrity and accountability to achieve its objectives. It will also ensure that its business and strategy is managed in an open manner.

Introduction

The Council recognises its responsibility to manage internal and external risks and is committed to ensuring the process and culture of risk management is embedded into all operations and service planning processes.

This Register and the Action Plans will be regularly reviewed. The Register and Action Plans should be updated on an annual basis as a minimum. The register covers significant risks as well as highlighting those risks, which whilst significant, are in the “tolerable” zone. The main risks are those that, if they materialise, would have a significant impact on the achievement of the Council’s ambitions. These include the failure to capitalise on opportunities

The Corporate Risk Register for 2005/06 has been developed using the notion of residual risk. This notion assumes that controls put in place, will usually lessen the inherent risk.

The Council aims to: -

- Integrate and embed risk management into the culture of the Council
- Manage risk in accordance with best practice
- Anticipate and respond to changing social, environmental and legislative requirements
- Prevent injury, damage, losses and reduce the cost of risk
- Raise awareness of the need for risk management by all involved in the delivery of the Council’s services
- Take the action necessary to minimise the likelihood of risks occurring and/or reducing severity of consequences should risks occur.
- Ensure those identified risks are monitored on an ongoing basis and reported annually to Members.
- Compile an annual assurance statement on the effectiveness of the arrangements for risk management.

The Council aims to achieve these actions by implementing a risk management strategy, and setting out the roles and responsibilities of officers key to its implementation.

1. Process

The development and maintenance of the Corporate Risk Register for 2006 requires a proactive approach in order to maintain its integrity and currency. To achieve this, the following actions are deemed necessary: -

- i) The Corporate risk management group will keep under review, the corporate Risk Register and any relevant action plans on a regular basis
- ii) Divisional management teams will identify and assess the risks appropriate to their areas of operation.
- iii) Action plans will be prepared for all risks assessed to be significant.
- iv) The CRG will seek OMT endorsement of the revised plan on an annual basis.

2. Monitoring

Progress of the actions contained in the Corporate Risk Register will be monitored on a regular basis by the CRG who will provide an annual report to committee detailing the risk management framework.

3. Assurance of Controls.

In addition to the “friendly external” audit process, Internal Audit will, independently, review the adequacy of the Council’s internal controls and the effectiveness of the risk management framework.

4. Champions

Risk “Champions” will be identified to take responsibility for ensuring progress against agreed actions. Where the risk has not been prioritised as significant and does not therefore fall into the high-risk areas of the risk matrix, no actions have been established and no champion appointed.

5. Risk Ranking

The matrix below shows the perceived rank of the main risks assessed. The ranking has been achieved by using a numerical calculation based on a “best guess” of the likelihood and impact.

6. Risk Management - Roles And Responsibilities

In order to ensure the successful implementation of this strategy, clear roles and responsibilities for the risk management framework have been established. The key “players” and their role are: -

Elected Members

Will adopt the role of overseeing the effective management of risk by officers. This includes:

- Agreeing structures for planning and monitoring risks across the authority
- Approving the risk management strategy, framework and process
- Receiving annual reports on the management of risk
- Approving the annual statement on the risk management processes.

Corporate Management Board (CMB)

- Approve and adopt a risk management strategy, framework and process and allocate sufficient resources to ensure its achievement
- Play a lead role in identifying and managing, the strategic risks and opportunities facing the authority
- Review cross cutting risks that may be associated with new policies and service delivery methods
- Determine the Council's risk appetite and set priorities for action
- Ensure Divisional managers can provide effective controls to mitigate risks within service areas
- Prepare an annual statement for Council on the status of the risk management framework, strategy and process (see above).

Corporate Risk Officer

- Manage the implementation of the integrated framework, strategy and process on behalf of the Council and its management team.
- Ensure the processes are implemented and offer guidance and advice.
- Chair a CRG and co-ordinate risk management activity across the Council
- Ensure staff across the Council are adequately trained to undertake risk assessments as required
- Collate divisional risk registers and controls assurance statements for consideration at CRG
- Annually report to Finance and Procedures Overview & Scrutiny Committee on progress of risk management framework, corporate issues, divisional risk registers, control assurance statements and areas for improvement.

Corporate Risk Group (CRG)

- Ensure a cohesive approach to risk management and business continuity
- Undertake "spot reviews" and a programmed annual review of all corporate plans
- Annually review and update the risk management strategy to take into account external and internal changes as well as experience.
- Analyse and collate divisional risk registers (incl. Business continuity plans)
- Assist with the annual report for Finance and Procedures Overview & Scrutiny Committee.
- Make recommendations to CMB regarding the generic and cross divisional risks/issues identified from the divisional self assessments

Heads of Service and Departmental Management Teams

- Identify, analyse and "rate" divisional risks within a register
- Ensure maintenance of the departmental risk register.
- Prioritise action on divisional risks
- Monitor progress on managing divisional risks
- Report the results of the self-assessment to CMB
- Ensure the effectiveness of controls in place to mitigate/reduce risks.
- Co-ordinate preparation of annual controls assurance statements for approval by Divisional Management Teams.

Service Managers

- Identify, analyse, profile and prioritise risks within area of responsibility.
- Prioritise action on service risks
- Monitor progress on managing service risks
- Report the results of the self-assessment to divisional management team and, assess the effectiveness of controls in place to mitigate/reduce risks.

Specialist representatives (internal audit, insurance, legal, IT)

- Attend meetings of the Corporate Risk Group as necessary to consider implications of authority wide risks and to provide relevant advice

Rochford District Council – Corporate Risk Register 2006

Rochford's Residual Risk Register & Map

Risk	Risk Description	Risk "owner"	Action/ controls already in place	Adequacy of controls in place	Required action/control by Management Group	Monitoring / success measures	Review frequency /key dates	Impact	Likelihood	Risk
1	Major changes in Central Government (CG) priorities / structures	Cex	Change culture Work with L.A. associations Forward planning Proactive response to consultation documents Budgetary Process Member Decision Making Structure	Good controls <u>Evidence</u> Good response on SIC questionnaire regarding responding to changes Service Planning in place 5 year Budget Strategy reported to Council annually	1. Annual review of effectiveness of change mechanisms	1. The Council responds in a timely fashion to changes. Corporate and financial planning includes forward planning	Annual Reviewed August 2006 Next review: August 2007	7	1	Low
2	Reputational Damage.	Cex	Corporate Governance mechanisms. Managed Press Release system H & S Policy Training for Members & staff Codes of conduct / Constitution supported by Procedure Documentation Member and staff protocols Regular meetings between press and Cex	Good controls <u>Evidence</u> Good response on SIC regarding compliance with Constitution Positive press coverage	1. Annual review of press coverage and feedback from press	1. The Council receives positive press coverage.	Biannual Reviewed August 2006 Next review: March 2007	7	3 Changed to 2 - good controls in place	Med
3	Significant changes to local economic or social environment	HPS CPM	Forward budget strategy Land use planning infrastructure (e.g. Thames Gateway etc.) Community Strategy	Adequate Controls <u>Evidence</u> Budget Strategy is produced annually. Economic Development Strategy updated annually	1.	1. The Council is seen to respond to significant changes and by environmental scanning, anticipates future developments	Annual Reviewed August 2006 Next review: August 2007	6	1	Low

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Risk	Risk Description	Risk "owner"	Action/ controls already in place	Adequacy of controls in place	Required action/control by Management Group	Monitoring / success measures	Review frequency /key dates	Impact	Likelihood	Risk
			Partnerships (e.g. LSP, TGSE) Local economic development					Members felt that this had been graded too highly		
4	Failure to meet Central Government targets for the provision of social and affordable housing (see new risk regarding stock option transfer)	CD(ES)	Decent Homes Programme Stock option transfer with timetable Planning Policy Framework National Affordable Housing Programme Management Process (NAHP)	Excellent Controls <u>Evidence</u> NAHP Monitoring reports HSSA returns	1. Monitor transfer and contract arrangements 2. Set up good management arrangements for working in partnership with housing associations	1. Good Performance Indicators and achievement of targets 2. Increase in affordable housing provision 3. Programme for spending S106 funds	Biannual Reviewed August 2006 Next review: March 2007	5	5	High
5	Failure to meet e-government requirements	HAMS	IEG Statement Service Action Plan Webmaster appointed	Excellent controls	2. Clear objectives identified for the website 3. IT Strategy produced	4. Good performance indicators. 5. Action plan is up-to-date 6. IT Strategy produced	Reviewed August 2006	4	2	Low
	DELETED- HAMS' recommendation that this item should be removed from the register as we submitted the final IEG6 Return to the then ODPM in March 2006. We no longer have the government set IEG targets to achieve									

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Risk	Risk Description	Risk "owner"	Action/ controls already in place	Adequacy of controls in place	Required action/control by Management Group	Monitoring / success measures	Review frequency /key dates	Impact	Likelihood	Risk
6	Detrimental influences through external inspection(s), (i.e. CPA, BV etc)	Cex HFAPM	Performance Plan CPA Improvement Plan Internal audit reports Dedicated Audit Committee Good relationship with local media Corporate Planning process	Good Controls <u>Evidence</u> Improvement Panel meets regularly and reviews CPA Improvement Plan. External Audit recommendations are monitored and reported to Committee SMT minutes showing forward planning for inspections. Service Action Plans	1. Carry out process reviews 2. Develop Performance Management framework	1. Performance Management framework embedded in culture 2. Good relationship with external inspectors	Annual Reviewed August 2006 Next review: August 2007	4	2	Low
7	Failure to be aware / comply with, existing / new legislation	CD(IS)	Monitoring by Heads of Service Member Training Professional Membership notifications and Registered with email alert services Training and Subscriptions Website checks for compliance Local Government Association updates circulated to Senior Management Team Communications groups notifications	Good controls <u>Evidence</u> Committee reports demonstrating consideration of legislation before it comes in eg Licensing Good response on SIC questionnaire regarding responding to changes	1. Ensure emails are received by appropriate officers with cover for absent colleagues	1. Council responds in a managed way to changes	Annual Reviewed August 2006 Next review: August 2007	7	1	Low

Rochford District Council – Corporate Risk Register 2006

Risk	Risk Description	Risk "owner"	Action/ controls already in place	Adequacy of controls in place	Required action/control by Management Group	Monitoring / success measures	Review frequency /key dates	Impact	Likelihood	Risk
8	Failure to be an organisation of choice for partners, contractors and staff	Cex	<p>Clear Corporate objectives</p> <p>Workforce development plan</p> <p>Investors in People scheme</p> <p>Staff Learning/Feedback forms</p> <p>Regular staff surveys</p>	<p>Good controls</p> <p><u>Evidence</u></p> <p>Good response rates to advertisements</p> <p>Workforce development Plan regularly monitored and updated</p> <p>Review of staff surveys (SMT Minutes)</p>	<p>1. Monitor effectiveness of partnership working and identify unfulfilled requirements for partners</p> <p>2. Monitor recruitment</p>	<p>1. Where the achievement of objectives requires partners, they are easily identified and brought on board.</p> <p>2. Job vacancies attract a good number of applications</p>	<p>Biannual</p> <p>Reviewed August 2006</p> <p>Next review: March 2007</p>	7	2	Med

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Risk	Risk Description	Risk "owner"	Action/ controls already in place	Adequacy of controls in place	Required action/control by Management Group	Monitoring / success measures	Review frequency /key dates	Impact	Likelihood	Risk
9	Failure to meet the current and changing needs / expectations of customers	CD(ES)	Provision of information in correct context (options rather than IT) Ombudsman process Effective complaints procedure Communication Strategy Consultation Programme Rochford District Matters feedback forms on web	Fair Controls <u>Evidence</u> Survey results Refuse Collection Service back to weekly in response to customer demand.	1. Approach needs to be rationalised and updated 2. Update Community Strategy 3. Analysis and sharing of consultation exercises 4. Communications workshop 5. Set up Working Group to prepare for Access to Services Inspection 6. Develop comprehensive corporate consultation strategy 7. Develop learning from the complaints process	1. Inspection reports include good assessment of our response to customers needs 2. High levels of customer satisfaction in surveys	Annual Reviewed August 2006 Next review: August 2007	5	3	Low

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Risk	Risk Description	Risk "owner"	Action/ controls already in place	Adequacy of controls in place	Required action/control by Management Group	Monitoring / success measures	Review frequency /key dates	Impact	Likelihood	Risk
10	Fail to manage major projects effectively	CD(IS) CD(ES)	Formal project management processes including Service Action Planning Budget management and Financial Programmes Group Political & management commitment Project review procedure Procurement arrangements	Good Controls <u>Evidence</u> Prince2 methodology used for major projects, eg Comino Service Action Plans regularly monitored and reported on. FPG minutes reported to Staffing & Resources group include updates on major projects Committee monitoring of key projects	1. Develop project reviews 2. Share learning from projects	1. Major projects fulfil their objectives, within budget and timeframes	Annual Reviewed August 2006 Next review August 2007	6	2	Low
11	Ineffective management structure (including the setting and adherence to priorities)	Cex	Regular review of structure Effective feedback and consultation Regular member appraisal of Chief Executive and Corporate Directors	Good Controls <u>Evidence</u> Report to Committee on restructuring. Updated restructure following appointment of CD(ES) Chief Executive appraisal PDR Audit (June 2006) PDR process	1. Regular reviews of management structure which are communicated to staff	1. Good staff survey results on management. 2. Priorities and objectives clearly communicated and understood	Biannual Reviewed August 2006 Next review: March 2007	6	3	med
12	Failure to meet the delivery of corporate priorities	Cex	Workforce Development Plan PDR process & PDR audit Recruitment / Retention process Service action plan for each objective Reporting and monitoring of SAP Review by CPA inspectors Regular reports to Committee	Good Controls <u>Evidence</u> Performance Plan – review of the previous year Regular reporting to officers and members	1. Divisional plans 2. Implement recommendations from PDR audit	1. Divisional plans in place. 2. Golden thread readily transparent 3. PDRs completed for all staff 4. PDR Audit recommendations fully implemented	Annual Reviewed August 2006 Next review: August 2007	6	2	Low

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Risk	Risk Description	Risk "owner"	Action/ controls already in place	Adequacy of controls in place	Required action/control by Management Group	Monitoring / success measures	Review frequency /key dates	Impact	Likelihood	Risk
13	Poor communications within the Authority	HRM CPM	Departmental Management / Team meetings Staff sounding board IIP monitoring / improvements Rochford Files Staff induction Staff Training PDR process Intranet SMT communication workshop	Good controls <u>Evidence</u> Staff Surveys results Positive feedback Low Turnover Tea with Chief Executive Annual staff briefings	1. Improve upward communication 2. Implement Workforce Development Plan 1. Revise corporate communications strategy 2. Introduce formal mechanism for downward communication to team briefings	1. Good staff survey results	Annual Reviewed August 2006 Next review: August 2007	2	3	low
14	Ineffective performance management, training and development of staff	HRM	PDR process Quarterly performance reports SAP	Good controls <u>Evidence</u> PDRs QPRS Members Performance Reports	1. Clearly defined performance management framework 2. Complete 100% PDRs	1. Performance management framework with regular reporting in place 2. PDRs completed	Biannual Reviewed August 2006 Next review: March 2007	6	4	Med

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Risk	Risk Description	Risk "owner"	Action/ controls already in place	Adequacy of controls in place	Required action/control by Management Group	Monitoring / success measures	Review frequency /key dates	Impact	Likelihood	Risk
15	Unexpected major financial liability or uninsured loss	HFAPM	Insurance reviews Whistle blowing policy Budget Strategy including review of Financial Reserves and balances	Good controls <u>Evidence</u> Insurance Policies demonstrate coverage. Insurance reserve in place to cover uncovered losses. Budget Strategy – includes recommendation for level of reserves. Collection Fund balance maintained to provide contingency if problems with collection rates. Low procurement exposure	1. Embed risk management culture 2. Introduce risk assessment into budget process	1. Good external audit and inspection judgements on financial and risk management 2. Risk Assessment included in budget process	Biannual Reviewed August 2006 Next review: March 2007	8	1	Med
16	Failure to obtain adequate funding to achieve service objectives	HFAPM	Statutory powers Grantnet Balanced budgets Building up reserves Good relations with members Budget strategy	Good controls <u>Evidence</u> Examples of funding obtained – Leisure & Contracted Services grants, Capacity Building Grant	1. Some risk assessment required for operational risks 2. Promote Grantnet as a source of funding 3. Annual review of income sources 4. Review grants against service objectives	1. Service objectives are achieved with adequate funding	Annual Reviewed August 2006 Next review: August 2007	5	2	Low
17	High volume of fraud by staff, contractors or clients.	HFAPM	Verification framework Whistle blowing Policy Prosecution policy Fraud team / policy Internal Audit processes	Excellent controls <u>Evidence</u> External Audit reports on Anti-Fraud measures Internal Audit reports Completed Register of Interests SIC and supporting paperwork	1. Fraud awareness training / culture 2. Develop SIC process further	1. Demonstrate proactive approach to identifying areas that are high risk for fraud	Biannual Reviewed August 2006 Next review: March 2007	8	2	Med

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Risk	Risk Description	Risk "owner"	Action/ controls already in place	Adequacy of controls in place	Required action/control by Management Group	Monitoring / success measures	Review frequency /key dates	Impact	Likelihood	Risk
			Register of interests Segregation of duties SIC assurance framework Procedure manuals Internal controls identified	Procedure manuals in place						
18	Risk of contract arrangements failing	CD(ES)	Selection / Monitoring systems Adherence to Contract Procedure Rules Opt out clauses Performance bonds and guarantees	Good controls <u>Evidence</u> Regular contract monitoring Meetings with key contractors Serviceteam/Holmes Place reports to Committee	1. Improve capabilities & capacity to instantly replace contractors 2. Business Continuity Planning 3. Risk Assessment of all major contracts	4.	Biannual Reviewed August 2006 Next review: March 2007	8	4	high

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19	Failure of partnership arrangements Appropriate agreements in place to reflect roles and responsibilities	Cex	Relationship management Review of partnership arrangements with reporting to committee Service level agreements Partnership Guidance Bonds & guarantees Risk monitoring arrangements Terms of reference Appropriate agreements	Good Controls <u>Evidence</u> Partnership reviews reported to committee Partnership Guidance Thames Gateway – limited by guarantee with Memorandum of Understanding	1. Ensure adequate structures in place for all partnership arrangements, where appropriate 2. Implement recommendations from review of partnerships	1. Partnership arrangements achieve their objectives	Annual Reviewed August 2006 Next review: August 2007	5	4 to 3 Changed 3 (Cex)	Med Low
20	Failure to meet Government targets (Recycling etc)	L&CM	Corporate plan CPA action plan monitoring Quarterly performance reports	Good Controls <u>Evidence</u> Regular monitoring in QPRs.	1. Implement agreed action plan	1. Targets are met	Biannual Reviewed August 2006 Next review: March 2007	4	4-5 Changed from 4 to 5	Low Med
NEW RISK ADDED JULY 2006										
21	Failure to prepare for Access to Services inspection due December 2006	HAMS	Working group set up Preparation started early Copies other inspections obtained SWOT analysis carried out at SMT	**Good <u>Evidence</u> SMT minutes Working Group minutes	1. Full participation in working group from across the organisation	1. Positive inspection report	Monthly to Dec 2006. Reviewed September. Next review October.	5	3	Low
22	Transfer of Housing Stock - DCLG reject application Department for Communities and Local Govt (DCLG)	CD(ES)	ODPM approved Stock Option Appraisal Use of consultants to provide expertise Application submitted on time Project Team involved in preparation of application	Fair controls <u>Evidence</u> Regular minuted meetings of Officer Project Team Correspondence between RDC officers & financial/legal consultants	1. Ensure Financial Consultant has sufficient information to respond to any queries from DCLG on application.	1. DCLG approve application	Monthly Reviewed August 2006 September 2006 Next review: October 2006	9	3	High

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23	Transfer of Housing Stock - Timetable slips (Ballot is late)		Regular Officer project team Project Plan Deadlines imposed by Government	Good controls <u>Evidence</u> Regular minuted meetings of Officer Project Team	1. Regularly monitor project plan at Officer project meetings	1. Milestones met 2. Successful transfer	Monthly Reviewed August 2006 September 2006 Next review: October 2006	6	3	Med
24	Transfer of Housing Stock - tenants reject transfer	CD(ES)	Communications Consultants Regular communication with Tenants Steering Group includes tenants representatives	Fair Controls <u>Evidence</u> Minutes of Meetings	1. Maintain good communication with tenants and stakeholders	1. Positive ballot	Monthly Reviewed August 2006 September 2006 Next review: October 2006	9	5	High
25	Transfer of Housing Stock - Resources not available to manage project effectively	HFAPM	Regular reviews of budget/ expenditure in liaison with Financial Consultants and officer project team Budget Strategy	Excellent Controls <u>Evidence</u> Stock Option budget in place Strategy to build up HRA balances	1. Monitor expenditure	1. Costs within budget Set up costs met by transfer	Monthly Reviewed August 2006 September 2006 Next review: October 2006	6	2	Low
26	Transfer of Housing Stock - General Fund impact greater than expected	HFAPM	Desktop exercise on General Fund impact as part of Option Appraisal External Financial Consultant's advice Regular Review of impact	Good Controls <u>Evidence</u> Stock Option Appraisal Application document Impact assessment	1. Report to Committee	1. Impact on General Fund is as predicted in Budget Strategy	Monthly Reviewed August 2006 September 2006 Next review: October 2006	6	3	Med

Key Cex – Chief Executive
 CD (ES) – Corporate Director (External Services)
 CD (IS) – Corporate Director (Internal Services)

HPS – Head of Planning Services
 HAMS – Head of Admin and Member Services
 HRM – Human Resources Manager

CPM – Corporate Policy Manager
 HFAPM – Head of Finance, Audit & Performance Management
 L&CM – Leisure & Contracted Services Manager

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The Risk Assessment results below are repeated in the Register above.

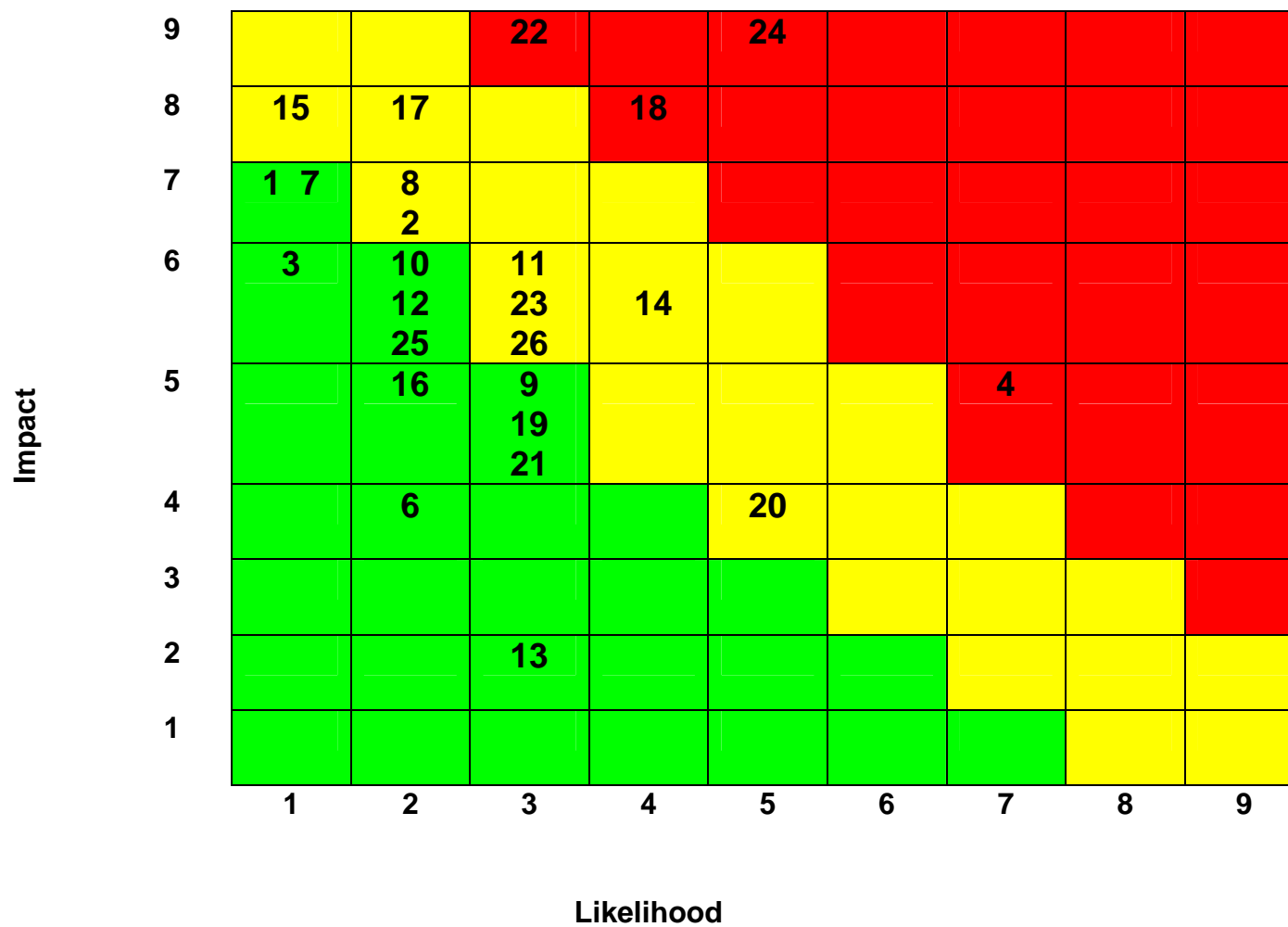
Risk Where quality of controls are poor, no change in likelihood Where quality of controls are fair, reduce likelihood by 1 Where quality of controls are good, reduce likelihood by 3 Where quality of controls are excellent, reduce likelihood by 5	Impact	Likelihood	Risk Ranking	Quality of controls* 1 Poor 2 Fair 3 Good 4 Excellent	Review date (The “risk” is continually under review by the service provider but the CRR will be reviewed annually)
1 Failure to have regard for major changes in Government priorities	7	1	9	3	Aug 07
2 Reputational damage to the Authority	7	2	6	3	Nov 07
3 Significant changes to local economic or social environment	6	1	12	3	Aug 07
4 Failure to meet Government targets for the Provision of social and affordable housing	5	7	3	4	Mar 07
5 Failure to meet e-government requirements	N/a	N/a	N/a	N/a	Deleted
6 Detrimental influences through external inspection(s), (i.e. CPA, etc)	4	2	14	3	Aug 07
7 Failure to be aware / comply with, existing / new legislation	7	1	9	3	Aug 07
8 Failure to be an organisation of choice for partners, contractors and staff	7	2	6	3	Mar 07
9 Failure to meet the current and changing needs / expectations of customers	5	3	11	2	Aug 07
10 Fail to manage major projects effectively	6	2	10	3	Aug 07
11 Ineffective management structure	6	3	7	2	Mar 07
12 Failure to meet the delivery of corporate priorities	6	2	10	2	Aug 07
13 Poor communications within the Authority	2	3	15	3	Aug 07
14 Ineffective performance management, training and development of staff	6	4	4	3	Mar 07

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Risk Where quality of controls are poor, no change in likelihood Where quality of controls are fair, reduce likelihood by 1 Where quality of controls are good, reduce likelihood by 3 Where quality of controls are excellent, reduce likelihood by 5	Impact	Likelihood	Risk Ranking	Quality of controls* 1 Poor 2 Fair 3 Good 4 Excellent	Review date (The “risk” is continually under review by the service provider but the CRR will be reviewed annually)
15 Unexpected major financial liability or uninsured loss	8	1	5	2	Mar 07
16 Failure to obtain adequate funding to achieve service objectives	5	2	13	3	Aug 07
17 High volume of Staff / client fraud	8	2	4	4	Mar 07
18 Failure of contract arrangements	8	4	2	3	Mar 07
19 Failure of Partnerships	5	3	11	3	Aug 07
20 Failure to meet various Government Targets (recycling etc)	4	5	8	3	Mar 07
21 Access to Public Services inspection	5	3	11	3	Oct 07
22. LSVT application rejected by DCLG	9	3	2	2	Oct 07
23. LSVT Timetable slips	6	3	7	3	Oct 07
24. Tenants reject LSVT	9	5	1	2	Oct 07
25. Insufficient resources for LSVT	6	2	10	4	Oct 07
26. LSVT impact on general fund not planned for	6	3	7	3	Oct 07

*Poor indicates no controls in place or the few that are do not mitigate the risk. Fair indicates that some controls in place and some reduction in risk but still not adequate. Good indicates that controls in place are considered adequate and reduce the risk. Excellent indicates that effective controls in place which reduce the risk considerably. Where the score is 2/3, it means that there are controls in place which reduce the risk but it is a borderline decision whether they can be considered adequate.

RISK MAP



Significant Risks – Individual Risk Assessment

Additional criteria for assessing likelihood and impact of a potential risk

The following can be used to further inform the risk assessment process for a number of the main corporate risks.

It is important to ensure that these additional criteria are used as part of the process and not the only considerations.

Likelihood

1	<1% likely to occur in next 12 months
2	1%-5% likely to occur in next 12 months
3	5%-10% likely to occur in next 12 months
4	10%-20% likely to occur in next 12 months
5	20%-30% likely to occur in next 12 months
6	30%-40% likely to occur in next 12 months
7	40%-60% likely to occur in next 12 months
8	60%-80% likely to occur in next 12 months
9	>80% likely to occur in next 12 months

Impact

1	No impact
2	Financial loss up to £5,000 or no impact outside single objective or no adverse publicity
3	Financial loss up to £10,000 or no impact outside single objective or limited adverse publicity
4	Financial loss up to £50,000 or minor regulatory consequence or manageable / acceptable local adverse publicity or some impact on other objectives
5	Financial loss up to £100,000 or impact on other objectives or significant levels of local adverse publicity or strong regulatory criticism
6	Financial loss up to £300,000 or impact on many other processes or significant levels local adverse publicity or regulatory sanctions (such as intervention, public interest reports)
7	Financial loss up to £500,000 or impact on strategic level objectives or national adverse publicity or strong regulatory sanctions
8	Financial loss up to £1 million or impact at strategic level or “damaging” national adverse publicity or Central Government take over administration
9	Financial loss above £1 million or major impact at strategic level or closure/transfer of business

In respect of adverse publicity, it is inevitable that the authority will be subjected to scrutiny by the media. There are bound to be incidents where “misconception or misinformation” will lead to “adverse” comment but, this need not be perceived as a “risk” to the authority.