

Corporate Risk Register - Feb 2018												
No.	Risk Description	Description of Impact	Controls in Place to Mitigate Risk	Evaluation of Controls	Impact score	Likelihood score	Risk Rating (Impact x Likelihood)	Risk Owner (Executive Director)	Responsible AED/SUM	Proposed Actions - include resulting benefit and costs	Responsible Officer	Target Date for Proposed Action
1	The supporting ICT provision for Council services is not resilient, it does not keep pace with organisational priorities and change and does not assure the basic requirements in terms of operational functionality and data security. Major ICT failure or lack of system integrity - Loss of all ICT systems due to an incident which affects the server room/data centre or system failure isolated to a specific system.	Loss or disruption of services internally and to the community. Loss or corruption of data, which could generate financial implication for reconstitution or additional staff hours to re- establish backups. Whilst systems not functioning fully it provides an opportunity for malicious or criminal abuse of data or systems. Reduction in morale by staff due to inability to carry out role effectively. Reputational damage with the Community as unable to deliver services as required.	Security policy and procedures, physical secure data centre with regular access review, managed, resilient and secure network infrastructure, back up and restore systems, appropriately experienced and qualified technical staff. Work on a new purpose built Data Centre in Ashton Old Baths is underway. The facility will co-locate Council and NHS systems. A DR facility in the hospital Data Centre is also under way. Work is also underway to put in place a new high speed high resilience network based on the Councils dark fibre infrastructure. As part of the transition from the current Update LAN/WAN service to the new network the support and management of LAN/WAN security will be taken back in-house. As part of this project all the council cyber security and resilient hardware and software is being updated.	Effective	5	4	20	Kathy Roe	Tim Rainey	The provision of ICT is being reviewed as part of the transition to the ICO with the Hospital and the CCG. A Cyber Security Audit is underway in partnership with Salford Computer Audit Services.	Tim Rainey Nicola Smith Julie Hayes	Ongoing
2 New	Following the liquidation of Carillion on Jan 15th 2018 the building is not completed within time and budget	Increased costs and delays to the building completion. Reputational risks and impact on key partners e.g. Wilkinson's, College and DWP.	Report to Cabinet 7th February 2018. Enter on 8 weeks Early Works Order with Robertson's Construction through the LEP. Establish new costs and delivery programme.	Effective	5	5	20	Robin Monk	Ade Alao	Series of meetings; Project Board; Member engagement; Strategic Planning & Capital Monitoring Panel; Executive Board & Cabinet	Robin Monk	2018
3	Failure to manage the local home care market to deliver appropriate and timely care packages	Market management is a requirement of the Care Act. Failure to ensure sufficient supply of good quality home care services could place individuals at risk. There is also a significant impact on the whole health economy if individuals remain in hospital beds because a care package cannot be commissioned. There is financial impact for the economy and reputational risk for the authority.	Tender has been undertaken and new contract/providers are now in place. New model is being rolled out and is expected to improve outcomes and reduce demand on services. TMBC resources are being used to support where there is insufficient capacity to meet demand - Reablement and Homemaker Service.	Partially Effective	4	4	16	Stephanie Butterworth	Sandra Whitehead	Service has been retendered with new providers entering the market. Training and OD development programme to improve skills of the workforce. Hourly fee to providers will be increased to enable an hourly rate of £9 per hour to staff. Early indications are that this is attracting new staff to the market.	Trevor Tench	Ongoing through 2018
4	Insufficient care home capacity in the local market to provide appropriate placements for people requiring long term care	the Care Act. Failure to ensure sufficient supply of good quality care home places could place individuals at risk. There is also a significant impact on the whole health economy if individuals remain in hospital beds because a place at a home of choice is not available. There is financial impact for the economy and reputational risk for the	Discussions are in place with local providers about the level of capacity required in the local economy. At present vacancy level of 8% so manageable, but there is a risk of people not being able to find a bed at their preferred home. Process and documentation in place at the hospital should an individual and/or their family insist on a specific placement - this may mean moving to an alternative home as an interim arrangement.	Partially Effective	4	4	16	Stephanie Butterworth	Sandra Whitehead	As move forward shape of market will change - reduction in residential and greater nursing and dementia beds. A procurement exercise is about to commence to increase the level of complex mental health bed capacity in the market. The ICFT is working with nursing home managers and NHSP to support care homes with the recruitment and development of nursing staff.		Ongoing through 2018
5	The demolition of TAC and rebuilding of the service centre does not run to time or budget and the specification is not in line with future service delivery plans.	Reputational damage with partners and the Community. Staff and service delivery will be affected.	Updated reports provided to ET, Board and Cabinet. Project Plan/Risk Register in place. External specialist being used to design the new building. Joint Project Board with the College. Internal Project Group chaired by Director of Place.	Effective	4	4	16	Robin Monk	Ade Alao	Series of meetings; Project Board; Member engagement; Strategic Planning & Capital Monitoring Panel; Executive Board & Cabinet	Robin Monk	2018

APPENDIX 2

No.	Risk Description	Description of Impact	Controls in Place to Mitigate Risk	Evaluation of Controls	Impact score	Likelihood score	Risk Rating (Impact x Likelihood)	Risk Owner (Executive Director)	Responsible AED/SUM	Proposed Actions - include resulting benefit and costs	Responsible Officer	Target Date for Proposed Action
6		Service disruption, litigation, loss of public confidence and reputational damage. Negative impact on the service user's life and wellbeing.	Tameside's Safeguarding Children's Board operating effectively. Procedures and guidance in place. Partnership arrangements, information sharing protocols etc. in place. Risk Assessments carried out. Internal and external inspections of services (including schools and private providers) DBS Checks on staff, staff supervision record keeping and training in place. Partnership working with GMP and schools with Project Phoenix (CSE).	Effective	5	3	15	James Thomas	Gani Martins	The new Improvement Plan was endorsed in December 2017 by the Improvement Board, members, CEX, DfE and Ofsted as providing the right focus to drive improvement in response to our current Ofsted rating of Inadequate.	James Thomas	Ongoing
7	Failure to reduce demand upon Children's Social Care, leaving an unsustainable financial pressure on the Council.B15	Financial and reputational implications - impact on the whole Council's budget if demand cannot be reduced over time.C15	Demand reduction is a top priority of the Improvement Plan, with a particular focus D15upon the numbers and costs of LAC. New systems, services and practice focus being introduced to deliver the required reductions.	Effective	5	3	15	James Thomas	Gani Martins	Set of detailed actions within the Improvement Plan, itself monitored by the Improvement Board.	James Thomas	Ongoing
8	Failure to deliver council duties to improve the health and wellbeing of Tameside residents.	Poor health outcomes, healthy life expectancy, increasing health inequalities and increased demand on health and social care services.	Tameside and Glossop Care Together Programme provides a clear strategic commitment to address this risk. Emerging population health plans and evidence based work programmes and commissioned services aim to improve healthy life expectancy and address health inequalities by rebalancing local investments in health and social care. Public Health team members are members/leads in strategic partnerships such as Health and Wellbeing Board, Children's Improvement Board and Strategic Commissioning Board. Public Health also have a role in leadership and influencing agendas beyond health and social care commissioning to ensure responsibility for this issue amongst partners and other departments within TMBC and across the whole system is understood, shared and acted upon.	Effective	5	3	15	Angela Hardman	Debbie Watson Gideon Smith Anna Moloney	Annual Public Health business plan and commissioning intentions complying with mandatory guidance and aligned to local priorities. Transformation funding secured from GM Health and Social Care Partnership support implementation of key elements of Care Together Programme including system wide self care programme/ social prescribing and building strengths . Model of Care including Healthy Lives and Integrated Neighbourhood Teams agreed.	Debbie Watson Gideon Smith Anna Moloney	2016-20
9	The Council fails to benefit from the opportunities generated from the increased central government devolution to the Greater Manchester Region.	The Council's influence at a regional level is not sufficient for it to maximise the benefits which accrue from devolution such as increased economic growth. Failure to secure funding for the Tameside area including Health Transformational Funding.	The Council is supportive of the current devolution role and is playing a prominent role in shaping the present agreement with Central Government for Greater Manchester. Members and Officers attend meetings of the Combined Authority including the Wider Leadership Team. Lead roles have been allocated to Leaders and Chief Executives to drive the transformation programme forward. The Chief Executive is the lead for Health and Social Care and the Executive Leader leads on investment. With regards to TfGM bids are put in as AGMA collectively so that GM gets it share.	Effective	5	3	15	Single Leadership Team	Senior Management Group	The Council will deploy adequate resources to ensure that it is able to maximise the benefits.	Senior Management Group	Ongoing
10	provision. Impacting the balance of	Service disruption, litigations, loss of public confidence and reputational damage. Personal liability of members and / or officers. Negative impact on the service user's life and wellbeing.	Manuals and protocols, Health and Safety training, risk assessments, robust records and systems of inspection, Internal Audit review processes. Full evaluation of changes to service provision undertaken including consultation where appropriate and EIA's. Effective multi-agency Safeguarding Partnership now statutory Board under Care Act legislation.	Effective	4	3	12	Stephanie Butterworth	Sandra Whitehead	SCF - joined up approach across TMBC CCG & ICFT	Paul Dulson	Ongoing through 2018

No.	Risk Description	Description of Impact	Controls in Place to Mitigate Risk	Evaluation of Controls	Impact score	Likelihood score	Risk Rating (Impact x Likelihood)	Risk Owner (Executive Director)	Responsible AED/SUM	Proposed Actions - include resulting benefit and costs	Responsible Officer	Target Date for Proposed Action
11	Increased demand for services due to demographic changes - Tameside is unable to meet the needs of its ageing population and young people with increasingly complex needs transitioning into Adult Services requiring significant savings to be made, or reductions in levels of dependency, to manage rising levels of demand.	Overspending and overstretching of staff due to increased demand, following cuts in other service areas. Changes to eligibility criteria to 'ration' services may result in reduction of care and support for some, which may have a detrimental effect on health and wellbeing of service users.	logether programme, including the	Effective	4	3	12	Stephanie Butterworth	Sandra Whitehead	Development of the Integrated Care Organisation. Development of asset based schemes involving the voluntary and community centre are at the heart of this approach - Oxford Park, , 4C, Demand prediction for Children and Young People with complex needs coming through to Adult Services - looking to mitigate through Oxford Park initiative. Expansion of Shared Lives scheme.	Adults Management Team	Ongoing through 2019
12	Ineffective procurement and contract monitoring - Procurement does not delivery value for money and is not conducted in line with best practice, PSOs and European legislation. The strategic focus on commissioning is less effective due to a lack of skills and capacity to drive the change in culture.	Poor service delivery and increased costs. Legal challenges to contracts awarded would generate financial implications and potential service disruption. Reputational damage amongst suppliers and partners could impact on subsequent tenders and relationships.	Procurement Standing Orders and guidance notes. Training. Internal Audit. Waivers Reports have to be approved by Finance and Legal. Review of Authority spend analysis which highlights suppliers spend over PSO thresholds and aggregate spend for further investigation. Procurement Leads group established. Single Commissioning Function established with TMBC and CCG - new governance - staff currently orienting to the new arrangements.	Effective	4	3	12	Kathy Roe	Tom Wilkinson	A review of procurement has been commissioned with the proposal for a fully resourced solution to be agreed by April 2018 and implemented by 1st September 2018	Tom Wilkinson	September 2018
13	The inconsistent application of information standards and controls could result in a significant, unauthorised disclosure of personal and/or sensitive data. Indicating a failure to protect the Council's data and information. With potential for multiple breaches of the Data Protection Act and the Freedom of Information Act	Disruption to service delivery. Reputational damage both regionally and nationally. Financial implications due to compensation claims and costs of putting right damaged caused. Investigation by Information Commissioner, with potential for monetary penalties and enforcement action and the financial impact that goes with these.	Guidance on Intranet. Standard incident reporting forms introduced. Advice from legal. Publicity, reminders via SLT, corporate screensavers and the Wire. Information Governance Framework developed and implemented. Information Asset Audits ongoing in preparation for GDPR. Information Governance Group and Champions Group in place to keep controls under review. E Tutorials and training and awareness sessions delivered and ongoing support provided. Only encrypted removable devices can be connected to the network. Email and Files Electronic Retention Policy in place. Paperless Policy approved and work ongoing to engage with services to implement.	Effective	4	3	12	Sandra Stewart Kathy Roe	Aileen Johnson Tim Rainey Wendy Poole	Work on going in relation to GDPR. Awareness and training to be delivered and a revised E- Tutorial is to be added to Me Learning. Engagement with Information Champions Information Asset Audits underway.	Wendy Poole Information Governance Group Information Champions Group	May 2018
14	Term Financial Strategy - Failure to deliver	The corporate savings requirements are not fully understood by the services and the planned service redesigns and savings are not achieved. The full implications of reduced service provision needs to be understood to ensure that a reduction in one area does not cause a cost pressure in another . Staffing cuts, overspends, complaints and reputational damage. Failure to achieve savings targets within timescales will push future years cost pressures up, impacting on future budget reductions.	and additional pressures, so full visibility is given as to the origin of any problems. Recovery plans will be put in place. All managers issued with a budget book which sets out their approved budgets and associated resources. Budget cycle for	Effective	4	3	12	Kathy Roe	Tom Wilkinson	Work is on going with the CCG and Tameside and Glossop Integrated Care NHS Foundation Trust to review the health economy financial position to put plans in place to close the identified gap. Transitional Funding of £23.2m spread over four year has been approved. Different delivery models are being reviewed including a review of support services. Council service budgets are being reviewed and savings identified/challenged to ensure robust delivery plans are in place. Proposed changes to Business Rates need to be monitored and the impact fully evaluated.	Tom Wilkinson	2018-22

No.	Risk Description	Description of Impact	Controls in Place to Mitigate Risk	Evaluation of Controls	Impact score	Likelihood score	Risk Rating (Impact x Likelihood)	Risk Owner (Executive Director)	Responsible AED/SUM	Proposed Actions - include resulting benefit and costs	Responsible Officer	Target Date for Proposed Action
15	Ineffective use of data and intelligence to support the decision making process.	Services not fully taking advantage of the information collated by the council to properly inform project appraisals and decision making. Decisions could be challenged if not evidence based. Inefficient and ineffective service delivery to the Community.	Training on Safe and Sound Decisions. Reports reviewed by Legal and Finance to ensure legal and financial implications have been considered fully. Making use of the available insight and intelligence work that the Policy Team coordinate. Information Governance Framework is in place to provide guidance on information use and sharing to ensure the lawful use of Council information and advice can be obtained from Legal and Finance.	Effective	4	3	12	Sandra Stewart Kathy Roe	Sarah Dobson Wendy Poole	Information Champions Group established to work with the Information Governance Group to ensure that data is shared across the Council where appropriate to drive process efficiencies. Information Assets Audits underway to identify the information we hold, why we hold it, what we do with it and who we share it with. GDPR enhances the need for transparency and the rights of individuals, therefore the information asset outcomes will need to be reviewed to identify subsequent work in terms of privacy notices, sharing agreements and consent where used.	Wendy Poole	Summer 2018
16	Impact on the Council in relation to the changing landscape for schools including; Free Schools, Academisation and linked issues relating to BSF/PFI.	Loss of Land. Reputational damage for the Council if Free Schools/Academies do not perform to acceptable standards. Potential financial impact on the council if schools transfer to an academy with a deficit in place. Funding/legal implications for BSF/PFI schools. Impact on support services within the Council. Loss of capital receipts available to fund wider Council investment programme.	Deficit recovery planning support in place. The Council is only liable for a deficit if the school becomes a sponsored academy because it is deemed to be failing. Support services to schools will be reviewed during 2018/19, including the FM and catering contracts. A clear strategy is in place to support schools which is regularly monitored by the Council's Education Attainment Improvement Board.	Effective	4	3	12	James Thomas Kathy Roe	Bob Berry Tom Wilkinson	Review of support services to schools to be undertaken, new arrangements to be implemented by April 2017. Local Partnerships are undertaking a review of the PFI contracts currently in place to determine the opportunities to reduce cost and ensure affordability over the contract duration	Support Services Tom Wilkinson/ Tracy Brennand PFI/BSF Robin Monk	Support Services April 2019 PFI/BSF April 2018
17	Impact of the recession on Tameside - The economic climate affects Tameside to the detriment of residents and local businesses.	Reduced income due to reduction in CT and NNDR payments. Increased potential for fraud. Less grant money available. Increased claims for benefit and debt/housing assistance. Businesses fold and Tameside becomes less attractive to potential investors. Reduced capital receipts	Significant investment in our Town Centres including Infrastructure improvements, Vision Tameside, assisting local businesses to access funding for investment. Programme of asset disposals drive economic growth. A programme of support for Employment and Skills. Continue to bid for transportation funds. New college building on the old camp street car park is now open.	Effective	4	3	12	Robin Monk	Ade Alao Peter Taylor	GM Spatial Framework being developed. Submission, examination and adoption in 2018.	Ade Alao Peter Taylor	2018
18	Work on public service reform does not deliver the expected savings and impact on the Community. The internal ability to deliver Public Sector Reform, the savings and transformation agenda is vulnerable to capacity constraints, financial restraints and external policy.	Potential for reputational damage if the Community does not understand why we are working this way and the benefits to them.	Multi - Agency Communities Teams in place from May 2016. Identification of risk in the community include mental health, ASB and domestic abuse. Key priorities to be addressed to create stronger communities include school readiness, transition into adult hood, worklessness and ageing. Work and progress is reviewed as part of the Community Safety Partnership. Further integration will need to be actioned between the INS service, Health Neighbourhoods and Early Years Teams in Childrens Services.	Effective	4	3	12	lan Saxon	Emma Varnum	Further integration is planned with the ICO's into 4 Integrated Neighbourhood Teams with Health and Social Care	Emma Varnam	April 2019

No.	Risk Description	Description of Impact	Controls in Place to Mitigate Risk	Evaluation of Controls	Impact score	Likelihood score	Risk Rating (Impact x Likelihood)	Risk Owner (Executive Director)	Responsible AED/SUM	Proposed Actions - include resulting benefit and costs	Responsible Officer	Target Date for Proposed Action
19		Loss of accommodation, key staff, IT services, records/information, equipment. Unable to supply the legally required and identified emergency level of service to customers and service users. Loss of reputation regionally and nationally. Care in the Community overstretched and potential impacts on other front facing services depending on the nature of the incident. Public fear and concern along with potential accommodation problems. Service failure. Drains and sewers unable to cope with volume of rainfall. Community safety implications with heat stroke. Increase potential for Infrastructure and property damage, with fires, settlement and storm damage. Reputational impact. Possibility of an increase in the number of insurance claims. Accommodation problems. Public concern.	Emergency Plan, Community Risk Register, Statutory Duties. Director on Call and Forward Incident Officers in place. Regular meetings and forums with Blue Light services and other LAs. Central GM Civil Contingencies Team in place. Plans are tested. Flood plan in place. Business Continuity Plans in place. Key Officers attended Operation Ferranti in November and an action plan is now being devised with the assistance of the GM Emergency Planning Team to improve business continuity across the Council.	Partially Effective	5	2	10	Kathy Roe Ian Saxon	Mike Gurney Wendy Poole	Business Continuity Management System to be reviewed in light of the learning from Operation Ferranti.	Michael Gurney Wendy Poole	October 2018
20	Failure to support schools effectively to achieve a judgement of good/outstanding by Ofsted	If schools are unable to make the level of progress required to assure Ofsted that all children are receiving a good standard of education, the Council could attract a full inspection of its school Improvement Support Services by Ofsted. A worst case scenario would result in this function being removed from the Council. The reputational damage to the Council would be very significant.	A clear strategy is in place to support schools which is regularly monitored by the Council's Education Attainment Improvement Board. Failure to recruit a Lead Primary Officer, and the departure of the AED Learning, will result in a temporary lack of leadership in this area and mitigating actions are in place. As of December 2017 94% of primary-school aged children attend a 'Good or better' primary school, and 62% of secondary-aged children attend a 'Good or better' secondary school.	Effective	5	2	10	James Thomas	Bob Berry	Introduction of a more systematic review of schools causing concern	Bob Berry	March 2018
21	Failure to open a new secondary school in September 2018.	The borough will have failed to provide sufficient school places for approximately 300 young people. Reputational damage.	Detailed pupil planning projections from officers indicate a 'bulge' year for secondary places in 2018. This data also indicates the geographical location of where projected gaps in provision are. All necessary legal and funding requirements are in place to ensure that the new school in Littlemoss will open for Y7 in September 2018. However, the collapse of Carillion may present challenges for the projects to increase capacity in other secondary schools.	Effective	3	3	9	James Thomas	Bob Berry	Planning is on track with EFA, RSC, Laurus Trust, and council officers.	Bob Berry Robin Monk	Sept. 2018
22	The property portfolio rationalisation necessary for the delivery of appropriate council wide services is not delivered and consequently savings are not achieved.	The Council will have an unnecessary financial burden in respect of unoccupied or under used properties. Impact on the overall funds for the Council and compliance with the MTFS.	Programme of asset disposals by value. Regular sales at auction. Progressing major sites to outline planning. There is a strategy in place which is considered by the Strategic Planning and Capital Monitoring Group, and disposals are approved by Cabinet. There is a process in place to delivery £55m over 3 years. Sites/buildings to go to the Market are discussed monthly with the Executive Member.	Effective	3	3	9	Robin Monk	Robin Monk	Capital Officer Working Group being set up by Finance.	Robin Monk	2018
23	Requirements of the Care Act on service provision and associated financial implications.	Additional demands on assessed care provision and associated additional cost.	Ongoing review of Adult Social Care service delivery alongside Care Act and MCA requirements. This includes reduced dependency on residential care and increased independent living at home at lower cost.	Effective	4	2	8	Stephanie Butterworth	Sandra Whitehead			

No.	Risk Description	Description of Impact	Controls in Place to Mitigate Risk	Evaluation of Controls	Impact score	Likelihood score	Risk Rating (Impact x Likelihood)	Risk Owner (Executive Director)	Responsible AED/SUM	Proposed Actions - include resulting benefit and costs	Responsible Officer	Target Date for Proposed Action
24	Insurance purchased inappropriate or inadequate to provide necessary cover for the Council's risks.	Increased costs, service interruption, potential litigation/fines, complaints and reputational damage. Financial impact on budgets if inadequate cover in place. Risk Management processes need to be continually addressed to mitigate actual	Annual Renewal Process undertaken in conjunction with Insurance Brokers (AON). Insurance contract let every 5/7 years in conjunction with our Insurance Brokers. Regular review meetings take place with Brokers/Insurers/Claims Handlers to monitor performance and to discuss changes in the insurance market and keep abreast of new claim trends and discuss any litigation issues or court rulings that could have impact. Members of the North West Insurance Officers Group.	Effective	4	2	8	Kathy Roe	Tom Wilkinson Wendy Poole	Review meetings with Financial Management to discuss insurance matters to be scheduled. Annual Insurance Report to be presented to SLT. The necessity to purchase Cyber Insurance will be assessed as part of the 2018 /19 renewal process.	Wendy Poole	Ongoing
25	Inability to appropriately store and retrieve digital records and media in a future proof format.	Loss of data. Unable to retrieve digital records. Staff encouraged to use centralised storage and not removable drives. Financial implications with the cost of paper storage increasing. Financial and time implications of reconstructing data/information. Potential for litigation or fines from the ICO.	IT Back-Up system in place. Daily and weekly back ups taken. Back ups are stored off site. The Data Centre is now located in Rochdale MBC's 'Server room located at 1 Waterside Rochdale. Horizon scanning for future developments and improvements. Information Governance Framework in place, all staff should be reviewing the files they have in line with the Retention and Disposal Guidance. Information Asset Registers in place. Retention Policy for emails/files in place and project to put in place EDRMS and case management for all services underway.	Effective	4	2	8	Kathy Roe	Tim Rainey	Paperless Policy now in place and service areas are being encouraged to engage with ICT Services (Janet Etchells) to work towards implementation.	Tim Rainey Julie Hayes	Ongoing
26	Pension Fund investments do not provide the appropriate/anticipated level of return/ income, to support the development of the fund.		Investments are placed with different fund managers diversified across different asset classes and countries. Markets are monitored daily with the Fund's performance being a major item at each quarterly meeting of the Pension Fund Management Panel. The Funds operations are subject to both internal and external audit. There is also a statutory valuation of the Fund every three years, part of which is to compare assets to liabilities.	Effective	4	2	8	Sandra Stewart	Tom Harrington Paddy Dowdall			
27		Regulations. Reputational damage to the	Fund has chosen pooling partners and submitted a response to Government. Professional advice will be sought throughout process.	Effective	4	2	8	Sandra Stewart	Euan Miller	Continued development of pooling arrangements including implementation of new Fund custodian. Successful pooling outcomes will result in improved net investment returns and lower employer contribution rates.	Euan Miller	2018
28	Alignment of partnership working - Inability to ensure that partnership arrangements deliver agreed outcomes. Increased pressures and reduced capacity on external providers to develop and provide services.	Failure to deliver planned outcomes, loss of credibility and reputational damage. Damage to morale, financial and resource implications. Possible litigation. Partners not being in the same place as the Council. Reduced market capacity and choice of consumers.	Corporate Plan is monitored regularly by Single Leadership Team and Board. The governance arrangements regarding the Care Together Programme are now in place and decisions are made by a Joint Commissioning Board and the Executive Cabinet depending on the nature of the decision.	Effective	4	2	8	Single Leadership Team	Senior Management Group			

No.	Risk Description	Description of Impact	Controls in Place to Mitigate Risk	Evaluation of Controls	Impact score	Likelihood score	Risk Rating (Impact x Likelihood)	Risk Owner (Executive Director)	Responsible AED/SUM	Proposed Actions - include resulting benefit and costs	Responsible Officer	Target Date for Proposed Action
29	Failure to prevent or detect acts of significant fraud or corruption with consequent financial or reputational damage to the Council.	Financial loss to the Council and reputational damage. Adverse publicity both locally and nationally. Investigations are resource intensive. Prosecutions can tale a long time to conclude.	Fraud risk assessment carried out by Internal Audit. Internal Audit review systems on a cyclical basis to provide assurance that effective controls are in place and working. Internal Audit provide advice and support to managers to ensure the control environment is considered when changes are being proposed. Anti Fraud, Bribery and Corruption - Statement of Intent in place. Fraud Response plan in place. Whistleblowing Policy in place. Management are responsible for the control environment and this is tested as part of the Annual Governance Statement process as Executive Directors sign assurance letters. All ongoing investigations are reported to the Standards Panel and summary data is presented to the Audit Panel as part of regular progress reports by the Head of Risk Management and Audit Services.	Effective	3	2	6	Kathy Roe	Tom Wilkinson Wendy Poole	Investigation process and fraud documents are to be reviewed to ensure they adhere to best practice.	Wendy Poole	July 2018
30	In-effective community cohesion. The community cohesion activities undertaken do not have the required results, of raising awareness, integration and acceptance within the community.	within the community becoming more prevalent and raising community tension. Potential to lead to an increase in crime and disorder. Failure to comply with Equality	The new Community Safety Partnership and sub groups are established. With regular tension and performance monitoring through THIP group, plus Prevent and Channel Groups. An action plan to improve cohesion has been written and is being enacted. A high level intervention group has been identified for when tensions arise, threat analysis forms part of service planning.	Effective	3	2	6	lan Saxon	Emma Varnam	Community Safety structure is being reviewed to ensure the ability to respond to cohesion issues.	Emma Varnam	Ongoing
31 New		Reputational damage both regionally and nationally. Potential risk to health for residents and increased dissatisfaction and tensions within the community. Investigations	Controls are in place to monitor sites through regulatory services. Notices are served and perpetrators pursued through the criminal justice system. Established partnerships with the Environmental Agency and the Police. Testing and monitoring of suspected unlicensed sites.	Effective	3	3	6	lan Saxon	Emma Varnam	Illegal dumping of waste will be monitored through the Enforcement Panel to ensure an appropriate strategic oversight.	Emma Varnam	Ongoing
32	Failure to reconcile Guaranteed Minimum Pension (GMP) data prior to the HMRC deadline of 2018.		A project plan and project team is in place and progress against targets are being monitored by the Fund's Management Team and the Pension Administration Working Group. Working processes have also been reviewed by Internal Audit.	Effective	4	1	4	Sandra Stewart	Emma Mayall	Fortnightly progress review meetings continue to take place to ensure progress is in line with expectations. Reports are presented to the Working Group every quarter.	Emma Mayall	Ongoing (up to expected project end date of December 2018)