

Corporate Risk Register - Update September 2018

No.	Risk Description	Description of Impact	Controls in Place to Mitigate Risk	Evaluation of Controls		Likelilloou	Risk Rating (Impact x Likelihood)	Direction of Travel	Risk Owner (Executive Director) Responsi		Responsible Officer	arget 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.		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 colocate 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	\leftrightarrow	Kathy Roe Tim Raine	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	Following the liquidation of Carillion on Jan 15 2018, the new shared services centre 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.	Executive Cabinet approved the completion plan on 20 June 2018 with additional £9.4 million funding. Project Board overseeing deliver with Director of Growth as SRO. Additional project assurance provided by Cushman & Wakefield (Independent Client Adviser) and Saffer Cooper (Critical Friend). Final programme and Cost to Complete subject to completion of variation to contract anticipated or 28 Sep 2018.	Effective	5	4	20	\	David Moore Ade Alao	Series of meetings; Project Board; Member engagement; Strategic Planning & Capital Monitoring Panel; Executive Board & Cabinet	David Moore	2018
32 NEW	Despite funding for the new Ashton Old Baths Data Centre being approved in Dec 17 delays to the associated phase 3 annex redevelopment means the construction of the new Data Centre in Ashton Old Baths has been delayed. This means that all the Council's key computer systems are still being hosted in Rochdale's Data Centre. There is only a single high speed BT link between Tameside's new Core LAN/WAN network and Rochdale and any failure will result is a loss of access to all systems.	Loss of access to key councils business systems fir the duration of the link being unavailable.	The need for a secondary (backup resilient link) to Rochdale never envisaged as being needed based on earlier timetable for the new DC being completed and becoming operational. The estimated time for the new DC being available is April 2019 and the lead-time for a diverse resilient link is 4-6 months and £30k so this has not been ordered.	Partially Effective		4	20	NEW	Kath Roe Tim Raine	y Report to finalise the funding for phase 3 annex redevelopment due to go to Cabinet for approval in October 18.	Tim Rainey Nicola Smith Julie Hayes	
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	16	\leftrightarrow	Stephanie Sandra Butterworth Whitehea	Service retendered in 2016 - six zoned providers working well but the number of domiciliary providers in Tameside on the approved list has reduced. Advert to be placed on the Chest to try and attract more providers onto the list to meet unmet need. Training and OD development programme to improve skills of the workforce continues - all support to people living at home will be delivered under the new model form Feb/March 2019. With the enhanced role and career opportunities it is expected that more people will be attracted to the role as an entry into social care and nursing careers. New model has provoked discussion instigated initially by providers to consider adopting single handed care (to replace double cover wherever appropriate for some moving and handling tasks) - successful introduction of this initiative will put significant capacity into the market and contribute significantly to savings to support the additional costs of the new model. Hourly fee to providers has been increased to enable an hourly rate of £9 per hour to staff. Early indications were that this was attracting new staff to the market. Continued efforts are ongoing in relation to incorporating support from District Nursing in relation to delivering low-level healthcare tasks, links to digital health and future plans around working with community physios to again improve support at home rather than care in residential or acute settings.	Trevor Tench	Ongoing through 2019
4		Failure to ensure sufficient supply of good quality care	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.	Effective		4	16	\leftrightarrow	Stephanie Sandra Butterworth Whitehea	The shape of the market will change over the coming years and there is an ambition across GM to reduce the number of residential beds as we move to supporting more people to live at home. Work is slowly progressing in relation to four new extra care schemes to build the capacity to support the reduction in the number of residential beds required. There will also be a need for an increase in the volume of nursing and dementia beds, which will need an increase in the numbers of nurses working across the nursing home sector.	Trevor Tench	Ongoing through 2019
6	Failing to protect vulnerable children - Vulnerable children are put at risk due to poor systems/processes and reduced service provision.	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	\leftrightarrow	Richard (Tracy Mo	Improvement Plan wholly revised in December 2017 and progress reported to the independently chaired Improvement Board, members, CEX, DfE and Ofsted as providing the right focus to drive improvement in response to our current Ofsted rating of Inadequate. External scrutiny provided by Stockport and other commissioned external peer reviews.	Richard Hancock	Ongoing

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7	Failure to reduce demand upon Children's Social Care, leaving an unsustainable financial pressure on the Council.	Financial and reputational implications - impact on the whole Council's budget if demand cannot be reduced ove time.	Demand reduction is a top priority of the Improvement Plan, with a particular focus upon the numbers and costs of LAC. New systems, services and practice focus being introduced to deliver the required reductions.	Effective	5	3	15	\leftrightarrow	Richard		Set of detailed actions within the Improvement Plan, itself monitored by the Improvement Board. "Successful Families" strategy to reduce LAC drawn up in May 18 and reported to SLT.	Richard Hancock	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.	The Strategic Commission provides a clear strategic commitment to address this risk. 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 prevention. A Public Health Investment Fund has been agreed to achieve this ambition. 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	\leftrightarrow	Dr Jeanelle de Gruchy	Debbie Watson Gideon	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. Public Health Investment Fund implemented over the next 3 years.	Debbie Watson Gideon Smith Anna Moloney	2016-20
9	increased central government	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 Chie 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	\leftrightarrow	Leadership	Senior Management Group	The Council will deploy adequate resources to ensure that it is able to maximise the benefits.	Senior Management Group	Ongoing
5	services centre is not in line with future	The identified savings will not be realised. 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 Growth.	Effective	4	3	12	\	David Moore		Series of meetings; Project Board; Member engagement; Strategic Planning & Capital Monitoring Panel; Executive Board & Cabinet	David Moore	2018
10	balance of safeguarding vulnerable		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 undertake including consultation where appropriate and EIA's. Effective multiagency Safeguarding Partnership now statutory Board under Care Act legislation.		4	3	12	\leftrightarrow	Stephanie Butterworth	Whitehead	SCF - joined up approach across TMBC, CCG and ICFT. Review of systems/processes with Safeguarding Adults Managers across the service. Safeguarding Adult Policy is being updated in November 2018. Ongoing safeguarding training for all staff and managers within Adult Social Care to ensure consist application of the policy.	Carol Abrams	Ongoing through 2019
11	transitioning into Adult Services	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	dependency on services. Care Together programme, including the	Effective	4	3	12	\leftrightarrow	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, Together Centre. 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, to include young people 16+ and those with more complex needs.	Carol Abrams / Mark Whitehead	Ongoing through 2019

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12 F	reffective procurement and contract conitoring - Procurement does not elivery value for money and is not onducted in line with best practice, SOs and European legislation. The trategic focus on commissioning is ss effective due to a lack of skills and apacity 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.	New shared service arrangement with STAR procurement, bringing professionally qualified procurement staff into the organisation. Procurement Standing Orders and guidance notes. Training. Internal Audit. Waivers Reports have to be approved by Finance and Legal. Development and maintenance of contracts register, detailed spend analysis pointing to supplier efficiency and relevant market development. Strategic Commissioning Function established with TMBC and CCG.	Effective	4	3	12	\leftrightarrow	Kathy Roe	Tom Wilkinson	New procurement service went live from 1 September 2018. Next phase is to conduct in depth spend analysis across the Council and within Directorates. Contracts register has expanded four fold with amnesty in place to pick up more contracts.	Tom Wilkinson	March 2019
13 fa n F	the inconsistent application of formation standards and controls buld result in a significant, nauthorised disclosure of personal nd/or sensitive data. Indicating a lilure to protect the Council's data and information. With potential for rultiple breaches of the Data rotection Act and the Freedom of formation 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 undertaken in accordance with GDPR and a Record of Processing Activities has been produced. 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	\leftrightarrow	Sandra Stewart Kathy Roe	Aileen Johnson Tim Rainey Wendy Poole	Work on going in relation to GDPR/Data Protection Act 2018. Awareness and training to be delivered and a GDPR E-Tutorial was launched in July via Me Learning for completion by 30 September 2018. Engagement with Information Champions Information Asset Audits undertaken, Register of Processing Activities produced, Privacy Notices published on the Council's Website.	Wendy Poole Information Governance Group Information Champions Group	Dec 2018
14 F	he Council is unable to delivery the ledium Term Financial Strategy - ailure to deliver services within educed budgets and provide for ture financial stability.	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.	Budget report presented to Council in February. From 2018/19 the MTFP will be refreshed 3 times a year as part of the financial update reports that include the monitoring of the revenue budget position. Both the revenue financial update and capital monitoring will be reported to SLT, Board and Executive Cabinet. In year budget variances will be categorised between savings plans not being delivered 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 2019/20 starts in June 2018 where, Corporate projects and priorities will be affirmed, with regular update reports throughout the year for SLT and Board. CDT sessions to ensure managers aware of the financial outlook and importance of achieving savings targets. Board Business Day covers the financial savings needed.		4	3	12	\leftrightarrow	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
15 to	neffective use of data and intelligence support the decision making rocess.	and decision making. Decisions could be challenged if not	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. Information Asset Audits completed for most directorates.	Effective	4	3	12	\leftrightarrow	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 undertaken 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. The information asset audit outcomes have been used to populate the Register of Processing Activities and Privacy notices. Sharing/Processing agreements are reviewed by Risk Management and Audit to ensure they meet the required standards. A Data Protection Impact Assessment (DPIA) drafted by the AGMA IG Group is being piloted ahead of approval by SLT. Work is ongoing with Policy, Performance and Communications to ensure that the Data Protection Impact Assessment (DPIA) is build into existing processes, to ensure data is protected at the outset in the design process when new systems/changes are being considered.	Wendy Poole	Ongoing
16 ir	npact on the Council in relation to the nanging landscape for schools cluding; Free Schools, cademisation and linked issues elating to BSF/PFI.	schools transfer to an academy with a deficit in place.	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	↔	Richard Hancock Kathy Roe	Tim Bowman Tom Wilkinson	Review of support services to schools has been undertaken, financial services to schools has been bolstered. Independent review of the LEP has been commissioned to provide strategic direction to the future of the LEP arrangements and delivery of this service provision. this will initially report back by December 2018, with a view of having a long term strategy in place by summer 2019.	Support Services Tom Wilkinson/ Tracy Brennand PFI /BSF Tom Wilkinson	Support Services April 2019 PFI/BSF July 2019
17 o	oportunities and this has a detriment		Robust monitoring and implementation of appropriate measures led by the Growth Directorate. Attendance at Greater Manchester Combined Authority Meetings.	Effective	4	3	12	↔	David Moore	Ade Alao	New Vibrant Economy Strategy, 20-Year Investment Framework and Asset Management Strategy being developed.GM Spatial Framework being developed. Revised draft in Oct 2018.	Ade Alao Peter Taylor	2018

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21	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 and approved by Cabinet.	Effective	4	3	12	↑	David Moore	David Absolon	New asset disposal strategy to be considered by elected members in October 2018. Capital Officer Working Group set up by Finance.	David Absolon Tom Wilkinson	2018
30		residents and increased dissatisfaction and tensions within the community. Investigations are resource intensive.	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 Environment Agency and the Police. Testing and monitoring of suspected unlicensed sites.	Effective	3	4	12	1	Ian Saxon	Emma Varnam	Illegal dumping of waste will be monitored through the Enforcement Panel to ensure an appropriate strategic oversight. Additional measures are being developed to ensure multi agency plans are coordinated.	Emma Varnam	Ongoing
18	Failure to provide an appropriate Civil Contingencies response to an incident or emergency affecting the community or the Council, including extreme weather conditions due to climate change.		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. Following Operation Ferranti in November, a report was presented to SLT in July and an action plan is now in place to refresh/improve business continuity across the Council. Moorland Fires and other incidents/extreme weather events have demonstrated the effectiveness of the plans.	Partially	5	2	10	\leftrightarrow	Kathy Roe Ian Saxon	Mike Gurney Wendy Poole	Following a report to SLT in July an action plan is now in place. The templates obtained from the GM Civil Contingency and Resilience Unit have been reviewed and the new format will be piloted in Operations and Neighbourhoods.	Wendy Poole	Dec 2018
19	Failure to support schools effectively to achieve a judgement of good/outstanding by Ofsted.	good standard of education, the Council could attract a full inspection of its school Improvement Support Services by	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 HOS for school improvement will result in a temporary lack of leadership in this area and mitigating actions are in place.		5	2	10	\leftrightarrow	Richard Hancock	Tim Bowman	A more systematic review of schools causing concern now established.	Tim Bowman	Ongoing
20	Failure to ensure sufficient school places for all school-age children.	It is a core statutory requirement to provide sufficient school places, but with limited powers to make this happen as the council cannot open a new school so depends upon either school expansions or free school applications.	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. The collapse of Carillion has presented challenges for the projects to increase capacity in other secondary schools.	Effective	3	3	9	↔	Richard Hancock	Tim Bowman	Planning is on track with EFA, RSC, Laurus Trust, and council officers.	Tim Bowman	Sept 2018
22	Requirements of the Care Act on service provision and associated financial implications.		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	Introducing a new approach to home care that considers community based support as an additional factor to support people to live well at home.	Trevor Tench	Ongoing through 2019

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		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 claims received.	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.		4	2	8	\leftrightarrow	Kathy Roe Wilkinson Wendy Poole	Review meetings organised for October 2018 with our Insurance Brokers to discuss the renewal process for 2019/2020, ahead of launching the full procurement process later next year which will be done in conjunction with Brokers and STAR Procurement. Wendy Poole Ongoing
24	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 file 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.		4	2	8	\leftrightarrow	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. Ongoing
25	Pension Fund investments do not provide the appropriate/anticipated level of assets to meet liabilities.	Increased employer costs. Reputational damage to the Fund and overall stakeholder concern.	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	\leftrightarrow	Tom Sandra Harrington Stewart Paddy Dowdall	
26	Local Government Pension Scheme asset pooling requirements not met.	Government uses its powers to direct the Fund as set out in the new Investment Regulations. Reputational damage to the Fund and overall stakeholder concern.	Fund has chosen pooling partners and submitted a response to Government. Professional advice will be sought throughout process.	Effective	4	2	8	\leftrightarrow	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. Continued development of pooling arrangements including implementation of new Fund custodian. Euan Miller Congoing
		reputational damage. Damage to morale, financial and resource implications. Possible litigation. Partners not being in the same place as the Council Reduced market.	Corporate Plan is monitored regularly by Single Leadership Team an 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.	d Effective	4	2	8	\leftrightarrow	Single Senior Leadership Management Team Group	
28	consequent financial or reputational	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 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.		3	2	6	\leftrightarrow	Tom Wilkinson Wendy Poole	Investigation process and fraud documents are currently being reviewed to ensure they adhere to best practice and will be presented to a future meeting of SLT and the Audit panel for approval. Dec 2018

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	community cohesion activities undertaken do not have the required results, of raising awareness, integration and acceptance within the	Unrest, riots and vandalism. Inequalities 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 Legislation could lead to reputational damage and litigation.	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
	Minimum Pension (GMP) data prior to	Loss of reputation. Incorrect amounts of pension may be paid. Risk of not being compliant with The Pensions Regulator's Code of Practice.	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			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)
N	compliance with, the Pension	Potential for fines to be issued by the Pensions Regulator, loss of reputation for the Fund and resource demand in corresponding with the Regulator.	Fund undertakes an annual review of its compliance with the Pensior Regulator's Code of Practice #14. Reports on work undertaken to demonstrate continued compliance are taken to each meeting of the Local Pensions Board.	Effective	2	2	4	NEW	Sandra Stewart	Euan Miller Emma Mayall	Continued development of contribution monitoring system and escalation policy. Move to monthly data postings. Regular training for Management Panel, Local Board and GMPF Officers	Euan Miller Emma Mayall	Ongoing